

REQUEST TO CHANGE EMPLOYMENT OPTIONS

Instructions for use:

- ☐ Please follow instructions completely and do not add notes or comments
- ☐ Fill in the date the form is being submitted
- ☐ Fill in the position title for which you are requesting a change
- ☐ If you wish to be placed on inactive status until further notice, check box **A**
- ☐ Check the appropriate box for the type of employment you will accept (**B, 1, 2, 3, 4, 5**)
- ☐ If there is any other type of employment you will accept, check box **6** for Other and fill in the type of employment you will accept
- ☐ If you wish to update your application record and be certified only to certain jurisdictions, check box **C**, and mark the jurisdictions in the section below. Check only the jurisdictions to which you wish to be certified. If there is a specific department to which you wish to be certified, write that into the specified box
- ☐ Fill in your Driver's License Number
- ☐ Fill in the Expiration Date of your Driver's License
- ☐ Sign the Form and Print your Name
- ☐ Fill in your address
- ☐ Fill in your telephone number
- ☐ Fill in your email address
- ☐ If you are requesting to transfer from one register to another, fill in the appropriate information
- ☐ If you wish to email the form to Mobile Civil Service, click the "Email Form to MCS"
- ☐ Do not mark in the shaded box at the bottom of the form

Mail to: Civil Service Director
Mobile Civil Service
P.O. Box 66794
Mobile, AL 36660-1794

-or -

Deliver to: Mobile Civil Service
1809 Government Street
Mobile, Alabama

-or -

Email: certifications@personnelboard.org