THE CITY OF COLUMBUS
ANDREW J. GINTHER, MAYOR
CIVIL SERVICE COMMISSION

77 North Front Street, 3rd Floor
Columbus, Ohio 43215
Phone: (614) 645-8301
Fax: (614) 645-8379
Email: CSCFeedback@columbus.gov

Request To Cancel A Temporary Withdrawal

In order to request reinstatement to the selection process, you must complete this form and submit it to the Civil Service Commission.

Be sure to complete all the information requested below. Please print clearly.

Person ID# *(if known)*: _____

Name: _____ _____ _____
(Last) (First) (Middle)

Address: _____

Home Phone: ( ) _____ Work Phone: ( ) _____

Applicant for the position of: _____

Grade band or rank on eligible list: _____

Date temporary withdrawal approved: _____

☐ I am presently on the eligible list for the classification indicated above and I was previously granted a temporary withdrawal from the selection process. I am now requesting that my name be reinstated for consideration during the selection process.

- I understand that I may not be reinstated if the eligible list, from which I temporarily withdrew, has expired or has been replaced.
- I also understand that I will be scheduled for the next phase of the selection process.

_____ _____ _____
Print Name Signature Date

FOR CIVIL SERVICE COMMISSION USE ONLY

Date Police or Fire Division Notified: _____ Initials: _____
Date