



**LOS ANGELES UNIFIED SCHOOL DISTRICT**  
**Human Resources Division**  
 Certificated Assignments and Support Services

**TEACHER ASSISTANT TRANSFER REQUEST**

The teacher assistant transfer request program provides teacher assistants the opportunity to seek transfers to any school in the District as specified in the LAUSD/Unit F Collective Bargaining Agreement Article XII, Section 2.0. For information related to the program description and eligibility, please refer to Bargaining Unit F, Collective Bargaining Unit Article XII.

**Per the Bargaining Unit F Collective Bargaining Agreement, Article XII, Section 3.0 " Employees who voluntarily transfer from one District site to another shall provide to the administrator of the sending school at least ten (10) working days' notice of their intent to transfer, unless mutual agreement is reached for a lesser time period by the site administrators at the sending and receiving schools."**

**Transfer Form Instructions**

- **Teacher Assistant provides form to Current Principal/Administrator**
- **Current Principal/Administrator signs the form and returns to Teacher Assistant**
- **Teacher Assistant provides form to Future Principal/Administrator**
- **Future Principal/Administrator signs and uploads form along with the Nepotism & Request for Personnel Action Form**
- **Visit <https://achieve.lausd.net/Page/13605> to submit an Onboarding Request to Hire**
- **Please note Principals can't hold Teacher Assistants for more than 10 days once this form has been turned in to the TA Unit**

**TEACHER ASSISTANT'S INFORMATION**

Name	Employee Number
Address	Preferred Contact Phone Number
LAUSD Email Address _____@lausd.net	Information regarding transfer requests will be emailed to this address.
Current School Name	Current School Phone Number
Current School 7-digit Cost Center	
New School Name	New School Phone Number
New School 7-digit Cost Center	
Teacher Assistant's Signature:	Date: (MM/DD/YYYY)

**THIS SECTION MUST BE COMPLETED BY BOTH SENDING & RECEIVING PRINCIPALS/ADMINISTRATORS FOR REQUEST TO BE PROCESSED**

SENDING Principal's Name:	SENDING Principal Email:	SENDING Principal's Signature:	Date: MM/DD/YYYY
	_____@lausd.net		

Agreed Release Date:(MM/DD/YYYY)	Transfer Effective Date: (MM/DD/YYYY)
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RECEIVING Principal's Name:	RECEIVING Principal Email:	RECEIVING Principal's Signature:	Date: MM/DD/YYYY
	_____@lausd.net		

**The Nepotism Form and Request for Personnel Action are required and must be submitted with this request by the Receiving Principal. Principal's signature below denotes approval for the Teacher Assistant to transfer and confirms that all required documents are included.**