

**Michelle Burgess**  
**SUPERINTENDENT (000100054 Super 121813)**

407 4th Street  
St. Augustine, FL 32084  
[eab50@aol.com](mailto:eab50@aol.com)  
(904) 829-6272

**PERSONAL INFORMATION**

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**Contact Information**

First Name	Michelle	Last Name	Burgess
Middle Name	Stover	Email	eab50@aol.com
Primary Phone	904-829-6272	Alternate Phone	904-540-6000
Preferred Contact Method	Phone		

**Address**

Street	407 4th Street	City	St. Augustine
State	Florida	Zip Code	32084

**Equal Opportunity Information**

Providing this information is strictly voluntary. You will not be subject to adverse action or treatment if you choose not to provide this information. If you choose not to provide this information, please select 'Decline to Identify.'

Ethnicity	American Indian or Alaska Native	
Asian	Black or African American	
Native Hawaiian or Other Pacific Islander	White	Yes

**CERTIFICATION**

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**Certification Information #1**

Certification Area	Elementary Ed 1-6	Certification Area Type	Professional Certification
Grade Level	1-6	Certification State	Florida

**Certification Information #2**

Certification Area	Ed Leadership	Certification Area Type	Professional Certification
Grade Level	1-12	Certification State	Florida

**Certification Information #3**

Certification Area	English 5-9	Certification Area Type	Professional Certification
Grade Level	5-9	Certification State	Florida

**Certification Information #4**

Certification Area	Certification Area Type
Grade Level	Certification State

**Certification Information #5**

Certification Area	Certification Area Type
Grade Level	Certification State

**ADDITIONAL CERTIFICATION AREAS**

Certification Area  
Details  
Certification State

**Computer Skills**

<i>Years of Experience</i>	<b>11</b>	<i>Keyboarding Words Per Minute</i>	<b>80</b>
<i>Word Processing</i>	<b>Yes</b>	<i>Spreadsheets</i>	<b>Yes</b>
<i>Database</i>	<b>Yes</b>	<i>Web / Internet Browser</i>	<b>Yes</b>
<i>E-mail</i>	<b>Yes</b>	<i>Graphics</i>	<b>No</b>
<i>Microsoft Windows</i>	<b>Yes</b>	<i>Apple Macintosh</i>	<b>Yes</b>

**EMPLOYMENT HISTORY****Present Position**

<i>Present Title</i>	<b>Assistant Principal</b>	<i>Name of Employer</i>	<b>Diocese of St. Augustine</b>
<i>Start Date</i>	<b>08/01/2001</b>	<i>Supervisor Name</i>	<b>Janet Morton</b>
<i>Supervisor Phone Number</i>	<b>904-230-4448</b>		
<i>Duties and Responsibilities</i>			

**Educational Experience – Diocese of St. Augustine, Jacksonville, Florida****2001 to 2003 - Cathedral Parish School, St. Augustine, Florida****Junior High Literature Teacher****Computer Teacher – Grades 1st through 8th****2003-2009 – Cathedral Parish School, St. Augustine, Florida****3rd Grade Teacher – Full Time; Part-Time Assistant Principal****2009-Present – San Jose Catholic School, Jacksonville, Florida**

**Assistant Principal. Duties include Professional Development of Staff, Curriculum Development, ITBS Testing –Review of Results and Recommendations, Observations, Tours, PreK4 Liaison, Title Funds, Response to Intervention Committee, Contact person for Title I Services/Catapult Learning, Liaison, Teacher Certification Renewal, Conference with Teachers, Parents, and Students, assist Principal with all facets of administration.**

**Part-time teacher for students requiring remedial assistance.***Reasons for Leaving***Enrollment has decreased significantly; standards only allow for part-time assistant principal. No benefits available.**

*May we Contact this Employer*      **No**

**Experience in Education #1**

<i>From (mm/yyyy)</i>	<b>08/2001</b>	<i>To (mm/yyyy)</i>	<b>06/2009</b>
<i>Employer Name</i>	<b>Cathedral Parish School/Diocese of St. Augustine</b>	<i>Assignment</i>	<b>Teacher, 3rd Grade</b>
<i>Reason For Leaving</i>	<b>Assistant Principal Position</b>	<i>Supervisor Name</i>	<b>Janet Morton, Principal</b>
<i>Supervisor Phone Number</i>	<b>904/230-4448</b>		
<i>Duties and Responsibilities</i>	<b>3rd Grade Classroom Teacher; all-inclusive classroom. All subject areas were taught.</b>		
<i>May we Contact this Employer</i>	<b>Yes</b>		

