## Commonwealth of Massachusetts Human Resources Division (HRD) 2020 Palmer Police Sergeant 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 **June 30, 2020**. Supporting documentation must be scanned and attached to your application or sent to <u>civilservice@mass.gov</u> no later than **June 30, 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 **June 23, 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:		
I. PERMANENT SERVICE List Date of Original Permanent App List Dates and Reasons for any break		
II. PROMOTIONS WITHIN DEP  Rank		f <u>Promotion:</u>
III. RESERVE/INTERMITTENT	<b>ARTMENT.</b> (Examples: Provision	
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	(12/1/2017–03/20/2018)
B) List Service From June 23, 2008		
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	(12/12/2010 – 9/1/2012)
C) List service prior to June 23, 20 certification, for the purpose of cor 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: