



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

Jessica Nelson

name

479 Lakewood Rd. Waskom, TX 75692

address

Middle school counselor Marshall ISD

present position

for

High school counselor Waskom ISD

new position

high school (9-12)

indicate preference in grade/s or subject/s

6/13/16

date

Jessica Nelson

signature

WASKOM INDEPENDENT SCHOOL DISTRICT

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

Date of Application: 6/13/16 Social Security No. 631-10-4968

Full Name: Jessica Michelle Nelson

Present address: 479 Lakewood Rd. Telephone No. 903-926-1049
Waskom, TX 75692 Zip Code. 75692

Permanent address: _____ Telephone No. _____
Zip Code _____

Position for which you are applying: High school counselor

Credentials included with application:

- Resume
- All teaching and professional certificates
- All transcripts showing degrees

Date available: 7/1/16

Former Waskom ISD Employee: yes no _____

If yes, give dates of employment: 8/2012 - 6/2014

Are you aware of any reasons you would not be able to perform the duties of the position for which you are applying? yes _____ no If yes, please explain: _____

Do you have a relative who is a member of the Waskom ISD Board of Education?

yes _____ no

If yes, please give the name of relative and relationship: _____

Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to, theft, attempted theft, rape, murder, swindling, and indecency with a minor) and/or received probation or deferred adjudication? yes _____ no

If yes, please explain: _____

0030-7030XW 03-50901

Type of certification held now

- None
- Valid Texas
- Valid other state _____
- Emergency (Texas)
- Texas one year certificate: Expiration date _____
- Texas temporary administrative: Expiration date: _____

Areas of specialization

- | | | |
|--|--|---|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> All level art | <input type="checkbox"/> Vocational (specify) _____ |
| <input type="checkbox"/> Superintendent | <input type="checkbox"/> All level health and PE | |
| <input type="checkbox"/> Principal | <input type="checkbox"/> All level music | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Mid-management admin. | <input checked="" type="checkbox"/> Librarian | <input type="checkbox"/> Visiting Teacher |
| <input checked="" type="checkbox"/> Elementary | <input checked="" type="checkbox"/> Counselor | <input type="checkbox"/> Supervisor |
| <input checked="" type="checkbox"/> Elementary and kindergarten | <input type="checkbox"/> Special Education (specify) _____ | <input type="checkbox"/> Others (specify) _____ |
| <input checked="" type="checkbox"/> Secondary (junior/senior high) | | |

0030-7030XW 03-50901

List teaching experience beginning with most recent years.

Name of School and Location	Type of Assignment	Dates Taught	Reason for Leaving
Sam Houston Marshall	counselor	2015-2016	
Middle school Pine Tree	6th gr. Math	2014-2015	
Middle School Waskom	8th gr. Math	2012-2014	
David Crockett Marshall	kindergarten	2009-2012	

Total creditable years 8 (Full time teaching in college, public school, or in an accredited private school is creditable.)

0030-7030XW 03-50901

Schools Attended: List all applicable information.

Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree or Certificate	Year Graduated
Univ. Texas Tyler	School counseling	Masters	2015
ETBU Marshall	elem. educ.	BAS	2008

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
Angela Fitzpatrick		903-742-6556	Principal
Jerry Hancock		903-926-6049	Principal
Mindi Cox		903-930-3830	Literacy coach
Bonita Cherry		903-472-2328	Principal
Lara Cavin		903-930-2636	former Principal

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.

Jessica Nelson
Signature of Applicant

6/13/16
Date