

EMPLOYEE MAINTENANCE POSITION SELECTION (EMPS) FORM

Employee Name: _____
(Please print)

Employee ID Number: _____

Return By: **March 31, 2012**

The following MSS positions should be authorized in your facility. You must return this form, with a check mark beside each position in which you are interested, by the deadline listed above.

POSITION TITLE/LEVEL	
	CHECK APPROPRIATE BOX
0	<input type="checkbox"/> Electronic Technician / PS-10
1	<input type="checkbox"/> Maintenance Mechanic, MPE / PS-9
2	<input type="checkbox"/> Maintenance Mechanic / PS-6 <input type="checkbox"/> Maintenance Mechanic / PS-7
3	<input type="checkbox"/> Area Maintenance Specialist / PS-8 <input type="checkbox"/> Area Maintenance Technician / PS-9 <input type="checkbox"/> Building Equipment Mechanic / PS-9
4	<input type="checkbox"/> Building Maintenance Custodian / PS-5 <input type="checkbox"/> Letter Box Mechanic (Shop) / PS-8 <input type="checkbox"/> Maintenance Support Clerk /PS-5 <input type="checkbox"/> Maintenance Support Clerk /PS-6

Employee Signature Required

Date Signed

APPLICANT DATA COLLECTION SHEET

Please print the information request.

(Data is needed to "Add Applicant" into Online Assessment System (OASys))

Last Name

First Name

MI

Email Address - PLEASE PRINT LEGIBLY

District

Facility

Employee Mailing Address

City

State

Zip Code

Telephone #

Candidate ID #
EIN:
<i>Enter your Employee Identification Number (For example, EIN 01122334)</i>