

# ESR-Replacement Report Form Instructions

Fill-in the top **six** fields on the employee as listed below:

- Date (Enter date employee was hired in current position)
- No. (Enter last four digits of employee's SSN)
- Name (Enter employee's full name)
- Job Class (Enter current job title)
- Jurisdiction (Enter Agency's Name - Examples: City of Mobile...  
MAWSS)
- Department (Enter current division or section employee is assigned to  
work)
- **Print the form**  
Complete the form by marking only one rating for the employee and  
providing the required supervisory signature(s). Please return the  
completed "watermark" copy to the Mobile County Personnel Board  
within 30 days of the employee's annual anniversary date. (Reminder:  
Attach justification statement for ratings of 1 or 4)