

EMPLOYEE REQUEST for TRANSFER

Eligibility for Transfer (Board Policy DK LOCAL)

- Term contract teachers shall be considered eligible for transfer only after two years or more in a particular school.
- Probationary teachers are not eligible to file voluntary requests for transfer or assignment.
- Teachers who receive a "Below Expectations" or "Unsatisfactory" rating on any domain of the two most recent teacher summative evaluations are not eligible for voluntary transfer and can only be transferred administratively.
- A paraprofessional or auxiliary employee must remain in a position for a minimum of two years before an employee-initiated request for transfer will be considered.
- Complete this form and submit to the **Human Resources Department** no later than **MARCH 1** to be considered for transfer for the next school year.

Instructions

Step #1 Attach a copy of your **last two** recent evaluations. **Step #2** Submit to your principal

Employee Use Only (please print)

Employee name _____ Social security # _____

Home telephone # (_____) _____ Alternate # _____

Current Assignment and Experience

Campus/department _____ Date hired _____

Current assignment _____ # Years at current campus/dept. _____

Are you highly qualified for your current assignment? Yes No N/A

1. **What is your current classification?** (check one) Professional Paraprofessional Auxiliary
 If "professional," do you currently have a contract with GPISD? Yes No
 If "yes," what is your current contract status? (check one) Probationary Term Special

For certified professionals and instructional aides only:

Areas of certification/teaching fields: _____

2. **Have you been evaluated during the current school year?** Yes No (attach **LAST TWO** evaluations)
 If yes, have you received a "below expectations" or "unsatisfactory" rating in any domain during the current evaluation cycle? Yes No

Requested Assignment Information

First choice: _____
 Campus/department _____ Position or Subject/grade level _____

Are you highly qualified for this assignment? Yes No N/A

Second choice: _____
 Campus/department _____ Position or Subject/grade level _____

Are you highly qualified for this assignment? Yes No N/A

OR

Any elementary school Any middle school Any high school

State reason for request: _____

Employee signature: _____ **Date** _____

Immediate Supervisor Acknowledgement

Is this employee currently on or has completed an "Employee-In-Need-Of-Assistance Plan" (PDAS or other) for the current or previous school year? Yes No If yes, attach a copy of this plan.

Supervisor signature _____ **Date** _____

Human Resources Use Only

- **Is this a NCLB Highly Qualified position?** Yes No N/A
- **Does applicant meet requirements?** Yes No _____

Human Resources Department _____ **Notified Employee** _____ **Date** _____