



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 Kara Reeh
name

PO Box 368
address

n/a
present position

for Teacher
new position

First Grade
indicate preference in grade/s or subject/s

10-22-13 Kara Reeh
date signature

WASKOM INDEPENDENT SCHOOL DISTRICT

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

Date of Application: 10-22-13 Social Security No. 433-85-7431

Full Name: Kara Bethany Reeh

Present address: 7552 S Lakeshore Drive Telephone No. 903 926 9244
Shreveport, LA 71119 Zip Code. 71119

Permanent address: PO Box 368 Telephone No. _____
Elysian Fields, TX 75642 Zip Code 75642

Position for which you are applying: First Grade Teacher

- Credentials included with application:
- Resume
 - All teaching and professional certificates
 - All transcripts showing degrees

Date available: 12-9-13

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: _____

CERTIFICATION

Type of certification held now

- None
- Valid Texas (pending graduation)
- 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 type="checkbox"/> Librarian | <input type="checkbox"/> Visiting Teacher |
| <input checked="" type="checkbox"/> Elementary | <input type="checkbox"/> Counselor | <input type="checkbox"/> Supervisor |
| <input checked="" type="checkbox"/> Elementary and kindergarten | <input checked="" type="checkbox"/> Special Education (specify)
EC-12 Sped | Others (specify) _____ |
| <input type="checkbox"/> Secondary (junior/senior high) | | |

TEACHING EXPERIENCE

List teaching experience beginning with most recent years.

Name of School and Location	Type of Assignment	Dates Taught	Reason for Leaving
Crockett Elementary - Marshall	student teaching	9-13 - 12-6	graduated
Lee Elem. - Marshall	student teaching	8-26 - 9-13	end of rotation

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

SCHOOLS ATTENDED

Schools Attended: List all applicable information.

Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree or Certificate	Year Graduated
Texas A&M Texarkana	BSIS EC-6/SPED	Bachelor's I.S.	Dec 2013
Tarleton State Univ.	BSIS EC-6/SPED	—	transferred

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
Joe Sherwin	4353 FM Rd 451 Waskom, TX	currently deployed email only:	Supervisor / pastor
Christine Crisp	4353 FM Rd 451 Waskom, TX	903 633 2645	current supervisor of Church secretary
Sandra Goswick	220 PR 1230 Waskom, TX 75692	903 926 4671 903 633 2673	supervisor / daycare owner
Nancy Gibson	—	email only: gibsonn@marshallisd.com	Supervising teacher
Kim Collier	—	903 926 0265	University Supervisor

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.

Kara Peck
Signature of Applicant

10-22-13
Date