Commonwealth of Massachusetts Human Resources Division (HRD) 2020 Falmouth Police Lieutenant Sole Assessment Center Examination **Employment Verification Form**

Instructions: The Appointing Authority (or his/her designee) must sign and date this form, certifying the information provided for each promotional applicant is accurate. Attach additional sheets if necessary. This form must be submitted no later than 7 calendar days after the exam with a deadline of May 5, 2020. Supporting documentation must be scanned and attached to your application or sent to civilservice@mass.gov no later than May 5, 2020. Applicants who are claiming the 25-Year Promotional Preference: This Form will serve as the primary source of verification and computation of an applicant's eligibility for this preference, and the exam date of April 28, 2020 will be the computation cut-off date. Time worked as a Permanent Reserve/Intermittent Police Officer or a Temporary Police Officer after certification may be applied toward one's eligibility for this preference. Please be thorough in completing this form. Not indicating full-time or part-time (if part-time then hours) will be considered insufficient verification. Acting time will be creditable only in the title of the exam.

Name of Applicant:	Last 4 digits of Social Security #:
Verifying Department:	Exam Title:

I. PERMANENT SERVICE

List Date of Original Permanent Appointment: ______Title: _____ List Dates and Reasons for any breaks in service: _____

II. PROMOTIONS WITHIN DEPARTMENT (List Dates of Promotions and Rank): Date of Promotion: Rank:

III. RESERVE/INTERMITTENT, TEMPORARY, PROVISIONAL SERVICE OR OTHER

EXPERIENCE IN THE DEPARTMENT. (Examples: Provisional Captain, Temporary Captain, etc.) A) List Service From April 28, 2015 To April 28, 2020.

<u>R</u>	<u>ank:</u>		Total # of Hours: (Within specified Service Timeframe. If full-time, enter "FT". If part-time, include total amount & the word "Hrs".)	Dates of Service Timeframe: (From – To)
(H	Example:	Temp Captain	FT	(12/1/2017-03/20/2018)
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B) List Se	ervice Fro	om April 28, 2008 '	To April 28, 2015.	
R	ank:		Total # of Hours:	Dates of Service Timeframe:

(Within specified Service Timeframe.

If full-time, enter "FT". If part-time, include total amount & the word "Hrs".)

FT

(From – To)

(12/12/2010 - 9/1/2012)

(Example: Temp Captain

C) List service prior to April 28, 2008, as a Reserve/Intermittent or Temporary Police Officer after certification, for the purpose of computing the applicant's eligibility for the 25-Year Promotional Preference. Please include service dates and number of hours worked:

Print Name of Appointing Authority (or designee):	
Title of Designee:	
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Signature of Appointing Authority (or designee):_____ Date:_____