

MARTHA'S VINEYARD PUBLIC SCHOOL

EDUCATIONAL SUPPORT PROFESSIONAL (ESP)
TRACK CHANGE REQUEST

NAME: _____ DATE: _____

SCHOOL: _____ HOME PHONE# _____

Dear Superintendent of Schools:

I am requesting a track change from _____ to _____

Enclosed please find an official college transcript indicating the award of said degree.

I UNDERSTAND THAT IN ORDER FOR ME TO CHANGE TRACKS:

- 1) This form must be filed with your payroll person in the Superintendent's Office. (Maureen O'Malley-Edgartown and Up Island, Maureen Fitzgerald-High School, Tara Sykes-Super's Office, Tisbury and Oak Bluffs).
- 2) I have also attached an OFFICIAL TRANSCRIPT to this form.
- 3) If I wish to access my personnel file, I must notify the Superintendent's office 24 hours in advance.
- 4) Forms and transcripts received by October 1st will be honored for the full year. Forms and transcripts received after that date will be honored for the next year only.

Cordially,

Educational Support Professional Signature

_____ OFFICE USE _____

APPROVED: _____ DATE: _____
SUPERINTENDENT OF SCHOOLS