

**METROPOLITAN REGIONAL EDUCATIONAL SERVICE AGENCY**

**Metro RESA**  
 1870 Teasley Drive, S.E.  
 Smyrna, Georgia 30080  
 (770) 432-2404

**North Metro Program**  
 601 Beckwith Street  
 Atlanta, Georgia 30314  
 (404) 802-6070

**PROFESSIONAL EMPLOYMENT APPLICATION**

**GENERAL INFORMATION**

1. In order for us to consider your application for employment, we must have all information requested.
2. This application is required for all certified and administrative positions.
3. PRINT all information EXCEPT handwritten Section V.
4. You must enclose a copy of your most recent annual evaluation if you are an experienced teacher.
5. You must sign the application on the last page (Section IX).
6. Georgia Law requires fingerprinting of newly employed certified personnel.
7. The enclosed letter should be reviewed as you complete this application.
8. If you are applying for a non-teaching position, you may omit Sections IV and VII.

SOCIAL SECURITY NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
*Last Name First Middle Maiden*

PRESENT ADDRESS \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
*Street City State Zip Code Phone*

PERMANENT ADDRESS \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
*Street City State Zip Code Phone*

WORK PHONE: ( ) \_\_\_\_\_ DATE AVAILABLE FOR EMPLOYMENT \_\_\_\_\_

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE STATE OF GEORGIA AND/OR UNITED STATES OF AMERICA? \_\_\_\_\_

**SECTION I**

| In column 1 below, indicate the position(s) for which you are applying in order of preference. In the second column, indicate the subject(s), grade level(s) or department preferred. |                 |           |         |            |
|---|-----------------|-----------|---------|------------|
| Position(s) Desired (Example: Teacher, Principal, Guidance)   | Office Use Only | Level (s) | Subject | Department |
| 1.  |                 |           |         |            |
| 2.  |                 |           |         |            |
| 3.  |                 |           |         |            |
| 4.  |                 |           |         |            |

*It is the policy of Metropolitan Regional Educational Service Agency (Metro RESA) not to discriminate on the basis of age, sex, race, color, religion, national origin or other legally-protected status in its educational programs, activities, or employment practices.*

**SECTION II- EMPLOYMENT RECORD**

LIST ALL PREVIOUS EXPERIENCE, BEGINNING WITH MOST RECENT. Include current educational and non-educational work experience. A resumé cannot substitute for this information.

| Dates | Grade/Subject or Position | Name and Complete Address of Employer- Including Zip Codes and Telephone Numbers | Reason for Leaving |
|-------|---------------------------|--|--------------------|
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**If applicable please list total years of experience:** \_\_\_\_\_ (Must complete 120 contract days in a regionally accredited institution to be given credit for one year of experience.)

**Military Service:**

Branch of Service: \_\_\_\_\_ Dates From/To: \_\_\_\_\_ Highest Rank: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

**SECTION III- EDUCATIONAL/PROFESSIONAL PREPARATION- List every college attended.**

| Name of Institution | Dates From/To | Degree Earned | Major | Minor |
|---------------------|---------------|---------------|-------|-------|
|                     |               |               |       |       |
|                     |               |               |       |       |
|                     |               |               |       |       |
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|                     |               |               |       |       |
|                     |               |               |       |       |

UNDERGRADUATE G.P.A. \_\_\_\_\_

**SECTION IV- STUDENT TEACHING**

Will you complete or have you completed student teaching?  YES  NO  N/A

If you have completed student teaching within the last five years, please provide the following information:

- \_\_\_\_\_

Name of school where you taught \_\_\_\_\_ dates from \_\_\_\_\_ until \_\_\_\_\_ Name of college supervisor \_\_\_\_\_

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Address of school where you student taught \_\_\_\_\_ subject \_\_\_\_\_ grade level \_\_\_\_\_ Name of cooperating teacher \_\_\_\_\_  
 School Phone ( ) \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_
- \_\_\_\_\_

Name of school where you taught \_\_\_\_\_ dates from \_\_\_\_\_ until \_\_\_\_\_ Name of college supervisor \_\_\_\_\_

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Address of school where you student taught \_\_\_\_\_ subject \_\_\_\_\_ grade level \_\_\_\_\_ Name of cooperating teacher \_\_\_\_\_  
 School Phone ( ) \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

