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**University System of Georgia
NORTH GEORGIA
COLLEGE & STATE UNIVERSITY
Dahlonega, Georgia 30597**

APPLICATION FOR FACULTY POSITION

Please type or print all information

Full Name _____ Social Security No. _____

Street Address, RFD, Box No. _____ City _____ State _____ Zip _____

Phone Number: Home _____ Work _____ Fax _____

E-Mail _____

Birth Date _____ Place of Birth _____

Citizen of What Country _____ Sex _____ Race _____

Academic Discipline(s) _____

Specific Position Sought _____

Date Available for Appointment _____

COLLEGE AND PROFESSIONAL EDUCATION

<u>Degree</u>	<u>Institution</u>	<u>Year</u>	<u>Major Field</u>	<u>Minor Field</u>

WORK BEYOND LAST EARNED DEGREE

<u>Year</u>	<u>Institution</u>	<u>Year</u>	<u>Major Field</u>	<u>Minor Field</u>

PRIOR TEACHING EXPERIENCE

<u>Year</u>	<u>Institution</u>	<u>Rank</u>	<u>Subjects Taught</u>

PRIOR ADMINISTRATIVE EXPERIENCE (in education)

<u>Year</u>	<u>Institution</u>	<u>Position</u>

PRIOR BUSINESS, PROFESSIONAL, MILITARY EXPERIENCE

<u>Year</u>	<u>Organization</u>	<u>Position</u>

MEMBERSHIP IN PROFESSIONAL AND HONOR SOCIETIES

<u>Year</u>	<u>Name of Organization</u>	<u>Nature of Organization</u>

HONORS AND SPECIAL RECOGNITIONS

<u>Year</u>	<u>Award or Organization</u>	<u>Basis of Selection</u>

PUBLICATIONS AND RESEARCH

ARTICLES

<u>Year</u>	<u>Title</u>	<u>Name of Periodical</u>

BOOKS AND MONOGRAPHS

<u>Year</u>	<u>Title</u>	<u>Name of Publisher</u>	<u>Where Published</u>

RESEARCH PROJECTS (Unpublished)

<u>Year</u>	<u>Title</u>	<u>Auspices (Grant from foundation,etc.)</u>

I hereby certify that the above information is correct and accurate. By signing this form, I give North Georgia College & State University permission to check my references, previous employment, and all other pertinent information.

I swear (or affirm) under penalty of perjury, that all representations made by me on this application form, and/or my resume or curriculum vita are true and correct. I further understand that any misrepresentations of my credentials or any other fact on my application materials may result in immediate termination of my employment.

Signature of Applicant

Date

Office of Academic Affairs

Work: (706) 864-1602

Fax: (706) 864-1668