Commonwealth of Massachusetts Human Resources Division (HRD) 2020 Field Parole Officer C/D 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 **August 13, 2020**. Supporting documentation must be scanned and attached to your application or sent to <u>civilservice@mass.gov</u> no later than **August 13, 2020**. 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.

Verifying Department:	Exam Title:	
. PERMANENT SERVICE List Date of Original Permanent Appoint List Dates and Reasons for any breaks it		
I. PROMOTIONS WITHIN DEPAIRANK:	<u>Date of</u>	otions and Rank): Promotion:
II. RESERVE/INTERMITTENT, T EXPERIENCE IN THE DEPAR) List Service From August 6, 2008	RTMENT. (Examples: Field Par	
Rank:	Total # of Hours: (Within specified Service Timeframe. If full-time, enter "FT". If part-time, include total amount & the word "Hrs".)	<u>Dates of Service Timeframe</u> (From – To)
(Example: Field Parole Officer C	FT	(12/12/2010 – 9/1/2012)
List Service From August 6, 2000	 To August 6, 2008.	
Rank:	Total # of Hours: (Within specified Service Timeframe. If full-time, enter "FT". If part-time, include total amount & the word "Hrs".)	Dates of Service Timeframe (From – To)
(Example: Field Parole Officer A		(12/12/2010 – 9/1/2012)
Print Name of Appointing Authority		
'1	Title of Designee:	