

I am a:
Certified Teacher
Paraprofessional

2026-2027 **DICKINSON** INDEPENDENT SCHOOL DISTRICT

- Fill out the **Teacher/Paraprofessional Transfer Request Form**, ensuring all required information is **typed**. You may request a transfer to **multiple campuses** and for **any positions** for which you meet certification requirements.
- The request **must be signed by the current campus principal** before submission. Once signed, **email the completed form to pandersen@dickinsonisd.org**.
- Submission window: February 1 - April 1 for the following school year.**
- Human Resources** will review your qualifications: If approved, HR will forward the request to the requested campus(es) via Google Drive. If the transfer involves a **Special Programs position**, **approval from Executive Director** is required. Transfers are subject to **position availability and campus principal approval**.
- The **principal of the requested campus** will review your request, conduct an interview if necessary, and decide whether to recommend approval. If approved, the principal will **email the transfer request form to the HR office**.
- The HR office will send an **official transfer confirmation email** to: the transferring teacher/paraprofessional, the current principal, the new principal (if applicable). All transfer request **must be finalized by May 1**.

Name: _____

Employee ID #: _____

Current Campus: _____

Current
Assignment: _____

I am requesting a transfer to: (Check as applicable)

Bay Colony Elementary
Calder Road Elementary
Hughes Road Elementary
Lobit Elementary
Ruth Laird Elementary
San Leon Elementary
Silbernagel Elementary

Barber Middle School
Dunbar Middle School
Dickinson Junior High School
Kranz Junior High School
McAdams Junior High School
Dickinson High School
DALC/DCC
CAP

Requested teaching assignment: First Choice: _____

Second Choice: _____

Signature -Teacher

Date

Signature - Current Campus Principal

Date

Signature - Executive Director Special Programs

Date

Signature - Director Human Resources

Date

(HR office only)

Date(s) forwarded
to campus(es)

To be completed by receiving principal:

Denied
 Approved Campus _____ Subject/Grade/Level _____
(If approved) Replacing _____ who resigned transferred new position

Receiving Principal's signature _____

Date received in HR

Return to Director of Human Resources

Signature - Director Human Resources

HR revised 01/21/2026