

ALCORN STATE UNIVERSITY
Office Human Resources Management
1000 ASU Drive #390, Lorman, MS 39096

Internal Transfer Request

Position applied for _____ Department _____

Employee Requesting Transfer:

I have applied for the above listed position and have followed the necessary requirements. I understand that completion of this form does not guarantee being hired.

Employee Signature

Date

Hiring Department:

() The above named applicant meets all hiring requirements and is recommended to fill the vacant position.

() The above named applicant was not selected for the position.

_____/_____

Hiring Manager's Signature

Date

_____/_____

Vice President's Signature

Date

Office of Human Resources Management

The above named employee () has or () has not completed his/her initial probationary period. The personnel records of said employee contain dates of employment, evaluation ratings, and may contain letters relating to job performance and are reviewable upon request.

AVP of Human Resources Management

Date

Immediate Supervisor (Transferring Department):

I have been notified by the above named employee that he/she has applied for a position in the department listed above. If selected for the position, he/she will be released from his/her current position within two-weeks (non-exempt) or our-weeks (exempt) of the final transfer approval date.

Supervisor's Signature

Date

This form, with signatures of the transferring employee, present supervisor, hiring manager (new department), and Unit VP, must be submitted to the Office of Human Resources Management before and official offer letter is issued.