



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

Katilyn W. Woodley
name

PO Box 345 Elysian Fields, TX 75642
address

Teacher - Elysian Fields ISD
present position

for

Teacher - Waskom HS
new position

OPAP / English IV
indicate preference in grade/s or subject/s

6/20/13
date

Katilyn W. Woodley
signature

WASKOM INDEPENDENT SCHOOL DISTRICT

SCHOOL AVENUE, BOX 748

WASKOM, TX. 75692

(903) 687-3361

Date of Application: 6/20/13 Social Security No. 435-11-3872

Full Name: Katlyn Wilcox Woodley

Present address: PO Box 345 / 380 6th Avenue Telephone No. 903 926 3069
Elysian Fields, TX Zip Code. 75642

Permanent address: _____ Telephone No. _____
Zip Code _____

Position for which you are applying: Teacher - OAP/English

Credentials included with application:

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

Date available: _____

Former Waskom ISD Employee: yes _____ no X

If yes, give dates of employment: _____

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 X If yes, please explain: _____

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

yes _____ no X

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 X

If yes, please explain: _____

0030-1020-05-0000

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

0030-1020-05-0000

List teaching experience beginning with most recent years.

Name of School and Location	Type of Assignment	Dates Taught	Reason for Leaving
Elysian Fields HS	English IV	08/11 - Present	
Elysian Fields HS	Spanish I	08/09 - 05/11	n/a

Total creditable years 4 (Full time teaching in college, public school, or in an accredited private school is creditable.)

0030-1020-05-0000

Schools Attended: List all applicable information.

Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree or Certificate	Year Graduated
Elysian Fields HS	_____	HS Diploma	2004
Texas A&M - College Station	Theatre Arts	B.A.	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
Gary Holt	_____	903-336-5462	Principal
Jack Parker	_____	903-692-2725	Assistant Principal
Debbie Graye	_____	903-503-2759	Co-worker (teacher/mentor)

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.

Signature of Applicant

Date