Commonwealth of Massachusetts Human Resources Division (HRD) 2022 Hanover Fire Captain 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 September 14, 2022. Supporting documentation must be scanned and attached to your application or sent to civilservice@mass.gov no later than September 14, 2022. 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 September 7, 2022 will be the computation cut-off date. Time worked as a Permanent Reserve/Intermittent Firefighter or a Temporary Firefighter 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.

	Last 4 digits of Social Security #: Exam Title:	
Verifying Department:		
. PERMANENT SERVICE		
List Date of Original Permanent Appo	ointment:	Title:
List Dates and Reasons for any break	s in service:	
I. PROMOTIONS WITHIN DEP. <u>R</u> ank:	`	otions and Rank): Promotion:
		
III. RESERVE/INTERMITTENT,	TEMPORARY, PROVISIONA	L SERVICE OR OTHER
EXPERIENCE IN THE DEPA	ARTMENT. (Examples: Provision	nal Captain, Temporary Captain, etc.)
A) List Service From September 7,	2017 To September 7, 2022.	
Rank:	Total # of Hours:	Dates of Service Timeframe:
	(Within specified Service Timeframe. If full-time, enter "FT". If part-time,	(From – To)
	include total amount & the word "Hrs".)	(10/1/2017 00/20/2010)
(Example: Temp Captain	FT	(12/1/2017–03/20/2018)
B) List Service From September 7,	2010 To September 7, 2017.	
Rank:	Total # of Hours:	Dates of Service Timeframe:
	-	
		
		
C) List service prior to September 7		it or Temporary Firefighter after / for the 25-Year Promotional Prefere
Please include service dates and nu		
rease merade service dates and ma	miser of flours worker.	
Print Name of Appointing Authorit		
	Title of Designee:	
Signature of Appointing Authority	(or designee):	Date: