Long Beach Civil Service Commission

REQUEST TO FILE FOR EXAMINATION BY DISMISSED EMPLOYEE

Former Employee Name: _____ Date: _____

Address: _____

_____

Former Classification Title: _____

Last City Department in which you worked: _____

Dates of Employment with the City of Long Beach: Start Date: _____

Separation Date: _____

Title of the examination(s) in which you are requesting participation:

_____

Briefly describe why the Commission should grant your request to file for the examination:

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Describe, if any, the self-improvement program(s) which you have completed (i.e., Employee Assistance Program or Substance Abuse Programs).

Any additional comments supporting your request:

Signature

Date

INSTRUCTIONS: Submit this document and any other documentation that will support your request to:

Civil Service Department
Attn: Executive Director
333 West Ocean Boulevard, 7th Floor
Long Beach, CA 90802

Upon receipt of this document(s), the Civil Service Department will inform you of when the Commission will consider your request. While your attendance at this meeting is not required it is strongly encouraged that you be present in case the Commission wishes to ask you any questions of clarification.