**Experience in Education #2**

<i>From (mm/yyyy)</i>	<b>09/2012</b>	<i>To (mm/yyyy)</i>	<b>12/2012</b>
<i>Employer Name</i>	<b>County of Bunnell, Flagler Guardian ad Litem Program</b>	<i>Assignment</i>	<b>Child Advocacy Coordinator/Case Manager</b>
<i>Reason For Leaving</i>	<b>Miss Teaching!</b>	<i>Supervisor Name</i>	<b>Jody Alvarez</b>
<i>Supervisor Phone Number</i>	<b>386-437-7457</b>		
<i>Duties and Responsibilities</i>			

**Currently employed by the County of Bunnell, Guardian ad Litem Program, Child Advocacy Coordinator, Case Manager. In this capacity, I am required to coordinate volunteer personnel with children who have been adjudicated dependent for visitation and Court reporting procedures. In addition, I conducted visitations and report to the Court through documentation pleadings which cover the child/parent**

psychiatric counseling, academic, safety, well-being, developmental services. Attendance at court and preparation for hearings is also part of my position. The communication with volunteers as well as training and computer skills for our Tracker system are also required.

May we Contact this **No**  
Employer

### **Experience in Education #3**

From (mm/yyyy)	To (mm/yyyy)
Employer Name	Assignment
Reason For Leaving	Supervisor Name
Supervisor Phone Number	
Duties and Responsibilities	
May we Contact this	
Employer	

### **Work Experience #1**

Employed from (mm/yyyy)	Employed to (mm/yyyy)
Employer	Title
Reason For Leaving	Supervisor Name
Supervisor Phone Number	Supervisor Email
Duties and Responsibilities	
May we Contact this	
Employer	

### **Work Experience #2**

Employed from (mm/yyyy)	Employed to (mm/yyyy)
Employer	Title
Reason For Leaving	Supervisor Name
Supervisor Phone Number	Supervisor Email
Duties and Responsibilities	

### **Experience Summary**

Actual experience in a scholastic environment (with the exception of non-academic experience).

Years of teaching experience	<b>11</b>	Years of student teaching experience	<b>11</b>
Years of administrative experience	<b>2</b>		

## **EDUCATION**

### **Secondary/High School Information**

School Attended	<b>St. Augustine High School</b>	City/State	<b>FL</b>
Activities/Honors			
Degree	<b>High School Diploma or GED</b>		

### **College/University/Vocational Institution #1**

Name of School	<b>Other: Saint Leo University</b>	Attended From (mm/yyyy)	<b>06/1999</b>
Attended To (mm/yyyy)	<b>06/2001</b>	Degree	<b>Bachelor of Science</b>
Subject	<b>Elementary Ed</b>		

### **College/University/Vocational Institution #2**

Name of School	<b>Other: Florida Community College of Jacksonville</b>	Attended From (mm/yyyy)	<b>05/1992</b>
Attended To (mm/yyyy)	<b>05/1994</b>	Degree	
Subject	<b>Other: Legal Assisting</b>		

**College/University/Vocational Institution #3**

Name of School	Other: Barry University	Attended From (mm/yyyy)	06/2006
Attended To (mm/yyyy)	08/2009	Degree	Master of Science
Subject	Educational Leadership		

**Student Teaching #1**

Name of School	Cathedral Parish School	Subject	Elementary Education
Grade	1	Semester	Fall
Year	1999		

**REFERENCES****Nancy Clark**

Title	Teacher, 3rd Grade	Relationship	Colleague
Address	c/o Cathedral Parish School, 259 St. George Street	City	St. Augustine
State	Florida	Zip	32084
Email	nclark@cpsschool.org	Phone	904-806-1844
From	8/01/2003	To	Present

**Janet Morton**

Title	Principal	Relationship	Supervisor
Address	c/o 259 St. George Street	City	St. Augustine
State	Florida	Zip	32084
Country	USA		
Email	jmorton@yahoo.com	Phone	904-230-4448
From	08/2005	To	Present

**DISTRICT QUESTIONS****District Questions**

Have you retired from any State of Florida administered retirement plan? You are considered retired if: 1) You have received any benefits under the FRS Pension Plan (including DROP). 2) You have taken any distribution (including a rollover) from the FRS Investment Plan, or alternative retirement programs offered by state universities (SUSORP), state community colleges (CCORP), state government (SMSOAP), or local governments.

**No**

If you have retired from a state of Florida administered retirement plan, is the effective date July 1, 2010 or later?

