

WASKOM ISD IS AN EQUAL OPPORTUNITY EMPLOYER.

We consider applicants for all positions without regard to race, color, national origin, age, religion, sex, marital or veteran status the presence of a non-job-related medical condition or handicap, or any other legal protected status.

Application of	HZUCENA GOYIZAIEZ
	505 Bruckmuller St. Marshal
	address \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	present position
for	new position
	indicate preference in grade/s or subject/s
	05-08-14 Inven Hongly. signature

WASKOM INDEPENDENT SCHOOL DISTRICT

SCHOOL AVENUE, BOX 748 WASKOM, TX. 75692 (903) 687-3361

e of Application: Social Security N	o. <u>(037-32-10658</u>
Name: AZUCENA GONZAJEZ	
sent address: 505 Bruckmuller St	Telephone No. 903-935-2633
arshall TX 75670	Zip Code. 15070
manent address: at the moment	(CLIV) 03-742-0765
rme as a bove.	Zip Code
sition for which you are applying: PYC-K TCAC	ner
edentials included with application: Resume All teaching and professional certificates All transcripts showing degrees	
te available:	
rmer Waskom ISD Employee: yesno	
yes, give dates of employment:	
e you aware of any reasons you would not be able to perform u are applying? yes no If yes, p	n the duties of the position for which please explain:
you have a relative who is a member of the Waskom ISD Es no	
ave you ever been convicted of a felony or offense involving tempted theft, rape, murder, swindling, and indecency with a ceived probation or deferred adjudication? yesr	a minor) and/or
tempted theft, rape, murder, swindling, and indecency with a	a minor) and/or

Certification		All level art All level health All level health Librarian Counselor Special Education	and PE	Nurse ng Teacher visor s (specify)
I	List teaching experience beginning	with most recent years.		
a c h	Name of School and Location	Type of Assignment	Dates Taught	Reason for Leaving
n g				
X				
i				
6	Total creditable years(Full creditable.)	time teaching in college, po	l ublic school, or in an accredi	ted private school is
E	Schools Attended: List all applica	ble information.		
uca	Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree or Certificate	Year Graduated
0	ETBU BO	nchelor in		2014
/ /		Science		
T	(E	c-(0)		
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References

Please list references, including especially superintendents and principals under whom you have taught, who have first hand knowledge of your character, personality, scholarship and teaching ability.

	NAME	ADDRESS	PHONE	OFFICIAL POSITION
	Lee Ann Jones	East Elementary Hallsville, TX	903-668-6990 (X1638)	Teacher (2nd)
1		William B. Travis Marshall Tx,	903-926-0284	(kinder)
	Karen Tutt University Sup	RUZOL	903-235-219	University supervis
	V			

Verification

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge, and understand that any deliberate falsifications, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.

I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand that the district is required by Texas Education Code #21.917 to obtain criminal history record information on applicants for employment.

Furthermore, this application becomes the property of the district which reserves the right to accept or reject it. This application shall be considered active for a period of time not to exceed one year. Any applicant wishing to be considered for employment beyond this time period must reapply to extend or renew the application.

05-08-14