



HERTFORD COUNTY PUBLIC SCHOOLS
Request for Reassignment-School Employee Provision
2026-2027

This form should only be used to request reassignment based on the HCPS System Employee Request.

Please complete and return this form to Hertford County Public Schools, 701 N. Martin Street, Winton, NC 27986, Attn: Dr. Sophia Allmond, Director of School Support.

Deadline: February 28, 2027. Requests received after this date will not be considered.

Student's Name _____ Grade _____

Current School Assignment _____

Requested School Assignment _____

Employee Workplace _____

Parent/Guardian Name _____

Physical Address _____

Mailing Address (if different from above) _____

Home Phone _____ Work Phone _____

Please explain the basis of your request:

Please keep in mind the following conditions as related to reassignment:

- The parents' responsibilities include transportation to and from school and timely daily arrival to school.
- Ongoing misbehavior and/or truancy issues may result in revocation of this reassignment.
- You must renew this request annually by completing a form and providing updated information.
- Class size requirements may limit or prohibit reassignment requests.

Parent/Guardian Signature _____ Date _____

Office Use Only

Transfer Approved () Not Approved ()

(Superintendent/ Designee)

(Date)