



Mount Vernon City School District

165 North Columbus Avenue • Mount Vernon, NY • 10553 t 914-358-2350 • f 914-665-5596

TRANSFER REQUEST FORM APPLICATION FOR CHANGE OF POSITION AND POSTED POSITIONS

The Mount Vernon City School District is an equal opportunity employer, committed to providing a work environment which is free from discrimination. We prohibit discrimination on the basis of race, color, creed, religion, national origin, political affiliation, sex, sexual orientation, age, marital status, military status, veteran status, disability, or predisposing genetic characteristics or any other status protected by Federal, State or local laws. The Mount Vernon City School District does not tolerate harassment of any kind. Individuals who believe they have been subjected to employment-related discrimination or harassment may report the incident to the compliance Officer.

Full Name: _____ Employee ID# _____

Home Address: _____

(Street)

_____ (City)

_____ (State)

_____ (Zip)

Home Telephone #: () _____

I am interested in and wish to be considered for the position of: _____

1st Preference: _____

2nd Preference: _____

3rd Preference: _____

My present position: _____ Primary Location: _____

Length of time in present position: _____

My reasons for wanting to change positions are: _____

My qualifications for the position I am applying for are: _____

EMPLOYEE SIGNATURE

DATE

REVISED 04/24