



Performance Consultant Application

Individuals who are interested in serving as consultants and meet the necessary requirements are invited to apply by (1) completing and submitting the following application; (2) submitting a 10-15 minute video of their facilitation of a professional learning event at the local, state, national or international level OR a portfolio of professional experience related to the desired area(s) of consulting; and (3) submitting a current résumé. Please mail your completed application to: GLISI Consultant Management, 3237 Satellite Boulevard, Duluth, GA 30096.

Section I - Personal and Demographic Information

Last Name	First Name	Middle Initial
Street Address		
City	State	Zip
Home Phone	Work Phone	Cell Phone
Email Address		

School/Institution Name	School District	
Institution Address		
City	State	Zip

Gender Male Female

Ethnic group (optional)

- | | |
|---|--|
| <input type="checkbox"/> Asian/Asian American | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> White |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Other |

Which GLISI programs and/or services are you most interested in being trained to facilitate? (Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> Aspiring Leaders | <input type="checkbox"/> Strategic Improvement Planning |
| <input type="checkbox"/> Base Camp / Leadership Summit Coach | <input type="checkbox"/> Talent Management |
| <input type="checkbox"/> Change Leadership | <input type="checkbox"/> Other |
| <input type="checkbox"/> Leadership Coaching | Please specify: _____ |
| <input type="checkbox"/> Mentoring | |
| <input type="checkbox"/> Research and Evaluation | |

Your application does not guarantee selection. Applications are reviewed on a periodic basis, and qualified applicants are recommended for training based on needs of the organization. Applicants selected to attend consultant training are required to engage in a demonstration of practice with feedback prior to full endorsement as a GLISI Performance Consultant.



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Section II – Professional Experience

Have you previously served as a GLISI consultant? Yes No

If yes, when? _____

For what program(s)? _____

Describe any prior involvement as a participant and/or implementer with GLISI programs and services:

If currently employed in a school/district, what GLISI programs and services does your school/district currently implement? Describe your involvement with these implementations:

List all of your current professional certifications and date(s) of expiration:

Certification Title

Expiration Date

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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Please describe your experience in the following educational settings:

Setting	Capacity	Grade Levels	Content Areas	Dates
K – 12 Public	<input type="checkbox"/> Teacher <input type="checkbox"/> Counselor <input type="checkbox"/> Administrator <input type="checkbox"/> Instr. Coach <input type="checkbox"/> Other	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle <input type="checkbox"/> High		
Postsecondary	<input type="checkbox"/> Adjunct <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time	N/A		
K – 12 Charter	<input type="checkbox"/> Teacher <input type="checkbox"/> Counselor <input type="checkbox"/> Administrator <input type="checkbox"/> Instr. Coach <input type="checkbox"/> Other	<input type="checkbox"/> Elementary <input type="checkbox"/> Middle <input type="checkbox"/> High		

Describe your work facilitating professional learning for teachers, school leaders, and/or district leaders:

Describe your work facilitating the development of school and/or district level strategic plans:

What informal and/or formal training have you had in leadership coaching? Explain.

Section III – Professional Skills

Please indicate your level of expertise with the following programs:

	Novice	Competent	Proficient	Expert
Blackboard				
eBoard				
Google Docs				
Microsoft Excel				
Microsoft Word				
Microsoft PowerPoint				

Section IV – Written Responses

Please respond to the three questions below. The questions are designed to learn about your communication skills, to understand your self-reflection process, and to ascertain your professional resilience. In a separate document, please answer the following questions; limit each question's answer to 500 words or less.

- 1. Describe the way you worked with others to handle a specific problem. How did you work collaboratively to solve the problem? What role did others play? What was the outcome?**
- 2. What do you consider to be components of the most effective professional learning and why?**
- 3. How do your core elements of leadership align with GLISI's organizational mission, vision, and values?**

Section V – Verification

By signing below, I verify that the information I am submitting is true. I understand that a false statement, omission or misrepresentation on any part of my application or materials submitted during the application process is grounds for being denied eligibility to or dismissal from consideration as a GLISI Performance Consultant.

Signature _____ **Date** _____