



CANYON INDEPENDENT SCHOOL DISTRICT

Employee Reassignment Request Form

Due no later than June 1st to the Human Resources Department

Directions:

1. Review reassignment policy "Assignments and Schedules" (DK – Local). All requests for reassignment for the upcoming school year must be submitted no later than June 1 of each school year.
2. Complete the reassignment request form.
3. Discuss reassignment request with campus Principal and obtain Principal's signature.
4. Submit reassignment request to the Human Resources Department by deadline noted above.
5. Update current online application or complete and submit one if you do not already have an online application on file with CISD. (NEW APPLICATION SOFTWARE WAS LAUNCHED ON FEBRUARY 1, 2014. ALL EMPLOYEES ARE REQUIRED TO COMPLETE A NEW APPLICATION IF ONE HAS NOT BEEN SUBMITTED AFTER THIS DATE)
6. Continue to monitor the district website for job postings. In order to be considered for a new assignment within the district, you must apply for that specific job, and complete the internal applicant portion of the application.

Notes:

1. All employees requesting reassignment must meet the minimum qualification requirements as noted on the Notice of Vacancy and/or job description.
2. All recommendations for reassignment require approval from the Superintendent and/or his designee.
3. **In order to protect the integrity of each campus master schedule, and to provide all students of the district with the maximum opportunity for a quality education, no professional employee reassignment requests will be considered for any position posted after June 15.** This guideline does not apply to reassignments that would be considered a promotion, such as a classroom teacher moving to a counselor, librarian, administrative position, etc... (Note- Any exceptions must be approved by the Superintendent).
4. This reassignment request will remain active until the start of the upcoming school year. A new form must be submitted each school year and for positions opening during the school year.



CANYON INDEPENDENT SCHOOL DISTRICT
Submit request form to the Human Resources Department by June 1.

CISD Employee Reassignment Request

Name:	Date:
Campus:	Current Assignment:
Certification/s:	Contact Numbers:
Do you have an online application with CISD:	Yes No

***If No, please complete and submit an online application by going to www.canyonisd.net Human Resource Department. CISD current employees must complete this process to be considered for transfers within the district.**

Desire Reassignment to (complete all sections that apply):

Campus:

- | | |
|---|--|
| <input type="checkbox"/> Randall High School | <input type="checkbox"/> Canyon High School |
| <input type="checkbox"/> Westover Park Junior High School | <input type="checkbox"/> Canyon Junior High School |
| <input type="checkbox"/> Greenways Intermediate School | <input type="checkbox"/> Canyon Intermediate School |
| <input type="checkbox"/> Pinnacle Intermediate School | <input type="checkbox"/> Reeves-Hinger Elementary School |
| <input type="checkbox"/> Arden Road Elementary School | <input type="checkbox"/> Crestview Elementary School |
| <input type="checkbox"/> Gene Howe Elementary School | <input type="checkbox"/> Lakeview Elementary School |
| <input type="checkbox"/> Sundown Lane Elementary School | <input type="checkbox"/> Youth Center |
| <input type="checkbox"/> Hillside Elementary School | <input type="checkbox"/> Midway Alternative High School |
| <input type="checkbox"/> City View Elementary School | |

Assignment:	Desired Grade:	Desired Assignment:			
	Desired Level:	<input type="checkbox"/> EC – 4	<input type="checkbox"/> 5 – 6	<input type="checkbox"/> 7-8	<input type="checkbox"/> 9 - 12
	Interested in	<input type="checkbox"/> Counselor	<input type="checkbox"/> Librarian		
	Non-teaching position:	<input type="checkbox"/> Clerical/Secretarial	<input type="checkbox"/> Diagnostician		
		<input type="checkbox"/> School Administrator	<input type="checkbox"/> District Administration		

Other: _____

Reason for request: _____

I understand that by signing this request, I am not guaranteed a change in my assignment for the upcoming school year. However, I may request consideration for any open positions that meets the criteria noted above in which I possess the minimum qualifications.

Employee Signature: _____ **Date:** _____

Principal Signature: _____ **Date:** _____

District Administration Signature: _____ **Date:** _____