

VERIFICATION OF WORK EXPERIENCE –FOR CITY EMPLOYEES ONLY

NOTES TO SUPERVISORS

- If verifying equipment operation, specify each piece of qualifying equipment operated and the time spent operating this equipment.
- Credit will not be given for experience obtained by working out-of-class. If the duties claimed are inappropriate for the Civil Service classification, the position may be reviewed by our Classification Division.
- Credit will not be given in promotional examination for supervisory experience while relieving a supervisor, unless actually appointed to a position in the same class as the supervisor.
- *The information below must be signed by **BOTH** the **Division head**, and the appropriate **Department's Personnel Service section representative (Personnel Director, Senior Personnel Analyst, or Personnel Analyst)***
- This form must accompany the application.

TO BE COMPLETED BY SUPERVISOR

To: Personnel Department
700 East Temple Street, Room 100
STOP #391

EXAMINATION TITLE: _____

(Employee's Full Name) _____
(last 4 SSN)

Employed as _____ from _____ to _____
(Actual Class Title)

performing as a/an _____ for the _____
(Class Title while performing work below) (Department/Bureau)

I, _____, HAVE REVIEWED the bulletin requirements for this examination and
(print name of employee's supervisor)

during the above period this employee has successfully performed duties at the level and as described in the bulletin requirements in a training/regular capacity, as follows (*attach additional document, if needed*):

LIST DUTIES PERFORMED WHICH ARE DESCRIBED IN THE BULLETIN REQUIREMENTS

EMPLOYMENT START AND END DATES MONTH AND YEAR **PERCENTAGE OF TOTAL TIME DOING QUALIFYING WORK ONLY**

	From	To	%
			%
			%
			%
			%
			%

1. _____
Signed by **Division Head** (Print last name) Civil Service Class Title – Work Phone# Date

2. _____
(Approved & Signed **Personnel Service Section Rep.**) (Print last name) Civil Service Class Title – Work Phone# Date