

REQUEST TO CHANGE EMPLOYMENT OPTIONS

DATE SUBMITTED: _____

In regard to the position of _____
(position title)

Please approve the requests indicated by the check marks below:

A I wish to be placed on **inactive status** until further notice

B I will **accept**: 1 Part-time 2 Full-time 3 Supernumerary (Substitute)
 4 Seasonal 5 Temporary 6 Other _____

C I wish to update my application record and be certified **ONLY** to the selected jurisdictions
(Please mark jurisdictions below)

- | | | | |
|-------------------|-------------------|-------------------------|-----------------------------|
| 01-Mobile County | 07-Bayou La Batre | 14-MCEMA | 20-Library |
| 02-City of Mobile | 09-Satsuma | 15-Mobile Civil Service | 21-Creola |
| 03-Prichard | 10-Mt. Vernon | 16-Prichard Water | 22-Bayou La Batre Utilities |
| 04-Chickasaw | 11-Mobile Water | 17-Saraland Water | 24-Satsuma Utilities |
| 05-Saraland | 12-Health Dept. | 19-Racing Comm | 25-Chickasaw Utilities |
| 06-Citronelle | 13-Housing Board | | |

WRITE-IN DEPARTMENT:

Driver's License #: _____

Expiration Date: _____

Signed: _____ Print Name: _____

Address _____ Telephone _____

Email Address _____
(required)

I request to be **transferred** from _____ to _____
(Employment Register)

P.O Box 66794, Mobile, AL 36660 / 1809 Government St., Mobile, AL /

MCS ONLY: DATE APPROVED: _____ **DATE DENIED:** _____

REMARKS: _____