IN-CLASS TRANSFER REQUEST

State Form 53673 (8-11)
LOGANSPORT STATE HOSPITAL

INSTRUCTIONS: Request for In-Classification Transfer to another Service Line or Shift. This form is to be used by employees to request an in-classification transfer to another service line or shift in response to a posted opportunity for transfer. Employees may at any time be assigned from one position to another in the same classification based on hospital needs. Employees' requests for transfer to another unit and/or shift will be considered when submitted in accordance with procedure. The following are guidelines:

1. *All requests for in-classification transfers must be made in response to a notice of available assignment posted by Human Resources.*
2. *All spaces in request must be completed.*
3. *Requests must be received in Human Resources no later than the posting closing date to be considered.*
4. *Employees will not be considered for transfer if they have been employed for less than six (6) months in their current classification.*
5. *Employees will not be considered for transfer if there is any disciplinary action in their personnel file within the past year.*
6. *Employees must "meet expectations" or above on their last appraisal in order to be considered for transfer.*
7. *Employees will not be eligible for another transfer within one (1) year of being granted a transfer unless deemed by management to be operationally necessary.*
8. *The needs of the patient care area will always be given first priority, including need for specific qualifications.*

NOTE: Return completed form to Human Resources.

Posted assignment request:

Job classification	Service line	Shift

Date request submitted *(month, day, year)*

Employee information:

Name of employee	Job classification

Date of hire *(month, day, year)*

Current assignment:

Service line	Shift	Dates of current assignment *(month, day, year)*

Prior assignment:

Service line	Shift	Dates of assignment *(month, day, year)*

Reason for request:

Overall Rating on last Performance Appraisal

Any discipline in file within past year?

HUMAN RESOURCES USE ONLY	
Date received *(month, day, year):*	Information verified by:
Comments:	