



High Meadows School

1055 Willeo Road
 Roswell, GA 30075
 Phone: 770-993-2940
 Fax: 770-993-8331

Application for Employment

High Meadows School complies with the law regarding reasonable accommodation for disabled employees. Applicants requiring reasonable accommodation in order to participate in the interview process are requested to contact the Human Resources Manager in order to arrange such an accommodation.

We are an equal opportunity employer and make all employment decisions, including those related to recruitment, hiring, training, promotion, and recognition of individuals on the basis of their ability and job related qualifications and without regard to race, religion, color, sex, gender identity, national origin, age, disability, or any other classification prescribed under applicable federal, state or local law.

You may submit a copy of a current resume; however, an application must be completed in full in order to be considered for employment.

 Date of Application

 Date Available for Employment

Position for which you are applying (check one):

- Full-time Faculty
 Part-time Faculty
 Full-time Staff
 Part-time Staff

Substitute Teacher
 If Part-time or Substitute Teaching, indicate what days you can work: _____

Please indicate specific position: _____
 (Title, grade level, department, etc.)

Personal Information

Last Name: _____ First Name: _____ Middle: _____

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

Previous Address, if present address is less than two years: _____ Best Phone: () _____

Social Security Number: _____ Email Address: _____

How did you learn of this opening? _____

Have you ever filed an application with us before? Yes No If yes, give date and position: _____

Have you ever been employed with us before? Yes No If yes, what position and when: _____

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

Have you been convicted of a crime? Yes No If yes, describe in full (Note: The existence of a criminal conviction does not constitute an automatic bar to employment. It is only necessary to include convictions which have not been expunged from the records.) _____

Faculty Applications Only (Staff and Substitute applicants please go to "Education" section.)

Please list any areas where you will be willing to serve and how much proficiency/experience you have in those areas (examples include, but are not limited to, yearbook, soccer, academic clubs, etc.):

Recent professional workshops, conferences, or other professional development activities:

Recent reading (professional):

Professional organizations of which you are a member:

Special professional honors or achievements:

Subject(s) you are certified to teach:

Of those subjects, which do you prefer to teach?

Education – All Applicants

If offered employment by High Meadows School, faculty members, business staff and all Directors MUST furnish an official copy of all college transcripts.

Name of School	Location	Academic Major	Degree Received
(High School)			
(Undergraduate)			
(Graduate)			
(Graduate, Ph.d or Other)			
(Technical/Vocational)			

Teaching Certification: Yes No

If yes, what state, type, number and expiration date:

Prior Work History (List last or present employer first. For all teaching positions, list grade level or subject areas.) If more space is needed, write on a separate page. You may attach a resume in addition to completing the following. Please provide an explanation for any gaps in employment history.

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Prior Work History, continued (List last or present employer first. For all teaching positions, list grade level or subject areas.) If more space is needed, write on a separate page. You may attach a resume in addition to completing the following. Please provide an explanation for any gaps in employment history.

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Employer: _____ From: _____ to _____
Month/Year *Month/Year*

Address: _____ Ending Salary: _____

Job Title and Duties:

Supervisor and Supervisor's Email:

Reason for Leaving:

Have you ever been terminated or asked to resign from employment? Yes No If yes, which employer and why?

Please list any Maintenance/Service/ Office Equipment you can operate and your Computer Software skills:

Teaching or Employment References

Please give three references, two who are not related to you but were former or current employers or persons who could discuss your ability to succeed in the position for which you are applying. One reference may be a personal reference (please indicate such.) Faculty applicants, please place an asterisk next to those who have personally observed your teaching in the classroom.

Name of Reference	Position/Relationship	Phone	Email

Military Service Record

Have you ever served in the armed forces? Yes No

If so, which branch/unit:

Were you honorably discharged? Yes No

Rank at discharge:

What were your duties in the Service (including special training)?

Applicant's Acknowledgement – Read Carefully Before Signing

I certify that the information given herein is true and complete to the best of my knowledge. I authorize High Meadows School to investigate any information, including but not limited to, my employment history, educational background, driving record, credit history and record of criminal convictions that it believes is relevant to my employment application. I hereby release High Meadows School and its agents of any liability arising there from.

My former employers, educational institutions, and references may provide information that they may have about me in response to inquiry from High Meadows School. I hereby release them and High Meadows School and its agents from all liability arising there from. I further authorize High Meadows School to rely upon and use, as it sees fit, any information received from such contacts.

I understand that an offer of employment by High Meadows School is contingent upon obtaining reference information learned through the above mentioned reference checks as well as upon the successful completion of a criminal history/background check. I understand that false information, omissions or misleading information or misrepresentations given in my application or during the interview process may result in a refusal to hire, or discharge in the event of employment.

I understand that I shall be required to provide documentation establishing my legal authorization for employment in the US within the first three days of my employment. I understand that all employees are at-will and do not have a contract for employment nor a guarantee of employment. I agree to honor and respect the right to privacy of every High Meadows student and parent. Any private information concerning student work, student behavior, student records and/or student medical information is considered privileged. I agree to keep all such information confidential.

Signature of Applicant

Print Name

Date

CONFIDENTIAL

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge.

I hereby authorize High Meadows School and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to High Meadows School or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources. High Meadows School and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: _____ Date: _____