

BANDERA INDEPENDENT SCHOOL DISTRICT

REQUEST FORM FOR SERVICE RECORD, TRANSCRIPT, TEACHING CERTIFICATE, APPRAISAL

Printed Name of Person _____

Mailing Request: _____

BISD Employee Identification Number: _____ or SSN: _____

Position: _____ Campus/Department: _____

Home/Cell Phone: _____ Office Phone: _____

Have you already resigned from Bandera ISD? (Check one) Yes No

If "Yes" what was your last date of employment? _____

**I am requesting a copy of the following document(s) from my BISD personnel file:
(Check all that apply)**

Service Record ____ Transcript ____ Teaching Certificate ____ Appraisal(s) ____
(3 years will be given, if applicable)

SELECT ONE OPTION BELOW:

I will come to the Office of Human Resources to pick up the documents. Please allow 30 days for processing. **PLEASE CALL 830-796-3313 BEFORE PICKUP** to ensure the requested documents are ready.

OR...

I request that the documents be mailed to the following location:

Name/Organization: _____

Address: _____

City/State/Zip: _____

Employee Signature

Date

Instructions – Send completed form to the following:

FAX: 830-796-6238

or MAIL TO: Bandera ISD

Attn: Human Resources

PO Box 727

Bandera, Texas 78003

BISD Use Only

Logged in: _____

Date Mailed/Pick Up Date: _____

Date

Initials

Date

Initials