



**EL RANCHO UNIFIED SCHOOL DISTRICT**

**Classified Personnel  
REQUEST FOR TRANSFER**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Present Classification: \_\_\_\_\_ School/Site: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street Address) (City) (Zip Code)

Home Phone: \_\_\_\_\_

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Name school(s) or location(s) to which you wish to be transferred, in order of choice:

1. \_\_\_\_\_ 2. \_\_\_\_\_

Reason for requesting transfer: \_\_\_\_\_

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

**THIS REQUEST IS VALID ONLY FOR 6 MONTHS & ONLY FOR LOCATIONS LISTED**