



Mitchel Barrett
Principal

Tighe Day-Lewis
Asst. Principal

Gilmer Site
136 N. Ave.
Ellijay, GA 30540
Fax: 706-276-5008

Lumpkin Site
123 Mountain View Dr.
Dahlonega, GA 30533

Stephens Site
191 Old Big A School Rd.
Toccoa, GA 30577
Fax: 706-886-3127

Union Site
218 School St.
Blairsville, GA 30512
Fax: 706-745-33588

White Site
328 Old Blairsville Rd.
Cleveland, GA 30528
Fax: 865-0737

Memo: To All Certified Applicants

From: Aundrea Wilson

RE: Application Instructions

Thank you for your interest in a position with our system. It is our goal to recruit and retain quality individuals who are committed to our students and system. Please review the following directions prior to completing and submitting your application.

1. PRINT using BLUE INK or type all information on the application.
2. Submit the following items with your application or have them sent as soon as possible:
 - Copies of transcripts may be submitted with the initial application. Official transcripts may be required prior to hiring approval.
 - Copies of valid certificates.
 - Copies of GACE assessment results or other applicable certification tests if initial Georgia certification is being requested.
3. Sign and date the application signature page.
4. Complete a consent form for criminal background check.

When a vacancy is anticipated or occurs, all completed applications in the given area are reviewed carefully. Those applicants whose credentials (references, transcripts, responses, etc.) are best suited for the vacancy are notified for an interview.

Your fully completed and signed application may be faxed or returned to the address below or any of the MECHS sites.

Thank you, again, for your time and interest in the Mountain Education Center High School.

218 School Street
Blairsville, GA 30512
Phone: (706) 745-9575
FAX: (706) 745-3588

www.mountaineducationcenter.net

Revised Sept. 12, 2008



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Date Received: _____

218 School Street
 Blairsville, GA 30512
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PLEASE USE BLUE INK

APPLICATION FOR CERTIFIED POSITION IN _____ FIELD(S) Date: _____

DATE AVAILABLE FOR EMPLOYMENT: _____

PERSONAL DATA:

Last Name _____ First Name _____ Middle Name _____
 Social Security Number _____ Phone Number _____ DOB _____
 Address _____ City _____ State _____ Zip Code _____

EDUCATION/CERTIFICATION DATA: (Georgia Certification Website: <http://www.gapsc.com>)

University/College administering degree: Undergraduate _____ Graduate _____
 Do you presently hold a valid teaching certificate? Yes _____ No _____ Applied _____ State _____ Field _____ Level _____
 Have you passed the appropriate Georgia certification test?
 TCT: Yes _____ No _____ Field(s) Taken _____
 Praxis I: Yes _____ No _____ Exempt _____ Awaiting Results _____
 Praxis II: Yes _____ No _____ Awaiting Results _____ Field(s) Taken _____
 GACE: Yes _____ No _____ Awaiting Results _____ Field(s) Taken _____
 Have you ever been dismissed from employment with a school system, asked to resign, or resigned in lieu of dismissal?
 Yes _____ No _____
 Have you ever received an unsatisfactory annual evaluation? Yes _____ No _____ (If yes, attach copy)
 Have you ever had a teaching certificate or credential denied, revoked, or suspended? Yes _____ No _____ (If yes, attach explanation)

EXPERIENCE IN EDUCATION: List in chronological order all creditable certified experiences. (Use back for additional space)

School System	(Public/Private)	City/State	Grade(s) or Subject(s) Taught	From Mo./Yr.	To Mo./Yr.	Total Years
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
						Total Years _____

REFERENCES:

Please list three references below. These should be persons qualified to give information to show your fitness for the position you seek. Be sure to include your former principals and supervisors if you are an experienced teacher. For beginning teachers, include college supervisors, student teaching supervisor, and/or major professors. Do not include neighbors, friends, or relatives.

(√) Name	Position	Company	Address	City/State	Telephone
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____



APPLICANT SIGNATURE STATEMENT

I certify that all information is true and accurate to the best of my knowledge. I understand that any misrepresentation or omission of any information requested shall be reason for non-employment or dismissal from employment. By signing this application, I am authorizing the release of any and all information needed to properly evaluate my candidacy for employment. I understand that by Georgia law I must be fingerprinted and have a criminal records check. If employed, I agree to abide by all the policies set forth by the Mountain Education Center High School.

The application and all supporting materials are the property of the Mountain Education Center and will not be returned to the applicant.

Applicant Signature

Date

**Applications and resumes may be subject to the Open Records Law*

The Mountain Education Center High School is an Equal Opportunity Employer and does not discriminate in employment on the basis of race, color, sex, religion, creed, national origin, age or disability.

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CONSENT FORM

I hereby authorize the Mountain Education Center High School to receive any criminal history record information pertaining to me, which may be in the file of any state or local criminal justice agency within the United States.

Full Name (Please Print)

Address

Sex

Race

Eye Color

Date of Birth

State of Birth

Social Security Number

Signature

Date

Notary