REPUBLIC OF KENYA



TEACHERS SERVICE COMMISSION

APPLICATION FOR TRANSFER

(To be completed in TRIPLICATE by a teacher applying for inter-County/Intra-County transfer . Complete one copy only for transfer within Sub-County.)

1.	Full name		
	(BLOCK CAPITALS, SURNAME FIRST)		
2.	TSC NoEmail		
3.	Teaching Subjects		
4.	Job Group		
5.	Current Station		
	Sub-CountyCounty		
	Length of stay at the present school		
	Length of stay in the same Sub-County		
6.	Present assignment		
7.	Institution to which transfer is requested for		
	Sub-County County		
8.	When is transfer required		
9.	Reason for transfer		
	Name		
	Signature		
	Date		
10.	Head of institution's recommendation		



		Name		
		TSC No		
	Official Stamp	Signature		
		Date		
11.	Recommendation by TSC County Director/Staffing Officer for transfer outside the County/Sub County:			
		Name		
		TSC No		
		Designation		
		Signature		
		Date		
		Date		
12.	Decision by the TSC-CD (For internal transfers within County/Sub-County) (a) Approved Fromschool to			
	(b) Not Approved			
	Official Stamp	Name		
	Official Staffip	Signature of TSC-CD/DSO		
		TSC No		
		Date		

NOTES FOR APPLICANTS

- 1. All relevant sections of this form must be completed in full.
- 2. Applications should be completed in **TRIPLICATE**. Two (2) of these copies should be forwarded to the County Director/Staffing Officer through the head of the institution for recommendation, and distribution as follows:
 - (i) Original to the Teachers Service Commission.
 - (ii) Copy to TSC County Director/Staffing Officer.
- 3. No teacher shall move from one station to another before he/she receives a letter of transfer from the Commission/TSC County Director/Staffing Officer.
- 4. A teacher's transfer request may not be considered until he/she has served in a station he/she is assigned to teach for a period not less than five years, except under conditions specified in regulation 27 (2) of the Code of Regulations for Teachers.

