

## Cicely Austin



### Summary

- Creatively taught rigorous state approved social studies standards.
- Facilitated mandated RTI services for students.
- Supported English Language Learners with specialized lessons.
- Provided a social-emotional learning focused environment for at-risk students.

### Experience

August 2014- Present

**Social Studies teacher (middle grades)** DeKalb County Schools, Georgia.

- Facilitating instruction for diverse fifth- eighth grade students: at-risk youth, ELLs, SWD, and gifted.
- Monitoring grades/scores (ex. via SLDS) and developing goals and remediation plans for students.
- Consistently communicating with, and liaising with administrators, counselors, parents and guardians to improve students' educational outcomes.
- Collaborating with grade-level teachers to create viable lessons for all students.
- Conducting state mandated tests; computer generated and paper/pencil.
- Facilitating two professional learning sessions for staff.

October 2010-May 2014

**Interrelated Paraprofessional** DeKalb County Schools, Georgia.

- Instructing Kindergarten, second, and fourth grade students in small groups to fulfill IEP goals.
- Collaborating with homeroom teachers within self-contained special education classrooms.
- Performing hearing and vision tests.
- Working with English Language learners to improve proficiency in literacy, math and science.

January 2009-May 2015

**Parent's Newsletter writer/editor (volunteer)** International Community School, Georgia.

- Communicating with assistant principals and teachers to obtain valuable up-to-date information for parents.
- Composing letters, emails, and newsletters regarding school curriculum, extra curricular activities, and community events.
- Attending school events and meeting with parents and community stakeholders.
- Instructing volunteers on using the Constant Contact email program.

November 2009-October 2010

**Special needs bus aide** DeKalb County Schools, Georgia.

- Received walk-on students and students in wheelchairs; ensured they were seated safely throughout journey.
- Constant observation of student's behavior for possible problems, addressing problems if they arose.
- Daily communication with teachers and parents about student's wellbeing and behavior.



DBHDD

Judy Fitzgerald, Commissioner

**Mental Health, Developmental Disabilities & Addictive Diseases  
Advisory Council**

**APPLICANT INFORMATION**

Name: *Cicely Austin*

Current address: [Redacted]

Apartment/Suite Number:

City: [Redacted]

State: *GA*

ZIP Code: [Redacted]

Region Number: *3*

Race/Ethnicity (optional): *Mixed*

Gender (optional): *Female*

County of Residence: *DeKalb*

Day Phone: [Redacted]

E-Mail: [Redacted]

Evening Phone: *Same*

Fax Number: *N/A*

Cell Phone: *Same*

Best Way to Contact You: *phone or email*

**ADVOCACY/PROFESSIONAL GROUP EXPERIENCE**

Please list any current or past associations with advocacy and/or professional groups working in the area of behavioral health or developmental disabilities including any positions held (attach separate sheet, if necessary):

*I have not had any past associations with advocacy or professional groups working within behavioral health or developmental disabilities, nor do I have any such current associations.*

*My civic association has been with Stone Mountain Historic Preservation Committee, which relates to the preservation of historic buildings. Professionally, I am a teacher.*



Judy Fitzgerald, Commissioner

### ATTESTATION OF REGIONAL ADVISORY COUNCIL MEMBER

The purpose of this document is to certify that I am eligible for appointment to the Region 4 Regional Advisory Council.

I Cicely Austin, do solemnly affirm the following:  
Print Name

- I am not a member of a community service board that serves this region
- I am not an employee or board member of a public or private entity that contracts with the Department of Behavioral Health and Developmental Disabilities (DBHDD), the Department of Human Services (DHS), or the Department of Public Health (DPH) to provide health, mental health, developmental disabilities, or addictive diseases services within this region
- I am not an employee of the regional field office of this region
- I am not an employee of this regional field office or employee or board member of any private or public group, organization, or service provider which contracts with or receives funds from this regional office
- I am not an employee or board member of DBHDD, DHS, or DPH
- I do not, on behalf of myself or any business, or for any business that I or my family has a substantial interest in, transact business with this region's Advisory Council
- I am not the spouse, parent, child, or sibling of a council member of the Advisory Council or of any of the members or employees mentioned above on this list
- I have no motivations of private or personal interest that would make my appointment improper or appear improper

### SIGNATURE

I authorize the verification of the information provided and agree to the request of any additional information. I have received a copy of this application.

Signature of Applicant:

*C Austin*

Date: 8/8/19

**IMPORTANT:** Please return completed form to local Field Office.

Region 3 Field Office  
3073 Panthersville Road, Building 10  
Decatur, Georgia 30034

Email: [Ruth.Coody@dbhdd.ga.gov](mailto:Ruth.Coody@dbhdd.ga.gov)  
Fax: 404-244-5072

Approver	Date
Mark Green, Human Resources Director	12/14/2016
Anne Akili, Psy.D., Policy Director	12/13/2016
Angela Jones, MHA, DD Policy Coordinator	12/13/2016

Regional Advisory Council Member Acknowledgement

Cicely Austin  
Member Name Printed

<u>C Austin</u>	<u>2/8/19</u>	<u>3</u>
Signature	Date	Region

Acknowledged as reflected in DBHDD Regional Advisory Council Advisory Council Bylaws, Article V, Section 5.12 Ethics