



EL RANCHO UNIFIED SCHOOL DISTRICT
Human Resources Department

REQUEST FORM

Date: _____ Time: _____

To: **Certificated/Classified Human Resources** (Circle One)

Employee's Name: _____

School Site or Department: _____

Request: _____

Check One:

Please Mail: U.S. Mail _____ District Mail _____

Address: _____

Please Fax: Fax# (_____) _____

Please Call: I can be reached at (_____) _____

Appointment: I can be reached at (_____) _____

****Please allow 5-7 business days for your request****

Thank you