

**Commonwealth of Massachusetts Human Resources Division (HRD)  
 Correctional Officer II Promotional Exam  
 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 **June 30, 2018**. Supporting documentation must be scanned and attached to your application or sent to [civilservice@state.ma.us](mailto:civilservice@state.ma.us) no later than **June 30, 2018**. This Form will serve as the primary source of verification and computation of an applicant's eligibility and the exam date of **June 23, 2018** will be the computation cut-off date. Time worked as a Provisional or a Temporary Correctional Officer II after certification may be applied toward one's eligibility. Please be thorough in completing this form. Not indicating full-time or part-time (if part-time then hours) will be considered insufficient verification.

**Name of Applicant:** \_\_\_\_\_ **Social Security #:** \_\_\_\_\_  
**Verifying Department:** \_\_\_\_\_ **Exam Title:** \_\_\_\_\_

**I. PERMANENT SERVICE**

List Date of Original Permanent Appointment: \_\_\_\_\_ Title: \_\_\_\_\_  
 List Dates and Reasons for any breaks in service: \_\_\_\_\_  
 \_\_\_\_\_

**II. PROMOTIONS WITHIN DEPARTMENT (List Dates of Promotions and Rank):**

<u>Rank:</u>	<u>Date of Promotion:</u>
_____	_____
_____	_____
_____	_____

**III. TEMPORARY AFTER CERTIFICATION, PROVISIONAL SERVICE OR OTHER EXPERIENCE IN THE DEPARTMENT. (Examples: Provisional Correction Officer II, etc.)**

**A) List Service From June 23, 2013 To June 23, 2018.**

<u>Rank:</u>	<u>Total # of Shifts/Hrs:</u> <small>(Within specified Service Timeframe. If full-time, enter "FT". If part-time, include the word "Hrs".)</small>	<u>Dates of Service Timeframe:</u> <small>(From - To)</small>
(Example: Temp CO II)	FT	12/1/2014-03/20/2016)
_____	_____	_____
_____	_____	_____

**B) List Service From June 23, 2006 To June 23, 2013.**

<u>Rank:</u>	<u>Total # of Shifts/Hrs:</u> <small>(Within specified Service Timeframe. If full-time, enter "FT". If part-time, include the word "Hrs".)</small>	<u>Dates of Service Timeframe:</u> <small>(From - To)</small>
(Example: Provisional CO II)	2080 hrs.	12/12/2006 - 9/1/2009)
_____	_____	_____
_____	_____	_____

**Print Name of Appointing Authority (or designee):** \_\_\_\_\_  
**Title of Designee:** \_\_\_\_\_

**Signature of Appointing Authority (or designee):** \_\_\_\_\_ **Date:** \_\_\_\_\_