## Commonwealth of Massachusetts Human Resources Division (HRD) 2020 Norton Deputy Police Chief Sole Assessment Center Examination Employment Verification Form

Instructions: The Appointing Authority (or his/her designee) <u>must sign</u> 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 **January 7**, 2020. Supporting documentation must be scanned and attached to your application or sent to <u>civilservice@mass.gov</u> no later than **January 7**, 2020. <u>Applicants who are claiming the 25-Year Promotional Preference</u>: 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 **January 7**, 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 #:Exam Title:   |  |
|---|--|--|
| Verifying Department:   |  |  |
| . PERMANENT SERVICE List Date of Original Permanent App List Dates and Reasons for any break                    |  |  |
| I. PROMOTIONS WITHIN DEP Rank   |  | <u>Promotion:</u>  |
| II. RESERVE/INTERMITTENT EXPERIENCE IN THE DEPA A) List Service From January 7, 20                              | , TEMPORARY, PROVISIONA<br>ARTMENT. (Examples: Provision<br>015 To January 7, 2020.  | L SERVICE OR OTHER nal Captain, Temporary Captain, etc.) |
| Rank:   | Total # of Hours:  (Within specified Service Timeframe.  If full-time, enter "FT". If part-time, include total amount & the word "Hrs".) | <u>Dates of Service Timeframe:</u> (From – To)           |
| (Example: Temp Captain  | FT   | (12/1/2014–03/20/2016)                                   |
| B) List Service From January 7, 20  |  |  |
| Rank:   | Total # of Hours: (Within specified Service Timeframe. If full-time, enter "FT". If part-time, include total amount & the word "Hrs".)   | <u>Dates of Service Timeframe:</u> (From – To)           |
| (Example: Temp Captain  | FT   | (12/12/2008 – 9/1/2009)                                  |
|   | <del></del>  |  |
| C) List service prior to January 7, ertification, for the purpose of cor<br>Please include service dates and nu | nputing the applicant's eligibility  | y for the 25-Year Promotional Preference                 |
| Print Name of Appointing Authori  | ty (or designee): Title of Designee:   |  |
| Signature of Appointing Authority   | (or designee):   | Date:  |