

**Human Resources**

Director (212) 772-4511  
Deputy Director (212) 772-4451  
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Reception (212) 772-4451  
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GITTLESON INTRA-COLLEGE TRANSFER

\_\_\_\_\_  
(Date)

I, \_\_\_\_\_, wish to be considered for reassignment.  
(Print Name)

I am presently assigned: \_\_\_\_\_

Department: \_\_\_\_\_

Job Title: \_\_\_\_\_

My present salary is: \_\_\_\_\_

My reasons for requesting reassignment are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature)

Revised 4/2002