REQUEST FOR TRANSFER

DATE: _____

TO: FRANKLIN PARISH SCHOOL BOARD
   7293 PRAIRIE ROAD
   WINNSBORO, LA 71295

FROM: _____ _____
                    (Print Name)   (Signature)

Please accept my request to transfer from _____
                                                             (School presently located)

to _____ as a _____.
            (School transferring to)   (Position - fund: Reg. Ed., Sp. Ed., Title I, etc.)

I will be replacing _____ effective_____.
                                (name of employee)   (date)

The last day worked at current school will be _____.

The above information has been approved by the following:

_____   _____
Principal of school leaving   Date

_____   _____
Principal of receiving school   Date

_____   _____
Supervisor of the Department (leaving)   Date

_____   _____
Supervisor of the Department (receiving)   Date

_____   _____
Superintendent of Franklin Parish Schools   Date

Personnel Supervisor use only
Date Received: _____

Board Approved: _____

Effective Date: _____