

SUPPORT STAFF ASSIGNMENTS AND TRANSFERS
(Request for Transfer)

Name: _____

Position/Location Desired: _____

Current Position/Location: _____

Reason for Request: _____

Additional Information Relevant to Transfer Request: _____

Signature of Current Supervisor

Date

(Please return to the superintendent/designee at the central office.)

Transfer requests will be granted only to the extent that the transfer serves the needs of the district.

The Board of Education does not discriminate on the basis of race, color, national origin, ancestry, age, religion, marital status, pregnancy, sex, exercise of FMLA rights or disability in employment, educational programs or activities, as set forth in policy AC.

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Note: *The reader is encouraged to review policies and/or procedures for related information in this administrative area.*

Implemented: 10/10/2005

Excelsior Springs School District #40, Excelsior Springs, Missouri