

**LOS ALAMOS PUBLIC SCHOOLS  
TRANSFER FORM**

**CURRENT INFORMATION**

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

Phone/Cell Number: \_\_\_\_\_

Current School /Department: \_\_\_\_\_

Current Assignment/Position: \_\_\_\_\_

**CHANGE REQUESTED**

New Assignment/Position desired: \_\_\_\_\_

School / Department(s) desired: \_\_\_\_\_

Licensure: Yes \_\_\_ No \_\_\_ (Does candidate possess license required for this position)

Reason for this request: \_\_\_\_\_

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Current Administrator Signature

\_\_\_\_\_  
Date

Please return completed Transfer Form with a Resume to LAPS- Human Resources Department.

Both Employee/Administrator signatures are required.

Thank you.

Upon approval of transfer this document will serve as my (employee signed above) resignation from my current position at Los Alamos Public Schools.