

**APPOINTMENT CERTIFICATION FORM FOR
SKILLED SERVICE AND PROFESSIONAL SERVICE APPOINTMENTS**
(Upload this form in Workday under Maintain Worker Documents for the Employee.)
(This information must be provided.)

Name of Department/Agency: _____

Classification Title and Code: _____ (____) _____

Position Identification Number: _____

JobAps Requisition ID: _____ JobAps Recruitment Number _____

I. RECRUITMENT DATA (All items *MUST* be completed)

- A. Layoff candidate(s) cleared? ☐ Yes ☐ No ☐ (There were no Layoff candidates)
- B. If Interview and Hire, was DHS contacted for TCA referrals? ☐ Yes ☐ No ☐ NA
- C. Selection was made from a certified eligible list in accordance with SPPA Section 7-209 ☐ Yes ☐ NA
(if NA, please explain in COMMENTS section below).
- D. Date the Certified Eligible List was created: _____
- E. JobAps Requisition Date: _____
- F. Number of phone calls made/interview letters sent: _____ Date of phone calls or letters: _____
- G. Number of candidates interviewed: _____ (if < three (3), please explain in COMMENTS section below).
- H. Date employment offer made: _____
- I. Name of person selected: _____
- J. ☐ This person is an *open* candidate ☐ This person is a *promotional* candidate
- K. ☐ This person was employed by a State Agency, but is not a promotional employee.

COMMENTS:

II. AGENCY PERFORMING TASKS

- | | <u>DBM</u> | <u>Other Department</u> |
|---|-------------------------------------|--------------------------|
| A. Developed test | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Administered test | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Established certified list or register | <input type="checkbox"/> | <input type="checkbox"/> |

III. METHOD USED TO FILL THE THIS VACANCY (check one.)

- A. ☐ Hired from a certified list as a "Best Qualified" candidate.
- B. ☐ Hired from a tested category on a certified eligible list as a "Better Qualified" candidate.
- C. ☐ Hired from a tested category on a certified eligible list as a "Qualified" candidate.
- D. ☐ Layoff or separation reinstatement candidate selected.
- E. ☐ Other reinstatement candidate selected.
- F. ☐ Candidate certified by the Division of Rehabilitation Services.
- G. ☐ Transfer candidate eligible for appointment selected (Layoff or separation candidates, if any, cleared).
- H. ☐ Interview and Hire classification (Layoff or separation, if any, cleared).
- I. ☐ Appointment from a Register.
- J. ☐ Selection from an existing eligible list of a contractual employee not eligible for conversion under the Contractual Conversion Transfer Guideline.
- K. ☐ Streamlined Certification
- L. ☐ Streamlined Selection.
- M. ☐ Other (please specify) _____

IV. TYPE OF PROJECT COMPLETED (please select one).

- A. ☐ A JobAps Requisition and Planner were completed and approved by DBM RED to conduct a recruitment to establish a new list. (*complete Section V.*)
- B. ☐ A PSP Lite requisition for: filling a vacancy using an existing list; recruiting for/hiring an at-will position; hiring a transfer, reinstatement, voluntary demotion, Interview and Hire. (skip Section V.)
- C. ☐ A PSP Lite requisition was completed for a DBM approved Streamlined Selection recruitment. (complete Section VI.)

V. CHECKLIST OF AGENCY WORK PERFORMED.

- A. ☐ Requisition and Planner submitted and approved by DBM RED.
- B. ☐ Job Announcement posted for at least two (2) weeks before close date.
- C. ☐ Notice of rating results (Band Score or "Not Qualified") sent to applicants.
- D. ☐ Notices sent to candidates at least 10 days before test administration date (when applicable).
- E. ☐ Established job relatedness, reliability, and validity of the selection test(s).
- F. ☐ Veterans', Seniority, Disability, and Residency preference points
(and if applicable DPSCS or DJS) added to candidates' converted scores.
- G. ☐ Certified eligible list established with candidates in the legally required order.
- H. ☐ "Cert Action codes" entered for eligible list with appropriate Hire (H) noted, and completion of Hire Detail, including "Disposition" changed to H.

VI. STREAMLINED SELECTION

(This section must be completed if this appointment was made using STREAMLINED SELECTION.) Note that items A, B, C, D and E must have been performed.

- A. ☐ Required approval for Streamlined Selection was received from DBM or Recruitment Authority is applicable.
- B. ☐ Job Announcement, advertisement or other form of public solicitation.
- C. ☐ Retention of all the applications or resumes submitted for this recruitment, including that of the selected candidate.
- D. ☐ Evaluation of candidates in the form of interview questions with candidate responses; or a formal assessment/examination, such as a rating of training and experience; or other method of evaluation.
- E. ☐ Verification of required licensure/certification, education and experience; and checks of references and criminal background, if required.
- F. ☐ Completion of the EEO Applicant Data Form, if required.

VII. CERTIFICATION AND SIGNATURES -- *This section must be completed and include all signatures.*
Failure to do so may result in the appointment being rescinded.

We certify that this recruitment and testing project and/or appointment was made in accordance with the applicable provisions of the State Personnel and Pensions Article. All appropriate records will be maintained for audit purposes.

Appointing Authority: _____ Signature*: _____ Date: _____

EEO Officer: _____ Signature*: _____ Date: _____

Contact Person: _____ / _____ Date: _____

Telephone Number: _____ / _____ E-mail address: _____ / _____

***Signatures of Appointing Authority and EEO Officer must be original signatures. If not, please check the box below and explain.**



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Appointment Certification Form

Revised 06/2017