

## **Sulphur Springs School District**

27000 Weyerhaeuser Way, Santa Clarita, CA 91351 Phone - (661) 252-5131 Fax - (661) 252-3589

www.sssd.k12.ca.us

## **Classified Internal Application/Transfer Form**

## **Instructions:**

If you are a current employee applying for a job in a different classification, please fill out the following information on this form. This form must be submitted by the closing date with a Letter of Intent, current resume, and two (2) recent letters of recommendation.

If you are a current employee requesting a transfer into a vacancy within your current classification, please fill out the following information on this form. This form must be submitted by the closing date. The criteria of employee requested transfer outlined in the Classified Master Contract Agreement will be used to determine placement.

If you are not a current employee, please use and complete the Classified Employment Application Form. Submissions of this form by outside applicants will not be accepted.

Full Name:		Date:	
Last	First	M.I.	
Daytime Phone: ()	Home/Cel	ll Phone: ()	
Email Address:		_	
Please list your current location and	position at Sulphur Spri	ngs School District.	
Current Location:			
Current Position:			
Number of hours a day you wor			
Date Hired in Current Classifica	ation:	Number of years _ employed with SSSD:	
Please list the position you are apply	ing or requesting transfe	er.	
Position Desired:			
Position Location:			
Signature:		Date:	
Supervisor Signature:		Date:	
Personnel Office Use Only:	D	ate Received:	
Test Score(s):	tter of Intent D Resi	ume	ndation [