

NCSSO TRANSFER REQUEST

Application for Transfer within Nye County School District Instructions: Members of the NCSSO bargaining unit may apply to transfer to positions posted as vacancies using this form. Transfer forms need to be filled out completely and signed by present supervisor. *The supervisor will then forward this form to the Southern District Office.* **BEGINNING NOVEMBER 7, 2005: IF THE SUPERVISOR FAILS TO SEND THE SIGNED TRANSFER REQUEST TO SDO WITHIN THE APPROPRIATE TIMELINES TO BE DATE-STAMPED BY THE PERSONNEL DEPARTMENT, THE TRANSFER REQUEST WILL BE VOID AND WILL NOT BE CONSIDERED FOR THE VACANCY.**

EMPLOYEE INFORMATION – Please Print:

_____ <i>Last Name</i>	_____, _____ <i>First Name</i> <i>M.I.</i>
_____ _____ _____ <i>Mailing Address ↑</i>	_____ _____ _____ <i>Permanent Address ↑</i>
_____ <i>Home Telephone Number</i>	_____ <i>Cell Phone or Other Contact Number</i>

PRESENT EMPLOYMENT INFORMATION:

_____ <i>Present Attendance Area</i>	_____ <i>Present Location (School or Site)</i>
_____ <i>Present Position Classification</i>	_____ <i>Present Position # of Hours Per Day</i>

REQUESTED POSITION INFORMATION:

_____ <i>Requested Attendance Area</i>	_____ <i>Requested Location (School or Site)</i>
_____ <i>Requested Position Classification</i>	_____ <i>Requested # of Hours Per Day</i>

SUPERVISOR ACKNOWLEDGEMENT:

_____ <i>Acknowledgement of Present Supervisor</i>	_____ <i>Date Signed</i>
_____ <i>Acknowledgement of Transfer Area Supervisor</i>	_____ <i>Date Signed</i>

↓ THIS SECTION TO BE COMPLETED BY SDO PERSONNEL DEPARTMENT ONLY ↓

Date Received in District Office

Approved by Assistant Superintendent

Date Approved

Position Tracking # _____

DISTRICT OFFICE DATE STAMP!

QUALIFICATIONS: _____ NCSSO Sr. Date

_____ Paraprofessional

_____ CPR Certified

_____ 1st Aid Certified