



THE REPUBLIC OF UGANDA

MINISTRY OF EDUCATION AND SPORTS

DEPLOYMENT AND TRANSFER FORM (20....)

This form is to be completed by Teachers/Lecturers/Instructors/Tutors and Non-teaching staff who wish to request for a deployment/transfer to a School / Institution

SECTION I

NAME OF APPLICANT:.....UTS:.....REG NO.....

CURRENT SCHOOL:.....DISTRICT:.....

DATE OF APPOINTMENT:.....TEACHING SUBJECTS:

PREVIOUS SCHOOL:.....

SECTION II

State school(s) of interest for deployment/transfer in order of preference

S/ NO.	SCHOOL	DISTRICT/ CITY/ MUNICIPALITY	PRINCIPAL/ HEADTEACHER ENDORSEMENT
1.			
2.			
3.			

STATE REASONS FOR DEPLOYMENT/TRANSFER (ATTACH ANY RELEVANT DOCUMENTS TO SUPPORT REASONS FOR TRANSFER E.G DOCTORS RECOMMENATION)

1.....

.....

2.....

.....

3.....

.....

SIGNATURE **DATE**

SECTION III

WAGE CONFIRMATION BY THE RECEIVING RESPONSIBLE OFFICER

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SIGNATURE/STAMP..... **DATE**.....

COMMENTS OF THE CURRENT PRINCIPAL/HEADTEACHER ON TRANSFER AND REASONS FOR TRANSFER

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SIGNATURE/STAMP..... **DATE**.....

REMARKS BY DEPLOYMENT/ TRANSFER COMMITTEE

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