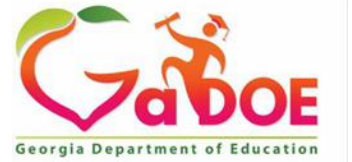


Georgia Instructional Materials Center Transcriptionist Checklist



Date: _____

Contact Information

Name: _____

Business Name (if different than legal name): _____

Address (1): _____

Address (2): _____

City: _____ State: _____ Zip: _____

Telephone: _____

Cell Phone: _____

Email Address: _____

NLS Certifications

Literary Nemeth Proofreading Music

Other Trainings

UEB Other (please list)

Attachments: (must include all items)

<input type="checkbox"/> Cover letter	<input type="checkbox"/> Resume
<input type="checkbox"/> References (2)	<input type="checkbox"/> Certification Copies
Work Samples: <input type="checkbox"/> Braille <input type="checkbox"/> Tactile (if applicable)	
<input type="checkbox"/> Sample Print Copies	

Signature

Date

Send materials to:

GIMC
Georgia Department of Education
205 Jesse Hill Jr. Dr. SE
1870 Twin Towers E
Atlanta, GA 30334
or
GIMC@doe.k12.ga.us