

# FORM OF INTENT

NAME \_\_\_\_\_ DATE \_\_\_\_\_

SCHOOL \_\_\_\_\_ PRESENT GRADE \_\_\_\_\_

YEARS OF EXPERIENCE \_\_\_\_\_ CERTIFIED \_\_\_\_\_

SUBJECT AREAS \_\_\_\_\_

DEGREE \_\_\_\_\_  
(Major) (Minor)

- A.  I am unable to return to this school for the next school year.
- B.  I would wish to return for the next school year, if asked to renew my contract.
- C.  I am satisfied with my present teaching assignment.
- \*D.  I request consideration for a position in another Catholic school in the diocese. I have completed three years of service in this school.

Reasons for request:

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\* If "D" is checked by any teacher, please forward a copy to the superintendent's office with your comments.