

# MARION COUNTY SCHOOLS

BUENA VISTA, GA 31803

Phone (229) 649-2234 Fax (229) 649-7423

Return to:

Marion County Schools  
Human Resources  
P.O. Box 391  
Buena Vista, Georgia 31803

Use typewriter or black ink to complete this form

Date: \_\_\_\_\_

I am applying for a position as a (check all that apply):  
Specify grade/subject/area preferred.

- Teacher
- Counselor
- Media Specialist
- Administrator
- Psychologist
- Other

\_\_\_\_\_  
\_\_\_\_\_

Date available for employment: \_\_\_\_\_

**CERTIFICATION** (Check one of the two boxes below)  
If you have a certificate you must enclose a photocopy.

I now have a Georgia teaching certificate. This certificate is:

Type	Field(s)	Expires
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I do not hold a Georgia teaching certificate, but will apply for one by \_\_\_\_\_

in the field(s) of \_\_\_\_\_

I have a current teaching certificate from the state of \_\_\_\_\_  
Copy attached Yes \_\_\_\_\_ No \_\_\_\_\_

**Do not write below this line**

Date Acknowledged \_\_\_\_\_ Transcripts 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

Date Completed \_\_\_\_\_ References 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

College Placement File \_\_\_\_\_ Praxis \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Marion County Schools do not discriminate against persons on the basis of race, color, national origin, gender, disability, religion or age in its employment policies and practices.

NAME \_\_\_\_\_ (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone No. \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone No. \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Have you ever held a Georgia Teaching Certificate(s)? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If not, have you applied for a certificate? Yes \_\_\_\_\_ No \_\_\_\_\_ Date Applied for \_\_\_\_\_  
 Have you taken the Georgia TCT? Yes \_\_\_\_\_ No \_\_\_\_\_ NTE/PRAXIS Yes \_\_\_\_\_ No \_\_\_\_\_  
**Please enclose either your TCT or NTE Score Report.**  
 Have you ever previously held a probationary or provisional Georgia certificate? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If you presently hold an out-of-state teacher's certificate, give the following information:

State \_\_\_\_\_ Type \_\_\_\_\_ Subject Area(s) \_\_\_\_\_

Date of Issuance \_\_\_\_\_ Validity Period \_\_\_\_\_

**EDUCATIONAL BACKGROUND:**

NAME OF SCHOOL / LOCATION	DEGREE, DIPLOMA OR NUMBER OF GRADUATE HOURS TOWARD ADVANCED DEGREE	MAJOR / MINOR
COLLEGE * UNDERGRADUATE		
COLLEGE * GRADUATE		

- Transcripts required to complete application

Did you graduate from a regionally accredited institution? Yes \_\_\_\_\_ No \_\_\_\_\_  
 By what state and regional accrediting agencies? \_\_\_\_\_  
 Approximate undergraduate GPA overall \_\_\_\_\_ In Major area of Concentration \_\_\_\_\_  
 Approximate graduate GPA \_\_\_\_\_

**STUDENT TEACHING:**

Name and location of School \_\_\_\_\_ Dates \_\_\_\_\_ Grades of Subject \_\_\_\_\_ Supervising Teacher/Principal & Phone No. \_\_\_\_\_

**EXPERIENCE:** Report in chronological order all teaching experience; continuous experience in one system should be reported on one line.

School	City/ State	From Mo./Yr.	To Mo./Yr.	Total Years	Grades or Subjects Taught

Total Years \_\_\_\_\_

**OTHER EMPLOYMENT:** List all full time non-teaching employment, including military experience, and any special training which will contribute to your success as a teacher.

Position	Firm or Agency	Address	Dates from / to

