

Employment Application



P. O. Box 1127

Americus, Georgia 31709

229-924-4406

www.southlandacademy.org

Name _____ Social Security Number _____

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____ E-Mail _____

Date of Birth _____ Sex _____ Marital Status _____ Spouse's Name _____

Spouse's Occupation _____ Spouse's Contact Number _____

Do you hold a Georgia teacher's certificate? _____ Type _____ Validity Period _____

Date available for employment: _____ Church Preference _____

Expected Salary: _____

APPLYING FOR THE POSITION OF: If you are an elementary teacher, list grades below in order of preference. If you are a secondary teacher, list subject areas in order of preference.

(1) _____ (2) _____ (3) _____ (4) _____

SUBSTITUTE: (Circle the Grade Level You Will Teach) **PK-5** **6-8** **9-12** **All Grades**

EDUCATIONAL/PROFESSIONAL PREPARATION: List every college attended.

Name of Institution	Dates (From/To)	Degree Earned	Major	Minor

STUDENT TEACHING:

Will you complete or have you completed student teaching? _____ Yes _____ No

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

1. _____
Name of school where you student taught dates from/until Name of college supervisor

Address of school where you student taught Phone Number subject grade level

Name of Cooperating Teacher Home Phone Number

LIST ALL PREVIOUS TEACHING EXPERIENCE, BEGINNING WITH MOST RECENT:

Dates	Grade/Subject or Position	Name & Complete address of Employer – include Zip code	Reason for leaving

WORK EXPERIENCE OTHER THAN TEACHING:

Dates	Nature of Work	Name and Phone Number of Employer

Have you ever had a contract not renewed, been discharged or asked to resign? Yes _____ No _____

Have you ever been convicted of a felony or misdemeanor other than minor traffic offenses?
 Yes _____ No _____ If yes, attach an explanation.

REFERENCES: Please list three (3) persons who have knowledge of your qualifications and fitness for the position you seek. Include your former administrators if you are an experienced educator. For beginning teachers include college supervisors and student teaching supervisors.

Name	Address	Occupation	Work Phone	Home Phone

READ AND SIGN THE FOLLOWING STATEMENT AFTER COMPLETING THE APPLICATION:

I hereby certify that all information contained in this application is correct to the best of my knowledge. I understand that misrepresentation of facts contained in this application will be cause for termination of employment.

 Signature

 Date

