



THE SCHOOL BOARD OF GADSDEN COUNTY

35 Martin Luther King, Jr. Blvd
Quincy, Florida 32351
Main: (850) 627-9651 or Fax: (850) 875-8757
www.gcps.k12.fl.us

Roger P. Milton
Superintendent
miltonr@gcpsmail.com

Request to Transfer

Date_____

Name_____

Employee Identification Number_____ Date of Birth _____

Address_____

Phone Number_____ Secondary Phone Number_____

Current Work Site_____ Position_____

Area of Certification (Instructional)_____

Expiration Date_____ Contract Status_____

List school(s) or position(s) in order of preference to which you wish to be transferred.

School/Location Preferred	Position Preferred	Years of Experience

Reason for Request

Signature(s)

All statements in this application are true and accurate. I agree that any purposeful omission or false statements will be constitute grounds for immediate dismissal. I also understand that unless this application is completed in detail it will not be considered. I authorize GCSB to conduct a thorough background check to include, but not limited to, criminal history records.

Date _____

Signature of Applicant: _____

Current Principal Signature: _____

Receiving Principal Signature: _____

Superintendent Signature: _____