PERSONNEL COMMISSION

1.01	C DE A CLI			
LONG BEACH UNIFIED SCHOOL DISTRICT		Related	Related Class Transfer	
	<i>llence & Equity</i> 00 Ladoga Ave.			
Lake	ewood, CA 90713			
(562) 9	997-8000 ext. 7380			
DATE:				
SUBJECT: CLASSIFIE	D TRANSFER REQUES	<i>i</i> I		
TO: Personn	el Commission			
				-
I am an employee with	•	Yes No		
, ,	, ,		er except under unusual circ egarding status attained foll	
Tiease refer to onapter		——————————————————————————————————————	egaraning status attained for	owing transfer.
			. ,	
Current Classification	1.			
Work Location:				
Home Address:				
City:	Zip Code:			
Home Phone #:	Cell Phone #:			
E-mail:				
Note: Your contact i	information listed abov	ve will be updated by PC :	Staff in our Applicant Trac	king System only.
I wish to be considere	ed for the following: thin my present classifica	ation		
=	ass Transfer to the follow			
_				
•	s Transfer must fall withir e Personnel Commissior	-	ange and within the same jol	b family classification; subject t
Please indicate your prefe	erence in each of the follo	owing categories:		
SITE:	☐ High School	☐ Middle School	☐ Elementary School	☐ Non-School Sites
CALENDAR:	12 month	☐ 10 month (220 day,	209 day & 206 day)	
HOURS PER WEEK:	40 hours/week	20-39 hours/week	Less than 20 hours/w	veek (No Medical Benefits)
Employee Signature:	_			

For Office Use Only

Revised 01/23