

# 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 **April 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 or immediate supervisor.

### 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. \_\_\_\_\_

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 evaluation)

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

**Second choice:**

\_\_\_\_\_ Campus/department \_\_\_\_\_ Position or Subject/grade level

**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** \_\_\_\_\_ **Date** \_\_\_\_\_