



**CITY OF DANVILLE
FULL-TIME EMPLOYEE
REQUEST FOR POSITION TRANSFER**
(Please type or print legibly)

To: Bill Westphal, Human Resources Administrator Date: _____

From: _____
(Full-time employee's name)

Address: _____

Date started as full-time employee of City: _____

Did you work as a seasonal worker before becoming full-time? _____

Current Job Title: _____

Current Department: _____ Division: _____

Please consider this "Request to Transfer" as my application for the position of:

_____ in the _____ Department.

The following information is provided in support of my application:

Work History with the City of Danville: (give job titles and approximate dates)

Job Related Skills (list any appropriate licenses or certifications):

Narrative: (explain reasons you wish to make this transfer)

Educational Background: Complete the following chart as thoroughly as possible.

School or Level	Name and Address of School	Course of Study	Circle Last Year Completed	Did You Graduate?	List Diploma Or Degree
High School			9 10	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			11 12		
Jr or Community College			1 2	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or School			1 2	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			3 4		
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Technical School (Specify)			1 2	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			3 4		
Military					
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Other Training/Skills: Provide as much information as possible.

Yes No Have you received training in the field for which you are applying? If Yes, explain giving training program name, school or location of training, hours completed, and certificates received.

Which of the following skills do you possess?

- Typing Word Processing Adding Machine Calculator Filing Radio
 Transcribing Personal Computer Driving a Truck Operating Heavy Equipment
 Operating Mowing Equipment Commercial Drivers License Guard Training
 First Aid Training
 Other (please list) _____

Which computer skills do you possess?

- Word Processing Data Bases Spreadsheets Programming
 Other (please list) _____

List computer programs (software) you are able to use with proficiency: _____

Employment Background: Begin with job you had prior to being employed by the City of Danville. List your work history, including military service.

1.	Employer:	Employer Location:	
	Employed From:	To:	Job Duties/Job Title:
	Skills Required:	Last Salary:	Reason for Leaving:
2.	Employer:	Employer Location:	
	Employed From:	To:	Job Duties/Job Title:
	Skills Required:	Last Salary:	Reason for Leaving:
3.	Employer:	Employer Location:	
	Employed From:	To:	Job Duties/Job Title:
	Skills Required:	Last Salary:	Reason for Leaving:
4.	Employer:	Employer Location:	
	Employed From:	To:	Job Duties/Job Title:
	Skills Required:	Last Salary:	Reason for Leaving:

Other Activities: List professional, trade, business, or civic activities and offices held.

Additional Information: List any additional information you feel important to your application.

References: Give name, address and telephone number of two references who are not related to you and who know of your skills and abilities and can vouch for your character.

1. Name: _____ Phone: _____

Address: _____ City: _____

In what capacity does this person know you? _____

2. Name: _____ Phone: _____

Address: _____ City: _____

In what capacity does this person know you? _____

Read the following statement carefully before signing application. Application must be signed.

I hereby certify and affirm that this application contains no misrepresentations or falsifications, omissions, or concealment of material fact, and that the information given by me is true and complete to the best of my knowledge. I am aware that should any investigation disclose any such misrepresentation, falsification, omission, or concealment of material fact, my application may be rejected and my name removed from any eligibility list on which it may be placed. I also understand that that my employment with the City of Danville may be terminated.

Date: _____ Applicant's Signature: _____

Please check to see that you have answered all questions and that your application (including signature) is complete.

PLEASE SUBMIT THE COMPLETED TRANSFER REQUEST TO THE CITY PERSONNEL DEPARTMENT, IN CITY HALL, EITHER IN PERSON OR INTEROFFICE MAIL.

