



## Superintendent Professional Development Program

### "Developing Leadership for Georgia's Future"

#### Directions:

- Read the entire application carefully prior to completion.
- Be thorough, yet concise, and use only the space provided.
- Complete the application form and the one-page resume form. Additional resume pages will not be considered.
- Print both forms; sign the application form; secure your superintendent's signature; and mail both forms to the address provided on page 3.
- Print the confidential recommendation form and submit it to the individual who will provide the recommendation for you. The recommendation form must be mailed by August 1, 2017.

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#### **Name:**

\_\_\_\_\_

Last First MI

#### **Position/Title:**

\_\_\_\_\_

#### **School and/or System:**

\_\_\_\_\_

#### **Business Address:**

\_\_\_\_\_

Street City State/Zip County

#### **Home Address:**

\_\_\_\_\_

Street City State/Zip County

#### **Contact Information:**

\_\_\_\_\_

Business Phone Cell Phone Preferred Email

#### **Certificate Type/Level:**

\_\_\_\_\_

#### **Total years experience as a school and/or system leader:**

\_\_\_\_\_

#### **Superintendent Endorsement:**

If selected, I endorse the participation of \_\_\_\_\_ and confirm that the Superintendent Professional Development Program supports his/her performance goals.

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Superintendent Signature

Date

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**One letter of recommendation is required from an individual familiar with your work as a school leader. In the spaces below, provide the name and address of the individual recommending you for the Superintendent Professional Development Program.**

**Name:** \_\_\_\_\_  
**Title/Position:** \_\_\_\_\_  
**System Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

**Respond to the following questions in the space provided.**

**1 What do you expect to get out of SPDP that is different from other professional learning opportunities?**

**2 How do you describe your leadership style? What are your perceived leadership strengths? What are your perceived areas for leadership growth?**

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- 3 What interests you about serving as a public school superintendent?**
- 4 What are three leadership accomplishments you have achieved in your school system or school? Describe how you succeeded.**
- 5 Currently, what is your biggest concern about becoming a superintendent?**

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**Applicant Signature**

**Date**

**Selection Process**

**Please submit the application and resume form by August 1, 2017.  
The confidential recommendation form must be submitted by August 1, 2017.  
All applicants will be notified of their enrollment status by August 17, 2017.**

**Superintendent Professional Development Program**

Attn: Keith Porter kporter112@gmail.com

Georgia School Superintendents Association

5805 Buruss Road

Cumming, GA 30028