



Certificated Human Resources

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**CERTIFICATED HUMAN RESOURCES
TRANSFERS REQUEST**

Name (Please Print Full Name) _____ Date _____

Present School/Site _____ Position _____

Current Grade/Subject _____

Credential Held: Multiple Subject PPS Special Education: _____
 Single Subject: _____

I request consideration for transfer to the following **schools** for the school year 20____ - 20____.
(in order of preference)

1. _____ 2. _____ 3. _____

I am interested in teaching the following **subjects/grade levels**.
(in order of preference):

1. _____ 2. _____ 3. _____

Employee's Signature _____ Date _____

For Office Use Only:			
Received Date _____	Effective Date _____	Years of Service _____	
Human Resources Approval _____		Date _____	
Signature			
Date to Payroll _____	Date to Supervisor _____	Date to Tech _____	
Data Entry/Reports: <input type="checkbox"/> Escape <input type="checkbox"/> Personnel Activity Report <input type="checkbox"/> Position Control <input type="checkbox"/> Seniority List			