

SCOTTSDALE PUBLIC SCHOOLS  
EDUCATION CENTER

3811 North 44th Street  
PHOENIX, ARIZONA

May 25, 1960

W. F. Lilly  
West Yellowstone,  
Montana

Dear Mr. Lilly:

Thank you for your letter of May 15, 1960, and as requested we have evaluated your transcripts for your graduate credit. The one complete set on file shows a MA + 19 graduate hours, placing you on our salary step 6-D. We are therefore enclosing a new contract in the amount of \$5850. We would appreciate your signing both copies and returning them immediately, retaining the original for your records. We would also appreciate your returning the original copy of the first contract mailed to you May 4, 1960. This will be marked VOID and placed in your personnel file.

We will need one additional set of transcripts to be used by the Scottsdale High School and the North Central Association. We would appreciate your forwarding these at the earliest possible date.

If you will contact us when you arrive in Phoenix, we could possibly give you some information regarding both rentals and purchases of home. We usually acquire a small list during the summer of places available near our schools for teachers.

We hope you have a wonderful summer and look forward to seeing you in Phoenix soon.

Sincerely,

*(Mrs.) Gene Smith*  
Secretary

MILLERS FALLS  
ERASE





# Secondary Certificate

(SERIES 1959)  
STATE OF ARIZONA

No 1301

THE STATE BOARD OF EDUCATION hereby grants to WALEN F. LILLY  
a person of good moral character, a citizen of the United States, a graduate of \_\_\_\_\_  
UNIVERSITY OF MONTANA, MISSOULA, MONTANA - M. A. in Ed. 1953

and who has successfully completed 18 semester hours of approved professional courses,  
this certificate valid from July 1, 1960 to July 1, 1961 unless sooner revoked, which entitles  
the holder to teach in grades seven to twelve, inclusive, and junior college.

The requirement for renewal of a teaching certificate, for a 6 year period, is the satisfactory completion during its life of 5 semester  
hours of acceptable college work taken on either the upper division or graduate level in an accredited institution. Holders of the  
Master's Degree may renew their certificate upon verification of continuous teaching during the renewal period.

Issued this 29 day of August 1960

Expires July 1, 1961

Oath of Allegiance filed August 29, 1960

OFFICE OF  
STATE SUPERINTENDENT OF PUBLIC INSTRUCTION  
PHOENIX, ARIZONA

W. W. DICK

State Superintendent of Public Instruction

NOTE—This Certificate must be Recorded with the County  
School Superintendent before assuming duties in order  
that salary may be legally drawn.

OTTO S. SHILL

Director of Certification for the State Board of Education

RECORDED

9-3-60

IN MARICOPA COUNTY

*John Barry*

7-1-61 *eg*

County School Superintendent

CHEST X-RAY

Expires

July 1, 19

62



AUG 29 1960

STATE OF ARIZONA  
DEPARTMENT OF PUBLIC INSTRUCTION  
W. W. DICK, SUPERINTENDENT  
State Capitol  
Phoenix

Dear Educator:

FOR YOUR OWN INTEREST AND PROTECTION PLEASE READ THIS LETTER EVEN THOUGH IT IS IN MIMEOGRAPHED FORMS.

Please read the instructions printed on the certificate and follow them carefully.

Preserve this certificate like any other valuable document and do not destroy it.

This certificate and your X-Ray report must be recorded with the County Superintendent of the county where you are employed before you can be paid. X-Rays for new teachers must be dated within a six months period prior to recording with the County Superintendent of Schools.

The deficiencies listed below must be removed in order to place this provisional certificate on a regular basis. You will be given until September 1st after the July 1st expiration date shown on the fact of your certificate to accomplish.

                     Educational Psychology

                     ~~United States~~ and Arizona  
Constitutions

                     Evaluation of Learning (Tests and Meas.)

                     School and Community Health

                     Language Arts, to include reading  
Language, spelling and writing

                     General High School Teaching  
Methods

                     Elementary School Curr. & Tech.

                     Curr. & Prin. of Secondary  
Education

                     Complete a total of 2 semester hours of college work, which may include courses checked above, to meet our four-year-rule.

To extend your certificate, mail your certificate to this office with a transcript of courses showing removal of deficiencies. There is no fee for its extension and no form to be filled out.

Colleges usually charge a fee for providing second and succeeding transcripts. This fee does not cover any service by the Certification Division.

If your school wishes to have your certificate in its file, it is your responsibility to see that the certificate is extended or renewed at the proper time and to check with the school regarding necessary action.

FULFILLING REQUIREMENTS FOR, AND RENEWAL OF, YOUR CERTIFICATE ARE YOUR RESPONSIBILITY AND NO LETTERS OF REMINDER WILL BE SENT FROM THIS OFFICE.

If we can be of service to you at any time, please feel free to call on us.

Sincerely yours,  
*Otto S. Shill*  
OTTO S. SHILL, Director





MARICOPA COUNTY HEALTH DEPT.  
P.O. Box 6515, Phoenix, Ariz.

---

REPORT OF X-RAY EXAMINATION

---

We are pleased to report that the X-ray picture of your chest appeared satisfactory.

Tuberculosis like other contagious diseases spreads from person to person. Have a chest X-ray at least once a year

FH - 17  
Form E

Maricopa County Health Department  
P.O. Box 6515  
Phoenix, Arizona

76809

9-3-60lg

CHEST X-RAY  
Expires  
July 1, 1962

AUG 29 1960

PHOENIX  
AUG 31 '60  
U.S. POSTAGE  
03  
METER  
P.B. 356387

Name Walter F. Kelly

Address Scottsdale High

Town Scottsdale, Arizona

722-10-8386

LILLY, WALEN F. 7369

PERMIT NO. 8-1325

8-29-60 DATE

# MARICOPA COUNTY HEALTH DEPARTMENT

## CERTIFIES THAT

Lilly Walen F. M West Yellowstone, Montana  
NAME - LAST, FIRST, INITIAL SEX ADDRESS

HAS PAID A \$1.00 FEE AND HAS <sup>X</sup>HAD THE TESTS REQUIRED FOR

BARBER       BEAUTICIAN       SCHOOL       OTHER \_\_\_\_\_

Scottsdale High School \_\_\_\_\_

IF THESE TESTS ARE NOT SATISFACTORY, YOU WILL BE NOTIFIED BY THE HEALTH DEPARTMENT.

76809

Director J. F. ...  
MARICOPA COUNTY HEALTH DEPARTMENT

X-RAY # \_\_\_\_\_