



Gilmer County Schools

134 Industrial Boulevard
Ellijay, GA 30540-4436
706-276-5000 (phone)
706-276-5005 (fax)
www.gilmerschools.com

CLASSIFIED APPLICATION PROCEDURES

Thank you for expressing an interest in the Gilmer County School System by requesting an application for employment. Enclosed are the application packet and reference forms requested:

APPLICATION:

1. Please submit these items with your application or have them sent as soon as possible:
 - Consent for Criminal Records Check form
 - Transcripts, if applicable
 - Reference Forms: Persons not related to you should complete reference forms. Have the three (3) completed reference forms sent to:

Gilmer County Schools
Personnel Department
134 Industrial Boulevard
Ellijay, GA 30540

2. The minimum qualifications for **substitute teaching** in PreK-5 & grades 6-12 schools are:
 - High school diploma or GED
 - Applicant has reached the age of 21 (Pre-K-5)
 - Applicant has reached the age of 22 (grades 6-12)
 - Applicant has either:
 - Received a Georgia Substitute Training Certification (certificate required)
 - Received a Georgia Paraprofessional Certification (certificate required)
 - Received a Teaching Certification (transcript(s) required)
 - Applicant has completed a brief screening with a school district administrator
3. When your application file is complete, it will be placed in our applicant files. Application packets are maintained on file for one year. If you would like to have your application considered for another year, you may request in writing to have your file remain active.
4. Effective July 1, 1994, an acceptable fingerprinting record is required by law.

RETURN YOUR COMPLETED APPLICATION TO:

Gilmer County Schools
Personnel Department
134 Industrial Boulevard
Ellijay, GA 30540

GILMER COUNTY SCHOOL SYSTEM
134 Industrial Boulevard
Ellijay, Georgia 30540

Office Use Only

Date Received

Position

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

NAME: _____
Last First MI

ADDRESS: _____
Street City State Zip

PHONE NUMBER: _____ SOCIAL SECURITY NO. _____

POSITION REQUESTED: _____ DATE AVAILABLE: _____

EDUCATION

HIGHEST LEVEL OF EDUCATION: _____

COURSES TAKEN RELATING TO THIS POSITION: _____

NAME & LOCATION OF SCHOOL	DATES ATTENDED	GRADUATION DATE

REFERENCES

Please list at least three names of persons not related to you. Include employers and supervisors.

1. _____
Name and Address Telephone Years Acquainted

2. _____
Name and Address Telephone Years Acquainted

3. _____
Name and Address Telephone Years Acquainted

WORK HISTORY

DATES		EMPLOYER & ADDRESS	JOB TITLE	REASON FOR LEAVING
Beginning	Ending			

List any specific skills you have which are required for the position. (Example: computers, business machines, etc.)

BACKGROUND INFORMATION

It is the policy of Gilmer County Board of Education that all prospective employees of Gilmer County Schools will have a criminal background check through the Georgia Crime Information Center (GCIC) prior to their recommendation to the BOE for employment.

In the event that a position is offered with Gilmer County Schools, each employee is required to be fingerprinted and have a criminal background check in accordance with the Official Code of Georgia Annotated 20-2-211(e)(1).

Have you ever: (Please answer each question. If the answer is "yes" attach an explanation.)

YES NO

_____ _____ resigned or been discharged from any position while under suspicion of having engaged in criminal or immoral conduct?

_____ _____ -or are you under investigation for any such charge?

_____ _____ **been arrested, charged or convicted of a felony or misdemeanor, including pleading nolo contendere**, or are you now under investigation of any offense, other than a minor traffic offense?

_____ _____ Are you now or have you ever been a Public School Employees Retirement System (PSERS) or Teacher Retirement System of Georgia (TRS) retiree?

If yes, when and from what county? _____

I certify that all information on the application and attached documents is correct and true. I understand that any misrepresentation or omission of requested information shall be reason for non-employment or dismissal from employment. I authorize verification of all the information contained herein.

Signature

Date

The Gilmer County Board of Education is an equal opportunity employer and does not discriminate in employment on the basis of race, color, sex, national origin, religion, creed, age, or disability.

**GILMER COUNTY SCHOOLS
PERSONAL REFERENCE**

Information to be completed by the applicant:

Applicant Name (Please Print) _____

Position _____

I hereby authorize the release of the following information to the Gilmer County Board of Education.

Signature of Applicant _____

Date _____

The applicant has submitted an application with the Gilmer County School System and has listed you as a personal reference. Please answer the following questions to the best of your knowledge. This information will be treated as confidential and will not be shared with a third party outside the school system. Thank you for your assistance.

1. Relationship to the applicant? _____
2. How well do you know the applicant? _____
3. How long have you known the applicant? _____
4. Have you had knowledge of the applicant within the last 12 months? _____

EVALUATION:	POOR	AVERAGE	GOOD	EXCELLENT
Appearance				
Dependability				
Honesty				
Maturity				
Responsibility				
Ability to Perform Job				

COMMENTS: _____

Signature _____

Date _____

Address _____

Telephone _____

Please mail or fax to: Gilmer County Schools/Personnel Department
134 Industrial Boulevard
Ellijay, Georgia 30540
FAX (706) 276-5005

**GILMER COUNTY SCHOOLS
PERSONAL REFERENCE**

Information to be completed by the applicant:

Applicant Name (Please Print) _____

Position _____

I hereby authorize the release of the following information to the Gilmer County Board of Education.

Signature of Applicant _____

Date _____

The applicant has submitted an application with the Gilmer County School System and has listed you as a personal reference. Please answer the following questions to the best of your knowledge. This information will be treated as confidential and will not be shared with a third party outside the school system. Thank you for your assistance.

