



Santa Rosa Independent School District

Human Resources Department

Letter of Intent Form (For Internal Employees Only)

Employee Name:	_____	Date:	_____
Title:	_____	Campus/Department:	_____
Employee#	_____	Supervisor:	_____
Last 4 of SS#:	_____		
New Position Requesting: _____			
Qualifications: _____			
Knowledge: _____			
Experience: _____			
Employee Signature:	_____	Date:	_____