

SWARTZ CREEK COMMUNITY SCHOOLS

TRANSFER REQUEST - PROFESSIONAL STAFF

TO: PERSONNEL OFFICE

FROM: _____
Last Name First Initial

PRESENT ASSIGNMENT:

School Department Position

POSITION(S) TO WHICH TRANSFER IS REQUESTED: (Please indicate grade level(s), subject(s) or department(s))

1. _____
School Department Position

2. _____
School Department Position

3. _____
School Department Position

CERTIFICATION:

Elementary Provisional/Professional _____ Subject/Grade Level _____
Secondary Provisional/Professional _____ Subject/Grade Level _____
18/hr or 30/hr Continuing _____ Subject/Grade Level _____
Permanent _____ Subject/Grade Level _____

REASONS FOR REQUESTING TRANSFER: _____

NOTE: Request should be renewed annually to receive active consideration each year. (Master Contract, Article VII D)

TEACHER SIGNATURE: _____ DATE: _____

PRINCIPAL SIGNATURE: _____ DATE: _____

(Do not write below this line)

PERSONNEL DIRECTOR SIGNATURE _____ DATE: _____

TRANSFER APPROVED: _____ Yes _____ NO _____ To be determined during scheduling process, pursuant to Article XII, 2. B. 2.

Copies: White Teacher
Goldenrod Principal
Yellow SCEA
Pink Personnel