

CITY OF PAWTUCKET

Division of Human Resources

Non-Union Transfer Request EMPLOYEE REQUEST FOR POSITION TRANSFER

Form MUST be filled out completely

Name:	
Address:	
City, State & Zip Co	ode:
Tel. #:	DOH:
Present Job Title and Division:	
Position I wish	to be transferred to:
Job Title:	Division:
Copies of any licenses, certificates, degrees, etc. required for this position MUST be attached at time of application.	
position, furthermo	ne Job Description and understand the requirements for this ore, I understand that I may be required to successfully pass a nation and/or Oral Board prior to a permanent transfer.
DATE:	SIGNATURE