



#1 Civic Center Circle, Level II  
Brea, CA 92821  
Phone: 714-990-7828  
Fax: 714-990-7826

## CLASSIFIED EMPLOYEE REQUEST FOR CHANGE OF ASSIGNMENT

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

I would like to request a change of assignment. I currently work as a:

\_\_\_\_\_ at \_\_\_\_\_  
Position Location

I would like to change my assignment to:

\_\_\_\_\_ at \_\_\_\_\_  
Position Location

The reason for my request is as follows:

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\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date