**No**

Have you previously been employed, other than a substitute teaching capacity, with the Flagler County School District?

**No**

If "Yes", please provide the dates of your previous employment with the District and your position.

Is any member of your immediate family employed by the school district of Flagler County?

**No**

If "Yes", please provide the name of your family member, School/Dept where they worked, and Position Held.

Been investigated for misconduct related to your employment?

**No**

If "Yes", please provide a detailed explanation.

Been arrested or charged(even if no contest or charges dropped or pled down) for a crime? **No**

If you answered "Yes" please provide details including the date of the charge, the court action, and the address of the court involved.

Are you currently under indictment or subject of any other pending legal proceeding for a criminal offense?

**No**

If "Yes", please provide details including the date of the charge, the court action, and the address of the court involved.

Are you under investigation by any local, county, state, federal, or international agency for any reason (including any violation of the Florida Code of Ethics)?

**No**

If yes, please provide a detailed explanation.

Been named by a state agency responsible for child welfare as a perpetrator in an indicated report of child abuse or neglect?

**No**

If yes, please provide a detailed explanation.

Had a report of child abuse or sexual activities involving a K-12 student or minor filed against you with a school district, a state or federal agency, a police agency, or in court?

**No**

If yes, please provide a detailed explanation.

Have you ever had a professional certificate, credential or license (of any kind) revoked or suspended, or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards or conduct. Are there any pending adverse actions against you?

**No**

If yes, please provide a detailed explanation.

Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct?

**No**

If yes, please provide a detailed explanation.

Have you surrendered a professional license of any kind before its expiration? **No**

If yes, please provide a detailed explanation.

Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?

**No**

If yes, please provide a detailed explanation.

Have you ever been suspended, terminated, non-reappointed, released during a probationary period or resigned in lieu of termination or non-reappointment from an educational institution, the State of Florida, or any other employer/organization including the military?

**No**

If yes, please provide a detailed explanation.

Have you ever been placed on leave by your employer or left such employment prior to the end of the contract term due to any reason other than the Family Medical Leave Act or a physical disability?

**No**

If yes, please provide a detailed explanation.

Is your physical/mental health condition such that you can fulfill the essential job functions of the position for which you are applying (either with or without reasonable accommodations)?

**Yes**

Are you considered a "High Risk" offender, according to Senate Bill 988? **No**

If you answered YES to the question above, please explain in the space provided, including the date of your last conviction.

Have you ever had any record sealed or expunged in which you were convicted, found guilty, had adjudication withheld, entered a pretrial diversion program, or pled guilty or nolo contendere (no contest) to a criminal offense other than a minor traffic violation (DUI is NOT a minor traffic violation)? Failure to answer this question accurately could result in dismissal from employment. A YES or NO is required by Florida Law.

**No**

If Yes, you must specify the City Where Arrested, State, Date of Arrest, Charge(s), and Disposition(s). Please NOTE: Sealed or expunged records must be reported pursuant ss. 943.0585 and 943.059, FS. However, the existence of such records will not be disclosed nor made part of your certification file which is public record.

Have you ever been convicted, found guilty, had adjudication withheld, entered a pretrial diversion program, or pled guilty or nolo contendere (no contest) to a criminal offense other than a minor traffic violation (DUI is NOT a minor traffic violation)? Failure to answer this question accurately could result in dismissal from employment. A YES or NO is required by Florida Law.

**No**

If Yes, you must specify the city where arrested, state, date of arrest, charge(s), and disposition(s).

Are you a veteran as defined by s. 295.07, Florida Statutes? **No**

Are you claiming Veteran's Preference? If yes, a DD214 must be submitted under attachments.

**No**

If you are claiming Veteran's Preference, please indicate the provision under which you qualify.

Provision 1 – A veteran of any war who has served on active duty for one day or more during a wartime period, excluding active duty for training, and who was discharged under honorable conditions from the Armed Forces of the United States of America.

Provision 2 – A veteran with a service-connected disability who is eligible for or receiving compensation, disability retirement, or pension under public laws administered by the U.S. Department of Veterans Affairs and the Department of Defense.

Provision 3 – Receipt of any Armed Forces Expeditionary Medal is qualifying for veterans' preference.

Provision 4– The spouse of a veteran who cannot qualify for employment because of a total and permanent service-connected disability, or the spouse of a veteran missing in action, captured, or forcibly detained by a foreign power.

Provision 5 – The unremarried widow or widower of a veteran who died of a service-connected disability.

