Human Resources Division Civil Service Unit 100 Cambridge St. Suite 600 Boston, MA 02114



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PROVISIONAL PROMOTION

	State Service	Municipal Service
City or Town:		Department:
Division:		Bureau:
То:	The Personnel Administrator	Date:
Name of Employee:		SSN:
Posi	tion into which provisional promotion is r	requested:
Title:		Effective Date:
	of permanent position which promoted:	
auth		ompleted, including signature. If the appointing or is not in the next higher grade, he/she should in processing.
 Provisional promotion of the above employee is requested. The position to which promotion is requested is in the next higher grade. Signature of Appointing Authority: 		
	Provisional promotion of the above named employee is requested. The position to which promotion is requested is not in the next higher grade.	
(8	a) Statement of sound and sufficient rea public good.	son why provisional promotion will be for the
(ŀ		byee in the next lower grade and willing to accept.
	Signature of Appointing Authority:	
This	following statement applies on MUNICIP is to notify you that I have made a provisce forwarded copies of this letter to the Transcription.	PAL PROMOTIONS ONLY: ional promotion of the person named above. easurer and to (Insert title of Auditor, Accountant, etc.)
	uisition No.	