

**Commonwealth of Massachusetts Human Resources Division
2024 Correction Officer II Promotional Examinations
Employment Verification Form**

Instructions: The Appointing Authority (or their designee) must sign and date this form, certifying the information provided for each promotional candidate is accurate. Attach additional paperwork if necessary. This form must be submitted no later than seven calendar days after the written examination date. This form and any supporting documentation must be scanned and attached to the application or sent to civilservice@mass.gov no later than **August 24, 2024**. Please be thorough in completing this form. Provisional and/or temporary time will only be credible in the title of the examination.

Name of Candidate: _____ **Last four digits of Social Security #:** _____
Verifying Agency: _____ **Examination Title:** _____

I. PERMANENT ORIGINAL SERVICE

List Date of Permanent Appointment in rank of Correction Officer I: _____

List Dates and Reasons for any breaks in service at any and all ranks: _____

II. PROMOTIONS WITHIN AGENCY (List Ranks and Dates of Promotions):

Rank:

Date of Promotion:

III. TEMPORARY AND PROVISIONAL TIME IN RANK(S)

Rank:

Dates of Service (From – To):

Print Name of Appointing Authority (or designee): _____

Title of Designee: _____

Signature of Appointing Authority (or designee): _____ **Date:** _____