Commonwealth of Massachusetts Human Resources Division (HRD) 2020 Fitchburg Fire Chief Sole Assessment Center Examination Employment Verification Form

Instructions: The Appointing Authority (or his/her designee) must sign 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 March 3, 2020. Supporting documentation must be scanned and attached to your application or sent to civilservice@mass.gov no later than March 3, 2020. Applicants who are claiming the 25-Year Promotional Preference: 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 February 25, 2020 will be the computation cut-off date. Time worked as a Permanent Reserve/Intermittent Firefighter or a Temporary Firefighter after certification may be applied toward one's eligibility for 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 Apportunity List Dates and Reasons for any break		
II. PROMOTIONS WITHIN DEP. Rank	ARTMENT (List Dates of Prom	
III. RESERVE/INTERMITTENT, EXPERIENCE IN THE DEPA		L SERVICE OR OTHER nal Captain, Temporary Captain, etc.)
A) List Service From February 25,	` _	
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: Temp Captain	FT	(12/1/2014–03/20/2016)
B) List Service From February 25,	2008 To February 25, 2015.	
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: Temp Captain	FT	(12/12/2008 – 9/1/2009)
	nputing the applicant's eligibility mber of hours worked:	for the 25-Year Promotional Preference
Frint Name of Appointing Authorn	Title of Designee:	
Signature of Appointing Authority	(or designee):	Date: