

Coffee County Schools

Classified Transfer Request

Date _____

I, _____, a _____

Name Position

at _____ do hereby request a transfer to

School

_____ for school year _____.

School/Department and position

My reasons for requesting this transfer are: _____

I have discussed this request with my immediate supervisor.

All transfer requests must be approved by the Director of Schools.

Immediate Supervisor of Present School

Principal of Present School

Return Form to the Central Office (HR) Once All Signatures Have Been Obtained and Form is Complete