

Nick Kohler

BUCYRUS CITY SCHOOL DISTRICT
TEACHER REQUEST FOR TRANSFER FORM

Please complete this form in duplicate and forward both copies to the superintendent for his approval or rejection. Copies will then be returned or retained as follows: 1) Original - retained by superintendent, and 2) duplicate returned to the person requesting transfer.

A. General Information:

Number of years in school system: 3 years

Number of year in present position: 1 year

B. Present Position:

Other positions held in this school system:

- 1. Building Substitute Dates 2021 - 2022 School Year
- 2. Intervention Specialist (8th) Dates 2022 - 2023 School Year
- 3. Intervention Specialist (6th) Dates 2023 - 2024 School Year.

C. Transfer Requested:

Name of school: Bucyrus Secondary School Position Intervention Specialist

Reason(s) for request: Job movement from middle school position to high school position.

Qualifications for position: Finished Special Education courses.

Need to Pass OAE 090 then Intervention degree completed.

Current: Supplemental Intervention Specialist (K-12)

Signature Nick Kohler
Applicant

D. Disposition of Request (check one)

Approved

Rejected

If request is rejected, the reason(s) follow: _____

Superintendent's Signature

[Signature]
3-8-24