



Thomas County Schools Transfer Form for Certified Employees

Employee's Name _____ Date _____

Current Position _____ Current Location _____

New Position _____ New Location _____

Reason for transfer _____

Employee's Signature _____

Transfer approved by _____
Signature of Current Principal/ Supervisor

Comments: _____

To be completed by Personnel Director:

Transfer is _____ Denied _____ Granted

Personnel Director _____ Date on Personnel Report _____

Comments: _____

Request reviewed by Superintendent _____
Superintendent