Commonwealth of Massachusetts Human Resources Division 2026 Police Departmental Promotional Exam Sole Assessment Center with Experience and Education Employment Verification Form

Instructions: The Appointing Authority (or designee) must sign and date this form, certifying the information provided is accurate. Attach additional paperwork if necessary. This form and any supporting documentation must be scanned and attached to the Experience and Education (E&E) application or sent to civilservice@mass.gov no later than seven calendar days following the written exam date. Acting time will only be creditable in the title of the exam.

Note: Some sections of this form may not apply to every department.

Candidate Name:

Exam Date:

Verifying Department:

Exam Title:

I. PERMANENT APPOINTMENT

Police Officer permanent appointment date:

List end date (if not current department):

List dates and reasons for any breaks in service at all ranks:

II. PERMANENT PROMOTIONS IN THE DEPARTMENT

Rank

Date of Promotion

III. ACTING SERVICE IN EXAMINATION TITLE ONLY

Acting Title	PT (list hours) or FT	Dates of Service

IV. TEMPORARY (AFTER CERTIFICATION) OR PROVISIONAL SERVICE IN THE DEPARTMENT

Temporary or Provisional	<u>Rank</u>	PT (list hours) or FT	Dates of Service
	-		
	s a Reserve/Inte	candidate's eligibility for 25-year ermittent or Temporary Police O included:	_
*Note: Service as a Student Og	fficer does not co	ount towards meeting this preferen	ce.
Print Name and Title of App	ointing Authori	ity (or designee):	
Signature of Appointing Aut	hority (or desig	nee):	
Date:			