Date Received:

EAST FELICIANA PARISH SCHOOL BOARD
OFFICE OF HUMAN RESOURCES
12732 SILLIMAN STREET
CLINTON, LA. 70722

POSITION TRANSFER REQUEST

Name: ____ Date: ____
Home Phone: ____ Other Phone:____

PRESENT POSITION

Job Title: _____
Date of original hire: _____
Length of time in this position: _____
Location: _____
Administrator/Supervisor:_____

DESIRED POSITION

Job Title: _____
Location: _____

Can you perform the essential job responsibilities of the job for which you are applying? Y_____ N_____ *(See desired job description.)*

REASON FOR POSITION TRANSFER REQUEST:

_____
_____
_____
_____

_____ _____
Employee Signature: Date:

_____ _____
Executive Director of HR Signature: Date:

_____ _____
Superintendent's Approval: Date:

*The employee's current supervisor will be contacted for references only if/when the employee is considered for the position. The Department of Human Resources will notify the employee prior to contacting their supervisor. Return this form to the Department of Human Resources.