***First District RESA*** 

***GaTAPP APPLICATION***



Name Address

City State Zip Code 

Primary Phone # Alternate Phone # 

Primary/Personal E-mail 

Birthdate Ethnicity Gender SS #

Teaching Position Currently Assigned Previously 

School System School

Principal Mentor

**Degrees earned beginning with the most recent:**

Degree Major 

Institution Date of Degree GPA 

Degree Major 

Institution Date of Degree GPA

***Please submit the list of items below with this completed application:***

\_\_\_\_ **Completed** Data Summary Form (Candidate, Administrator, Mentor information)

\_\_\_\_ School System Assurance Form/Partnership Agreement

\_\_\_\_ Teaching Certificate

\_\_\_\_ Candidate Assurance Form

\_\_\_\_ Administrator Assurance Form

\_\_\_\_ College Transcript (s)

Copies of 3 types of GACE Scores:

\_\_\_\_ 1. Program Admission Assessment (PAA) – Available online due to COVID – 19.

\_\_\_\_ 2. GACE Ethics 360 – Always available online.

\_\_\_\_ 3. GACE Content Area (s) –*If unavailable due to COVID-19, the alignment between college degree major and subject certification sought is critical and will be analyze more stringently that if GACE content scores were available.*

\_\_\_\_ Two Letters of Recommendation

***If*** *you believe you have already taken course content that satisfies the following, include a request for recognition of this fact, a course description from the college catalog, AND a syllabus from the class with this application. Otherwise, you will take these courses in GaTAPP.*

\_\_\_\_ Exceptional Child Course that satisfies GA HB 671

\_\_\_\_ Teaching of Reading / Reading Endorsement (for Early Childhood Education candidates ONLY)

***Your acceptance will not be processed until all of the above documents have been received.***

Please submit packet to:

**First District RESA -** *Attention: Allison Lee*

201 West Lee St, Brooklet, GA 30415

🙛 ***First District Regional Educational Service Agency*** 🙙

**First in Service ~ First in Leadership ~ First in Collaboration**