



Telephone (956) 969-6914

# Weslaco Independent School District Professional Development Department

*John F. Garcia, Title I Director*

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*Dr. Priscilla Canales  
Superintendent of Schools*

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## 2020-2021 Time Equivalency (TE) Guidelines Acknowledgement Form

**I acknowledge that I have read and understand the 2020-2021 Time Equivalency (TE) Guidelines. I further acknowledge receipt of a copy of the TE Guidelines.**

\_\_\_\_\_ **Yes, I will participate in the Weslaco ISD Time Equivalency program.**

\_\_\_\_\_ **No, I will NOT participate in the Weslaco ISD Time Equivalency program. Therefore, I will forfeit two days wages at my daily rate of pay.**

\_\_\_\_\_  
**Printed Name of Staff Member**

\_\_\_\_\_  
**Campus/Department**

\_\_\_\_\_  
**Signature of Staff Member**

\_\_\_\_\_  
**Date**

**Please submit a copy of this to your principal/department supervisor by 1 June 2020.**

**NOTE: TE hours will be forfeited if the TE Guidelines are not followed.**