



OXNARD SCHOOL DISTRICT
Voluntary
Transfer/Demotion/Reversion
Application

Classified Human Resources
 1051 South "A" Street
 Oxnard, CA 93030
 (805) 385-1501 ext. 2070

To Apply Online, Visit:
<http://www.oxnardsd.org>

NAME: (LAST)	(FIRST)	(MIDDLE)
CELL/MESSAGE PHONE #:		E-MAIL ADDRESS:

I Request a (choose one below)

<input type="checkbox"/> Transfer (same classification)	<input type="checkbox"/> Voluntary Demotion (lower classification)
<input type="checkbox"/> Lateral Transfer (different classification)	<input type="checkbox"/> Restoration (return to a classification previously held)

to the Following Advertised Position:

CLASSIFICATION:	LOCATION:
TRANSFER NOTICE #:	POSITION #:

My Current Assignment is:

CLASSIFICATION:	LOCATION:
WORK SCHEDULE:	CURRENT NUMBER OF WORK HOURS/DAYS (For example: 8/246):

PLEASE READ: Any requests for a **LATERAL TRANSFER** (to a position in a **different classification on the same salary range**) or **VOLUNTARY DEMOTION** (to a position in a **classification on a lower salary range**) are subject to the approval of the Director of Classified Human Resources and contingent upon the relatedness of the classifications (as determined by the similarity of duties, knowledge, skills, abilities, and competencies required, minimum qualifications, and examination content).

Note: It is strongly recommended that you complete a new application and submit it with your transfer request. If you do not complete a new application the application in your personnel file which may contain outdated information will be sent to the interviewer/hiring manager.

Stipends/pay differentials: Any stipend/differentials currently held will **not** be transferred to a new position. Stipends/pay differentials are indicated on the transfer notice and are attached to the position, not the employee.

Probationary Employees: If you are a probationary employee with the District (have not yet completed your six-month initial probationary period), you must complete the TRANSFER RATIONALE section below by stating your reasons for requesting the transfer. Failure to complete the section below will disqualify you from the transfer process.

Please reference Article 17: Transfers of the CSEA/OSD Contract for all information regarding transfers.

Transfer Rationale (Required for Probationary Employees ONLY):

I am requesting a transfer to the above indicated position because...

Employee Signature _____

Date _____

*****DO NOT MARK BELOW THIS POINT – HUMAN RESOURCES DIVISION USE ONLY*****

If Applicable:

Probationary Transfer <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	Lat. Trans./Vol. Demotion/Reversion <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
Signature: _____ Assistant Superintendent – Human Resources	Signature: _____ Director, Classified Human Resources