Commonwealth of Massachusetts Human Resources Division (HRD) 2022 Medford Police Lieutenant 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 18, 2022**. Supporting documentation must be scanned and attached to your application or sent to <u>civilservice@mass.gov</u> no later than **June 18, 2022**. <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 11, 2022** 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. Service as a Student Officer, before successful completion of an approved academy, does not count towards meeting 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 Appo	intment:	Title:
List Dates and Reasons for any breaks	in service:	
II. PROMOTIONS WITHIN DEPA	ADTMENT (List Dates of Prom	ections and Dank).
Rank:		Promotion:
III. RESERVE/INTERMITTENT,	TEMPORARY, PROVISIONA	L SERVICE OR OTHER
		al Captain, Temporary Captain, etc.)
A) List Service From June 11, 2017		
Rank:	Total # of Hours: (Within specified Service Timeframe.	<u>Dates of Service Timeframe:</u> (From – To)
	If full-time, enter "FT". If part-time, include total amount & the word "Hrs".)	
(Example: Temp Captain	FT	(12/1/2017–03/20/2018)
B) List Service From June 11, 2010		
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Rank:	Total # of Hours:	Dates of Service Timeframe:
C) List service prior to June 11, 201		
		for the 25-Year Promotional Preference
Please include service dates and num	nber of nours worked:	
Print Name of Appointing Authority	y (or designee): Title of Designee:	
	The of Designee.	
Signature of Appointing Authority (or designee):		Date: