

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
REQUEST FOR HARDSHIP TRANSFER (BTU-ESP) – ARTICLE 13 (G-1)**

Hardship Transfer is defined as an employee traveling 20 miles or more one way to work or having a serious medical and/or personal problem (must be documented).

EMPLOYEE NAME:

REQUEST DATE:

EMPLOYEE
ADDRESS:

PERSONNEL NO:

CURRENT
SCHOOL/DEPARTMENT:

PRESENT JOB CLASSIFICATION:

REASON FOR HARDSHIP TRANSFER REQUEST *(Must be documented):*

An employee may request only one hardship transfer within a fiscal year. Hardship transfer applications shall expire at the conclusion of the fiscal year in which it was submitted. An employee who meets the “Hardship” definition will be placed in a vacant position.

Employee’s Signature

Date

DISTRIBUTION:

- Original: Talent Acquisition & Operations (NI)
- Employee & Labor Relations
- Copy to Administrator **(Optional)**
- Copy Retained Employee