



WESLACO INDEPENDENT SCHOOL DISTRICT
 Human Resources Department
 319 West 4th Street | P.O. Box 266
 Weslaco, TX 78599

Telephone: (956) 969-6619 Fax: (956) 969-6940



Dr. Priscilla Canales,
Superintendent of Schools

TUTOR LETTER OF INTENT FORM

LAST NAME		FIRST NAME	MIDDLE NAME	
HOME ADDRESS		CITY	STATE	ZIP CODE
SSN / EMPLOYEE ID#	DATE OF BIRTH	DRIVER LICENSE / ID NUMBER		PHONE NUMBER
EMAIL ADDRESS				
CURRENT OR PREVIOUS CAMPUS / DEPARTMENT ASSIGNED TO			YEARS EXPERIENCE AS A TUTOR	
REQUESTED LOCATION (IF APPLICABLE)				
NAME OF COLLEGE OR UNIVERSITY ATTENDING (CURRENT MAJOR AND HOURS)				

NOTE: Submit a copy of your current or previous semester class schedule (Student Detailed Schedule).

Number the subjects listed below in the order of your strengths:

_____ English _____ Math _____ Science _____ Social Studies
 _____ Other _____

 SIGNATURE

 DATE

FOR OFFICE USE ONLY:

Requested by (Initials) _____ DPS Results CLEAR RECORD Date ____/____/____
 Completed by (Initials) _____ DNH Registry CLEAR RECORD Date ____/____/____
 Subscribed to DPS SID _____ Fingerprinted YES NO Date ____/____/____

Additional Comments: _____