5. Relationship to the applicant? _____
6. How well do you know the applicant? _____
7. How long have you known the applicant? _____
8. Have you had knowledge of the applicant within the last 12 months? _____

EVALUATION:	POOR	AVERAGE	GOOD	EXCELLENT
Appearance				
Dependability				
Honesty				
Maturity				
Responsibility				
Ability to Perform Job				

COMMENTS: _____

Signature _____

Date _____

Address _____

Telephone _____

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FAX (706) 276-5005

**GILMER COUNTY SCHOOLS
PERSONAL REFERENCE**

Information to be completed by the applicant:

Applicant Name (Please Print) _____

Position _____

I hereby authorize the release of the following information to the Gilmer County Board of Education.

Signature of Applicant _____

Date _____

The applicant has submitted an application with the Gilmer County School System and has listed you as a personal reference. Please answer the following questions to the best of your knowledge. This information will be treated as confidential and will not be shared with a third party outside the school system. Thank you for your assistance.

9. Relationship to the applicant? _____

10. How well do you know the applicant? _____

11. How long have you known the applicant? _____

12. Have you had knowledge of the applicant within the last 12 months? _____

EVALUATION:	POOR	AVERAGE	GOOD	EXCELLENT
Appearance				
Dependability				
Honesty				
Maturity				
Responsibility				
Ability to Perform Job				

COMMENTS: _____

Signature _____

Date _____

Address _____

Telephone _____

Please mail or fax to: Gilmer County Schools/Personnel Department
134 Industrial Boulevard
Ellijay, Georgia 30540
FAX (706) 276-5005

**GILMER COUNTY SCHOOL SYSTEM
FORM FOR FINGERPRINTING AND CRIMINAL RECORDS CHECK**

I. Background Check Information

It is the policy of the Gilmer County Board of Education that all prospective employees of Gilmer County Schools will have a criminal background check through the Georgia Crime Information Center and National Crime Information Center (GCIC and NCIC) prior to their recommendation to the BOE for employment.

In the event I am offered a position with the Gilmer County Schools, I am 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 obtained 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 the school system and all officials, representatives, and employees of the foregoing harmless from all claims for libel, slander, defamation of character, invasion of privacy, intentional infliction of emotional distress, negligence and similar claims.

II. Criminal Conduct

(A) Have you ever been convicted of any crime, entered a plea of guilty, nolo contendere, suffered first offender adjudication, any similar criminal, quasi criminal determination, or adjudications, other than a minor traffic offense?

_____ Yes

_____ No

If the answer is yes, give detailed information on a separate sheet of paper attached to this form as to each offense, including the specific offense for which you were charged, the disposition of the offense, and the date, court, county, and state where you were charged.

(B) Have you been charged with any crime or been named in an indictment, accusation, or special presentment of any offense, other than a minor traffic violation?

_____ Yes

_____ No

If the answer is yes, please explain on a separate sheet of paper.

I understand that any misrepresentation or omission of facts on the application or addenda may be cause for refusal to hire me or for termination from the system's employment.

Signature

Date

GILMER COUNTY SCHOOL SYSTEM

FINGERPRINTING AND CRIMINAL RECORDS CHECK REQUIREMENT

It is the policy of Gilmer County Board of Education that all prospective employees of Gilmer County Schools will have a criminal background check through the Georgia Crime Information Center (GCIC) in accordance with the Official Code of Georgia Annotated 20-2-211(e)(1). You will be required to pay the fee to cover the cost of this procedure.

A fingerprint based Criminal History search is a three-step process:

1. The applicant must register and pay. Registration and payment is completed online or over the phone. Registration collects ALL demographic data for the applicant (Name, Address, SSN,...) so there is no data entry required at the fingerprint collection site. Payment can be completed online using a credit or debit card. Those who do not have the means to pay electronically, money orders or cashiers checks will be accepted on site. No cash transactions will be allowed.
2. The applicant proceeds to the fingerprint site of their choice for fingerprinting.
3. Results of the Criminal History search are forwarded to the approved recipient.

Registration Website: www.aps.gemalto.com/ga/index.htm

Phone: 1-888-439-2512

Local Print Location & Hours

The UPS Store #4805

96 Craig Street, Suite 112

East Ellijay, GA 30540

Phone: 706-698-4877

Hours: Mon-Fri 7:30 A.M. to 6:00 P.M. / Sat 7:30 A.M. to 1:00 P.M.

Processing Fee:

\$49.25 online credit or debit card payment or money order payable to Cogent System for the exact amount

Acceptable ID Document:

A current, valid and unexpired picture identification

TO COMPLETE APPLICANT REGISTRATION (listed below are required fields to complete registration):

- www.aps.gemalto.com/ga/index.htm and select the following:
- Georgia GAPS
 - Applicant Registration
 - EDUCATION AGENCIES (EA)
 - PUBLIC SCHOOLS
 - Accept Terms and Conditions
 - Agency: GILMER CO SCHOOLS (Agency ID GA930150Z)
 - Reason: School Employment – Public Schools (Statute Code 20-1-211.1)
- (Be sure you select the reason listed above or the correct background check will not be processed.)*

Last Name: _____ First Name: _____ Middle Name: _____

SSN: _____ Date of Birth: _____ Sex: _____

Weight: _____ Height: _____ Race: _____ Eye Color: _____ Hair Color: _____

Place of Birth: _____ Country of Citizenship: _____

Driver's License State: _____ Driver's License Number: _____

Address: _____ Phone #: _____

Street City State Zip

Print-out your Registration ID and take with you to the GAPS Fingerprint Site