



LESOTHO

SCHEDULE 23

Regulations 18 (6), 20(2) and 22 (9)

TRANSFER OF A TEACHER TO A SCHOOL

Particulars of teacher;

Name of teacher: _____

Qualifications: _____ Employment: _____

Registration No.: _____

Terms of appointment: _____

Present school (if any): _____

You are hereby transferred to: _____ school

With effect from: _____ (date).

You take the place of teacher: _____ who left due

To (death, dismissal, retirement, termination, transfer, leave)*

*Your allocation to this school will be for an indefinite period.

*Your allocation to this school will be for a limited period, until _____

(date) unless it is ended earlier than this by one month's notice.

*Your allocation is provisional, while other applicants are considered, and is for 60 school days or until a candidate is selected for the post, whichever period is the shorter. If you wish to be considered for the post, you should apply to the School Board or Management Committee through the Principal.

*(Delete whichever does not apply)

Signed: _____ date stamp

Secretary, Teaching Service Commission

Copies should be sent to:

Secretary, Board or Management Committee of present school

Secretary, Board or Management Committee of new school

Director, Teaching Service Department