

CONDITIONAL OFFER OF EMPLOYMENT

Addendum for
Affirmative Action
Data attached:
 Yes No

OLG/CRT conditionally offers the position of _____
(Position Title) (Position Number)
to _____ at the rate of \$ _____
(Applicant Name) (Social Security #)

- hourly
 bi-wkly
 monthly
 annually

Conditional Offer

made by: _____
(Supervisor Signature) (Date)

(Appointing Authority Signature) (Date)

Your appointment *type* will be _____ Proposed effective date: _____
(Classified or Unclassified) (tentative)

and the *status* will be _____
(Permanent, Probational, Provisional, Job Appt., Restricted, Wage, or Student)

This conditional offer is subject to the following **SPECIAL CONDITIONS OF EMPLOYMENT:**

- 1) You must take and pass a drug test, except if transferring from another state agency without a break in state service.
- 2) You must meet all requirements for the job title, such as the Civil Service Minimum Qualifications for the position, as well as any special requirements imposed by CRT.
- 3) Your salary must be in compliance with CRT policy and Civil Service Rules and cannot exceed the budgeted amount without prior approval from the Appointing Authority and/or Civil Service.
- 4) If you are currently a state employee and are transferring from permanent status to probational status, you must sign an acknowledgment statement.
- 5) If you have resigned or retired from State service and were paid for any annual leave, you may be required to repay all or part of that amount.
- 6) You must provide original or certified documents for identification and employment eligibility purposes: Social Security Card, birth certificate and picture ID, such as a driver's license.
- 7) All male prospective employees ages 18 through 25 are required to be registered with Selective Service and must provide a copy of the Selective Service registration card. (Registration can be completed on the Internet at <http://www.sss.gov>.)
- 8) All prospective employees with Veteran Status must provide proof of discharge from Military Service.
- 9) If the minimum qualifications of the job offered require a current license or certification such as Attorney, CPA, Park Ranger (post certification), etc. you must maintain that license or certification throughout your employment and provide documentation annually to _____.
- 10) You must agree to receive wage and compensation payments via direct deposit, through electronic transfer of funds into a checking or savings account at a bank, savings and loan, or credit union which is authorized by the Division of Administration.
- 11) For non-post certified Park Rangers only - you must sign in agreement the law enforcement contract which provides for the repayment of costs of post certification training if you resign within two years of receiving training.
- 12) You must sign a statement (Form SSA-1945) that you are aware of a possible reduction in future Social Security benefit entitlement in accordance with Section 419c of Public Law 108-203, the Social Security Protection Act of 2004.
- 13) This offer is in compliance with Civil Service regulations regarding the Department Preferred Reemployment List, a.k.a. DPRL.

I understand and accept the conditions of employment stated above pending the results of drug testing and receipt of all required approvals from the Appointing Authority and/or Civil Service.

(Applicant Signature)

(Date)

(Witness Signature)

(Date)

ADDENDUM FOR AFFIRMATIVE ACTION DATA

This form is an addendum to the Conditional Offer of Employment and should be completed by the Hiring Supervisor/Director and submitted to the Human Resources Division at the same time as the Conditional Offer of Employment.

POSITION #: **SECTION:**

1. Please indicate the name and interview dates/times for each applicant that was interviewed for the position:

Applicant Name	Date	Time

2. Please list any applicants that scheduled interviews, but cancelled or did not appear for the interview:
3. Please list any applicants that were offered an interview or to whom an offer of employment was made, but the applicant declined:
4. Please indicate the name of the applicant being recommended for appointment to the subject vacancy:

INTERVIEWERS: Please sign below.

Name

Date

Name

Date

Name

Date