This copy of my hope will credentials, I a feel merely benefit me of a verify your items and my interest and my professional status

J. L.

7/20/74

THIS IS TO CERTIFY THAT

LAST NAME	FIRST NAME	SECOND NAME	CERTIFICATE NUMBER
PRUETT	JAKIE	LEE	460-36-50-69 2

HAS COMPLETED ALL LEGAL REQUIREMENTS FOR THIS

TEXAS TEACHER CERTIFICATE

AND IS AUTHORIZED TO TEACH OR PERFORM DUTIES IN THE AREA(S) SHOWN BELOW.

TEACHING FIELDS: NO. 1 36 NO. 2 NO. 3 NO. 4

TYPE OF CERTIFICATE	ISSUED MO.	ISSUED YR.	EXPIRES MO.	EXPIRES YR.	AREA CODE	AREA OF SPECIALIZATION
PROFESSIONAL	0955		LIFE		10	ELEMENTARY
PROFESSIONAL	0955		LIFE		11	HIGH SCHOOL [GRADES 7-12]
PROFESSIONAL	0871		LIFE		31	COUNSELOR
PROFESSIONAL	1071		LIFE		27	SUPERINTENDENT
PROVISIONAL	0871		LIFE		44	MENTALLY RETARDED
PROFESSIONAL	1071		LIFE		28	PRINCIPAL
PROFESSIONAL	0871		LIFE		40	EDUCATIONAL DIAGNOSTICIAN
PROFESSIONAL	1071		LIFE		25	ADMINISTRATOR

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J. W. Edgar

COMMISSIONER OF EDUCATION