

KENTON CITY SCHOOL DISTRICT
CLASSIFIED TRANSFER REQUEST FORM

EMPLOYEE NAME _____ DATE _____

PRESENT POSITION _____

BUILDING: ☐ KES ☐ KMS ☐ KHS

REQUEST TRANSFER TO _____

BUILDING: ☐ KES ☐ KMS ☐ KHS

YEARS OF EXPERIENCE EMPLOYED BY KENTON CITY SCHOOLS _____

EMPLOYEE SIGNATURE

☐ APPROVED

☐ DENIED

SUPERINTENDENT SIGNATURE/DATE