

77 North Front Street, 3<sup>rd</sup> Floor Columbus, Ohio 43215 P: (614) 645-8301 F: (614) 645-8379 E: <u>CivilService@columbus.gov</u> W: columbus.gov/civilservice

Request For Citywide Transfer

This form is used to indicate your interest in being considered for other City positions assigned your current classification and employment type (full-time, part-time, limited, regular, etc.). Once your name is added to the Transfer List, it will remain on the list for one (1) year from the date you submit this form to the Civil Service Commission.

PLEASE NOTE: It is your responsibility to notify the Civil Service Commission of any change in name, address, phone number or work status so that we may provide requesting divisions accurate information.

Completed forms may be faxed to (614) 645-8379 or emailed to <u>A&ESUnit@columbus.gov</u>. You may also attach a current resume. Questions regarding this process may be directed to the Applicant and Employees Services Unit at (614) 645-8301.

Employee Data

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Date:			<u></u>				
Name:							
Address:							
City				State: Ohio Zip Code:			
Email Address:				Work Phone: ( )			
		Curren	t Positio	n Data	<u>!</u>		
Present City Department/D	ivision:						
Present Job Classification:							
Is your current position:		☐ Full-time	)	or	☐ Part-time		
		☐ Regular		or	Limited		
Employee Signature:					Date:		
Resume Attached (Option	onal)						
	For	Civil Service	e Commi	ssion l	Use Only		
Department/Division:		Appointment/Employment Type:					
Request Approved:	☐ Yes	☐ No	Initials:		Date:		