

Massillon Civil Service Commission

Request for Examination Notification

I, _____
(Please Print Full Name)

am interested in being informed of the next Civil Service examination(s) when scheduled as shown below. I will be responsible for notifying the Civil Service Office of a change of address. This form will be kept on file for one (1) year.

Signature

Date of Filing: _____

Street Address

Telephone

City

State

Zip Code

Examinations of Interest – Check All That Apply

- ____ Police Officer
- ____ Firefighter/Paramedic
- ____ Custodial – City of Massillon
- ____ Custodial – Massillon City Schools
- ____ Laborer – City of Massillon
- ____ Clerical – City of Massillon
- ____ Clerical – Massillon City Schools
- ____ Massillon City Health District: _____
Job Title/Type of Work/Department

____ City of Massillon: _____
Job Title/Type of Work/Department

____ Massillon City Schools: _____
Job Title/Type of Work/Department

Comments:

IMPORTANT NOTICE: Filing this form DOES NOT mean you have applied to take the examination(s) checked above. If you want to apply for an examination you MUST follow the Filing of Application instructions contained in the examination announcement sent to you. Please contact the Commission Office at 330.830.1763 if there are questions concerning the use of this form