REQUEST FOR CERTIFICATION OF ELIGIBLES

TO: Broome County Department of Personnel DATE:
FROM: (Dept. or Agency)
CIVIL SERVICE TITLE:
MINIMUM SALARY*: ANNUAL**: HOURLY**: *(List amount that will appear on Payroll here)
**Hourly rate is required; if "+D.O.E." is applicable, criteria for use must be submitted.
PREFERENCE LIST REQUESTED? YES NO
#HRS/WK: # MONTHS/YR:
DAILY WORK SCHEDULE:
LOCATION:
DATE OF VACANCY: DESIRED START DATE:
Image: PERMANENT Last employee in position: Reason for vacancy:
[] CONTINGENT PERMANENT Reason for contingent permanent appointment (check one): [] Permanent probationary promotion of (name) [] Leave of absence for (name)
[] TEMPORARY Duration: Reason for temporary appointment (check one): [] Permanent probationary promotion of (name) [] Provisional promotion of (name) [] Temporary promotion of (name) [] Leave of absence for (name) [] Other (explain)
REMARKS:

SIGNATURE

TITLE