**SECTION V- PROFESSIONAL EXPERIENCE**

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|--|
| Describe professional experiences that you feel have significantly contributed to your preparation for the position you seek. Complete this in your own handwriting. |
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**SECTION VI- PERSONAL & PROFESSIONAL INFORMATION**

Are you currently under contract with another school district?  Yes  No **If yes, name of district:** \_\_\_\_\_

**HAVE YOU EVER:** (Each question must be answered)

**YES NO**

- Failed to have a contract renewed with a school system?
- Been dismissed from employment with a school system or asked to resign?
- Broken a contract with a school system or been released from contract in lieu of non-renewal?
- Had a teaching credential denied, revoked, or suspended in any state?
- Received an unsatisfactory performance evaluation from an employer?
- Been placed on disciplinary probation or been suspended from a college or university?
- Arrested, pled guilty to, or been convicted of any offense relating to the manufacture, distribution, sale or possession of any illegal drugs?
- Arrested, plead guilty or no contest to, or been convicted of any criminal offense other than a minor traffic offense?
- Received a dishonorable discharge from the armed services?

**IF THE ANSWER TO ANY OF THE ABOVE QUESTIONS IS YES, you must provide a detailed explanation on a separate sheet attached to this application as to each offense including the specific offense for which you were arrested or charges, the disposition of the offense, and the date, court, county, state, or country where you were charged.**

**CONSENT FOR FINGERPRINTING AND CRIMINAL BACKGROUND CHECK**

I understand that in the event I am offered a position with Metro RESA I will be required to be fingerprinted and have a criminal background check in accordance with the Official Code of Georgia annotated 20-2-211 (e) (1).

I further understand that the information from the criminal background check may be used in employment decisions. I agree and consent for such background check and investigation to be conducted and agree to hold MRESA and all officials, representatives, and employees of the forgoing harmless from all claims for libel, slander, defamation of character, invasion of privacy, intentional infliction of emotional distress, negligence, and similar claims.

The furnishings of false or misleading information or the intentional withholding of material facts concerning one’s criminal record will constitute grounds for immediate termination. I consent for any former employer to furnish any information from my personnel file or evaluations relative to my performance as an employee, and I waive any right I may have for such information to remain confidential.

I authorize full investigation of the information given in this application and consent to the representatives of Metro RESA contacting my references, previous employers, schools attended, court officials, and law enforcement authorities. I also understand that any misstatement or omission of any information requested shall be a reason for non-employment or dismissal from employment. The application, transcript, references and other data are the property of Metro RESA and will not be returned to the applicant.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION VII- CERTIFICATION INFORMATION**

*Please enclose copies of all certificates held.*

**YES NO**

- 1. Do you presently hold a valid Georgia teaching certificate? If yes, Subject/Grade(s) \_\_\_\_\_ Expiration \_\_\_\_\_
- 2. Have you held a Georgia certificate that is now expired?
- 3. Have you passed the Georgia Teacher Certification test? Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Field \_\_\_\_\_
- 4. Have you held a probationary (PAT) or Provisional (BT) Georgia Certificate?
- 5. Do you hold a valid certificate from another state? State \_\_\_\_\_ Expiration Year \_\_\_\_\_  
Field \_\_\_\_\_

**SECTION VIII- REFERENCES**

You **must** list the most recent principal or supervisor under whom you have worked beginning with your most recent experience. Beginning teachers must include cooperating teacher, college supervisor, and/or major professors. **Do not include neighbors, friends, or relatives. Complete addresses including zip codes, and telephone numbers are required. Print or type reference information.**

1) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Name Title Telephone

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Address City State Zip

2) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Name Title Telephone

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Address City State Zip

3) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Name Title Telephone

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Address City State Zip

4) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Name Title Telephone

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Address City State Zip

**SECTION IX- APPLICANT’S AUTHORIZATION STATEMENT**

***READ AND SIGN THE FOLLOWING STATEMENT AFTER COMPLETING THE APPLICATION.***

By filing application for employment with Metro RESA I agree, if employed, to abide by all the policies set forth by Metro RESA. I understand that Metro RESA may investigate sources or references other than those given in this application. I acknowledge that all references will be confidential information. I understand that nothing in this employment application is intended to create an employment contract. No promises of employment have been made to me.

APPLICANT’S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

*Please allow eight weeks for processing this application.*