



La Joya Independent School District
 Office of Human Resources
 2020 – 2021 Employee Transfer Form

Employee Name: _____ Employee ID: _____

Address: _____ Phone #: _____

Current Campus: _____ Current Assignment: _____

SBEC Certification (s):

Replacing: _____ or _____ New Position

New Assignment: _____

Authorization:	Print Name:	Signature:	Date:
Employee			
Receiving Principal			
Current Principal (If required)			

For Human Resources Office Only:		
Date Received:	Date Processed:	
	Approved By:	
	Letter Prepared:	
	Letter Delivered:	