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

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

Name of Candidate:	Exam Date:
Verifying Agency:	Exam Title:
I. PERMANENT SERVICE	
List Date of Permanent Appointment in rank of Corn	rection Officer I:
List Dates and Reasons for any breaks in service at a	anv and all ranks:
II. PROMOTIONS WITHIN AGENCY (List Dat	tes of Promotions and Rank):
Rank:	Date of Promotion:
	
III. TEMPORARY AND PROVISIONAL SERV	
Rank:	<u>Dates of Service (From – To):</u>
nt Name of Appointing Authority (or designee):	
nature of Annainting Authority (or designes).	Date: