



234 Friendship Lane  
Fredericksburg, TX 78624  
830-997-9551

Personnel Department

## REQUEST FOR TRANSFER

This form should be completed and submitted to the personnel office when an employee is requesting a transfer or change of assignment. **This is a request for transfer and the decision of whether to grant the transfer will be made by the supervisor of the opening.** Copies will be forwarded to current supervisor, supervisor in requested areas, and Superintendent. **Please attach an updated resume or complete an online application.** **NOTE:** This request does not guarantee an interview.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

NOW EMPLOYED AT \_\_\_\_\_ SCHOOL. GRADE/SUBJECT/DEPT \_\_\_\_\_

I REQUEST A TRANSFER OR CHANGE OF ASSIGNMENT AS INDICATED BELOW:

**THIS REQUEST IS VALID FOR 60 DAYS (can be renewed by phone)**

BUILDING/DEPARTMENT

GRADE/SUBJECT/DEPARTMENT

First Choice \_\_\_\_\_

\_\_\_\_\_

Second Choice \_\_\_\_\_

\_\_\_\_\_

Third Choice \_\_\_\_\_

\_\_\_\_\_

REASON: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE: \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_\_\_  
Date Received & Forwarded

\_\_\_\_\_  
Personnel Office

Request renewed by phone on: \_\_\_\_\_

\_\_\_\_\_  
Signature of personnel taking request

\_\_\_\_\_  
Date forwarded