

**Instructions:**

1. Please read carefully the attached section of the CSEA/SMUSD Master Contract (Article VII, Section 8.3: Unit Member Initiated Transfer Request).
2. Complete this form and return it to the Human Resources and Development Department - Attn: Nancy Gijon (E-Mail: [nancy.gijon@smusd.org](mailto:nancy.gijon@smusd.org), Fax: 760-752-1138, or by District Mail)

<b>Employee Name:</b>	<b>Work Site:</b>
<b>Your Current Assignment:</b>	
<b>Desired Transfer Site:</b>	
1 <sup>st</sup> Choice:	
2 <sup>nd</sup> Choice:	
<b>Comments:</b>	

\_\_\_\_\_  
**Employee Signature**

\_\_\_\_\_  
**Date**