

HOWELL PUBLIC SCHOOLS
Howell, Michigan

REQUEST FOR TRANSFER

To: Deputy Superintendent of Personnel

From: _____

Date: _____

1. I request a transfer from _____ (school) _____ (grade/subject)

to _____ (school) _____ (grade/subject) effective _____ (date)

2. I hold a valid _____ (type of certificate) teaching certificate and qualified to teach _____.

3. My reason for requesting a transfer is _____

4. I have taught in Howell for _____ years and have taught in other districts for _____ years.

5. The new Principal is authorized to examine my official personnel file.

(signature of teacher)

6. Send original and all copies to current Principal for endorsement. _____

(signature of current Principal)

7. Send original and all copies to new Principal for endorsement. _____

(signature of new Principal)

8. Send original and all copies to the Deputy Superintendent of Personnel.
Action: approved disapproved

(Deputy Superintendent of Personnel)