

JEFFERSON REHABILITATION CENTER
A Chapter of NYSARC, Inc.

POSITION TRANSFER REQUEST
(Job Bid Form)

TO: Human Resources Department

DATE: _____

I am applying for the position of _____ posted on _____.
(Position) (Date)

Please review my personnel file to confirm my eligibility. I can be reached at _____.
(Phone #)

I am currently employed as _____
(Current Position) (Dept.)

since ___/___/___ and have satisfied the qualifying period (ICF – 12 mos.; all other depts. – 6 mos.)

(Signature)

(Print Name)

(Street Address)

(City and Zip)

**TO BE COMPLETED BEFORE SUBMISSION
TO HUMAN RESOURCES:**

1) Transfer Approved YES NO

2) Signature of Interviewer _____

3) Transfer Date Effective ___/___/___

Human Resources Dept. Use

_____ ***Meets Eligibility***

_____ ***Does Not Meet Eligibility***

PLEASE ATTACH: INTERVIEW SHEETS AND SIGNED JOB DESCRIPTION