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 July 26, 2019.

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 exper	ience as a schoo	and/or syster	n leader:	

Superintendent Endorsement:

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

Superintendent Signature

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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?

Applicant Signature

Date

Selection Process

Please submit the application and resume form by July 26, 2019. The confidential recommendation form must be submitted by July 26, 2019. All applicants will be notified of their enrollment status by August 09, 2019.

> Superintendent Professional Development Program Attn: Keith Porter klporter112@gmail.com

Georgia School Superintendents Association 5805 Buruss Road Cumming, GA 30028