

BULLOCH ACADEMY

an equal opportunity employer

RETURN TO:
Bulloch Academy
Attn: HR Department
873 Westside Road
Statesboro, GA 30458
912-764-6297 phone
912-764-3165 fax

APPLICATION FOR CLASSIFIED & SUBSTITUTE EMPLOYMENT

1. PERSONAL DATA (PLEASE PRINT)

Date _____ Social Security Number: _____

Name _____
Last First Middle

Address _____
Street City State Zip (____) _____
Cell Phone Email Address

2. DESIRED EMPLOYMENT I am interested in a Classified Position (check)

Classified Employment -

- Regular Education Parapro
- Bus Driver
- Bookkeeper
- Clerical
- Custodian
- After School
- Care Secretary
- Maintenance

Substitute Employment - I am

interested in a Substitute Position (check)

- Teacher
- Paraprofessional
- Clerical
- After School Care
- Custodian

OTHER/or: _____
(Title of advertised or announced position)

Available: Full Time Part Time Evenings Temporary

Do you have a teaching application on file? YES NO

Do you hold a valid or expired professional teaching certificate? YES NO (If yes, please include a copy)

3. EDUCATION

Are you a high school graduate? Yes No Do you hold a GED? Yes No

If "no" to above questions, please circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Schools (list high school first)	City/State	Dates	Field of Study or degree/diploma
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List specific skills/technology and software training: _____

_____ Typing _____ WPM Shorthand _____ WPM

List languages, other than English, that you speak: _____

List certificates/licenses: _____

4. OTHER INFORMATION

1. Are you at least 18 years of age? Yes No

2. Have you ever worked for Bulloch Academy? Yes No

If "yes," Job Title: _____ Dates of Employment: _____ to _____

3. Have you ever been terminated or resigned in lieu of termination from an employment position? Yes No

If "yes," explain briefly _____
Employer (Company) Name: _____

4. Are you currently employed? Yes No

If "yes," may current employer be contacted for verification? Yes No

If "no," state reason(s): _____

5. Are you legally authorized to work in the United States? Yes No

6. Will you now or in the future require sponsorship for employment visa status (e.g., H1B status)? Yes No

7. Are you currently receiving monthly benefits from a State of Georgia or GCPS retirement system? Yes No

Answer each of the following with a "Yes" or "No." You MUST attach an explanation (your statement of what occurred) and documentation (court documents, termination letters, final orders, etc.) to this application.

8. Have you resigned or been discharged from any position, including the Armed Forces, while under suspicion of having engaged in criminal, immoral, or unprofessional conduct, or are you now under investigation for any such charge or have you resigned in lieu of being discharged? Yes No

9. Have you ever been placed on disciplinary probation or have you been suspended from a college or university? Yes No

10. Have you ever surrendered an educator or teaching certificate/credential/license/permit, or had one denied, revoked, suspended, or is any investigation or adverse action now pending against you? Yes No

11. Have you ever been convicted of any felony or misdemeanor or have you ever pled nolo contendere or are you now under investigation for any such offense, other than a minor traffic offense? For the purpose of this application, Driving Under the Influence (DUI), Driving While Intoxicated (DWI) and Boating While Intoxicated (BWI) must be reported. Yes No

12. Have you ever had any disciplinary action taken against you by a previous employer, including written reprimand, suspension, demotion, non-renewal, termination or any other form of disciplinary action in any state or country? Yes No

13. Have you ever been investigated for allegations of sexual harassment? Yes No

14. Have you ever been accused and investigated for a crime of child abuse or physical abuse? Yes No

15. Have you ever been investigated for any act of discrimination on account of race, color, gender, religion, age, national origin, or handicapping condition? Yes No

5. WORK HISTORY: Begin with most recent job/work history- accounting for all years since high school

Employer _____ From _____ To _____
(month/year) (month/year)

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Supervisor's Name/Title: _____

Reason for leaving: _____

List job title and duties/responsibilities/skills: _____

Employer _____ From _____ To _____
(month/year) (month/year)

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Supervisor's Name/Title: _____

Reason for leaving: _____

List job title and duties/responsibilities/skills: _____

Employer _____ From _____ To _____
(month/year) (month/year)

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Supervisor's Name/Title: _____

Reason for leaving: _____

List job title and duties/responsibilities/skills: _____

Employer _____ From _____ To _____
(month/year) (month/year)

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Supervisor's Name/Title: _____

Reason for leaving: _____

List job title and duties/responsibilities/skills: _____

Employer _____ From _____ To _____
(month/year) (month/year)

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Supervisor's Name/Title: _____

Reason for leaving: _____

List job title and duties/responsibilities/skills: _____

Please make additional copies if necessary.

6. EXPLANATION OF LIMITED WORK HISTORY- Include years not employed

Please give reason(s) for limited work history or prolonged lapse in employment, giving dates and place(s) of residence:

7. VOLUNTEER HISTORY

(List any volunteer history that will assist us in assessing your experience in working with children.)

From (Date)	To (Date)	Type of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. STATEMENT OF QUALIFICATIONS

In your handwriting, please write a brief statement explaining why you are uniquely qualified for a position with Bulloch Academy.

9. SIGN AND DATE

PLEASE READ CAREFULLY THEN SIGN AND DATE.

I hereby declare the information provided by me in this application is true, correct, and complete to the best of my knowledge. I understand that any misstatement or omission of fact on this application shall be a reason for non-employment or for discharge from employment, if hired. I understand written references will be confidential and that I will not have access to written evaluations,

references, and opinions. I understand that if I am employed with Bulloch Academy my services will be non-contracted in nature. Non-contracted employees and their employers have an at-will employment relationship. At-will means the employment relationship can be terminated at any time or without cause by either the employee or employer. I also understand that I will be subject to a criminal background check. Substitutes work on an as needed basis only. I also understand that, as a Substitute, I am not eligible for benefits.

SIGNATURE OF APPLICANT _____ DATE _____

"Bulloch Academy does not discriminate on the basis of age, race, color, national origin, gender, religion, or disability."

