

BURBANK UNIFIED SCHOOL DISTRICT
Human Resources Services

REQUEST FOR TRANSFER OR REASSIGNMENT
CERTIFICATED

Name _____ Date _____
Home Address _____ Work Location _____
_____ Current Assignment _____
Grade or Subject(s)
Telephone Number _____

In accordance with Article 14, **Transfer and Reassignment**, I am requesting consideration for the following assignment(s):

Preferred location(s): _____

Subject(s) or Grade Level(s) in order of preference: _____

Remarks: _____

ARTICLE 14.3.1.2 All transfer requests shall remain on file for consideration until
October 31st of each year.

In response to the Announcement of Certificated Position Opening dated: _____

I would like to be considered for the following position(s):

Assignment _____

Location _____

Assignment _____

Location _____

Signature _____

To be completed by Personnel Services:

The above request(s) have been officially recorded in the Department of Human Resources.

Recorded by _____

Date _____

Return to Human Resources

Distribution: Personnel File, employee, Instructional Services and all Principals involved.