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WESLACO INDEPENDENT SCHOOL DISTRICT

HUMAN RESOURCES DEPARTMENT

319 W. 4th Street | PO Box 266

Weslaco, Tx 78599-0266

Phone (956) 969-6619 • Fax (956) 969-6932



Dr. Priscilla Canales,
Superintendent of Schools

EMPLOYEE REQUEST FORM

First Name	Middle Name	Last Name
SSN / Employee ID#	Work Number	Home/Cell Number
Current Dept. / Campus & Position		

CHANGE REQUEST

Please note that if you are changing your name, phone number or address, you must report the change to the following departments:

Insurance Department and Payroll Department (W4 Form and TRS)

Current Name	New Name
Current Phone Number	New Phone Number
Current Address/City, State & Zip Code	New Address / City, State & Zip Code

IF NO LONGER WITH DISTRICT WE ALSO REQUIRE DATE OF BIRTH:

_____/_____/_____
MONTH DAY YEAR

OTHER REQUESTS: Place a checkmark (✓) in the box to indicate your request (only copies will be provided).

SERVICE RECORD CONTRACT PREVIOUS EVALUATION TRANSCRIPTS

STATEMENT OF EMPLOYMENT WAGES

OTHER (EXPLAIN): _____

Employee's Signature

Date

NOTE: COMPLETE FORM AND BRING TO THE HUMAN RESOURCES OFFICE.

FOR OFFICE USE ONLY:		
Date Received: _____	Date Processed: _____	Initials: _____