



**LAKE ELSINORE UNIFIED SCHOOL DISTRICT
PERSONNEL SUPPORT SERVICES
545 Chaney Street, Lake Elsinore, CA 92530
(951) 253-7035 * FAX 951-253-7067**

CERTIFICATED VOLUNTARY TRANSFER REQUEST

Name: _____ Phone Number: (____) _____
(Please print)

Your current site and position: _____

(You may apply **ONLY** for POSTED positions)

	Position Desired:	Site:
Elementary – K-5		
Middle School – 6-8		
	Subject Area	
High School – 9-12		
	Subject Area	
Special Education		

**YOU MUST LIST ALL CREDENTIALS YOU HOLD OR HAVE APPLIED FOR,
INCLUDING CLAD/SDAIE**

Date

Signature