

**TYLER INDEPENDENT SCHOOL DISTRICT
HIGH SCHOOL SUMMER SCHOOL APPLICATION
Teacher/Librarian**

GENERAL INFORMATION:

Date Of This Application: _____ Social Security Number _____

Name in Full: _____
Last First Middle

Present Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Telephone Numbers:
Residence: _____ Cell: _____ Work: _____

Current Assignment: _____
Grade School

EDUCATION/EXPERIENCE:

Highest Degree Received: _____ Major _____ Minor _____
Valid Certification/Endorsement Areas:

Name as it appears on your certificate: _____
Years in T.I.S.D _____ Years of Experience _____

POSITION : _____ **Teacher** _____ **Librarian**

Teachers must be certified for grades 9-12 to teach each subject requested.

Subjects in order of preference:

(1) _____ (2) _____ (3) _____

I am available to teach: (Check all that apply)

_____ First summer session only – June 11-29

_____ Second summer session only - July 9-27

_____ Both summer sessions

My signature indicates that the certifications I listed above are on file with TEA. I understand that applications are dated when received and processed on a first-come, first-served basis.

Signature

Date

The School Board does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, handicapping conditions, or sex in its educational programs or employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in activities involved in the position or program for which the application has been made.

Return completed application to Dr. Karen Raney, Director of Secondary Education, by May 1, 2007.