If you state that you were "A veteran of any war...", please indicate the war, according to these options:

Korean Conflict: June 27, 1950 to January 31, 1955

Vietnam Era: February 28, 1961 to May 7, 1975

Persian Gulf War: August 2, 1990 to January 2, 1992

Operation Enduring Freedom: October 7, 2001 to date to be determined

Operation Iraqi Freedom: March 19, 2003 to date to be determined

## TEACHER/CERTIFIED QUESTIONS

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### Teacher/Certified Questions

Have you ever had a teaching certificate revoked, suspended or placed on probation by any state Department of Education?

**No**

If "yes", please provide details including state, dates, and action(s) taken or pending.

**ATTACHMENTS**

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**Attachment***Transcripts (Required)*[Transcripts 001.jpg](#)**DISCLAIMERS AND AFFIRMATION**

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*District Policy*

**The Flagler County School District strives for a balanced, productive workforce, that is diverse in terms of age, gender, and cultural identity. We do not base hiring or promotional decisions on factors other than performance and professional growth potential.**

*Application Confirmation Statement*

**I affirm that all information set forth in this application is accurate, truthful and complete. If I am employed by Flagler County School District, I will abide by all Board of Education and school policies, work on assigned committees, and continue my professional growth to the best of my ability and within reasonable and personal standards. I grant permission for school officials to obtain a personal record check from the federal, state, county, and/or local law enforcement agencies and Division of Family Services. I understand that references may be contacted as soon as I submit an application. I release individuals listed as references and current or former employers from any liability for information given in response to a request for an employment reference.**

**I understand that I will be required to take a drug test and that some positions in the district require a physical exam prior to assuming any position for which I may be employed. In the event that I am employed by the District and in the further event that I have provided false or misleading information in this application or in subsequent employment interviews, I understand that my employment may be terminated at any time after the discovery of the false or misleading information.**

*I agree to the terms above*      **Affirm**

*Initials*      **msb**

*Affirmation Date*      **12/19/2013**



MAJOR: Educational Leadership

Graduate Transcript

1767742  
Michelle S. Burgess  
407 4 Street  
Saint Augustine FL 32084

October 26, 2011 Pg 1 of 1

# Barry University

11300 NORTHEAST SECOND AVENUE  
MIAMI SHORES, FLORIDA 33161

## PERMANENT ACADEMIC RECORD

REJECT DOCUMENT IF SIGNATURE BELOW IS DISTORTED

Cynthia A. Chruszczyk, Registrar

This officially sealed and signed transcript is printed on a "Scratch-Proof" paper with the name of the university printed in small red type across the face of the document. When photocopied the word "COPY" should appear. A BLACK ON WHITE OR A COLOR COPY SHOULD NOT BE ACCEPTED.



COURSE	Course Title	ENDED	GRD	ATT	CPT	PTS	COURSE
EDU 614	SUMMER II 2008(08/03)						
EDU 614	G2 VISIONARY LEADERSHIP IN E	07/26	A	3	3.0	12.0	
EDU 656	G2 THE REFLECTIVE EDUCATOR	07/26	A	3	3.0	12.0	
EDU 654	G2 SPRIT/ART OF LEADERSHIP	07/26	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						
ECT 687	FALL 2008(08/04)						
	G2 ADMIN APPLICATIONS OF TEC	12/13	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						
EDU 615	SUMMER II 2009(09/03)						
EDU 624	G2 ETHICS & COMM FOR LEADERS	08/01	A	3	3.0	12.0	
EDU 674	G2 INSTR DESIGN MEASURE & E	08/01	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						
TSL 509	FALL 2009(09/04)						
	G1 CC COM & UNDERSTANDING	12/13	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						
EDU 675	SPRING 2010(10/01)						
	G1 SCHOOL FINANCE	05/08	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						
EDU 637	SUMMER II 2010(10/03)						
	G2 EDUCATION DECISION MAKING	07/17	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						
EDU 676	G2 SCHOOL PERSONNEL ADM & DE	07/10	A	3	3.0	12.0	
EDU 701	G2 ADV STUDY IN EDUCATION	07/24	A	3	3.0	12.0	
	Term GPA 4.000						
	Cum GPA 4.000						

Degree Received: Master of Science  
Date Conferred: 07/31/2010  
Majors: Educational Leadership  
End of official record

This transcript was issued  
to the student in a sealed  
envelope and it is considered an  
**OFFICIAL COPY**

TO VERIFY: TRANSLUCENT GLOBE ICONS MUST BE VISIBLE WHEN HELD TOWARD A LIGHT SOURCE