

**DEPARTMENT OF HUMAN RESOURCES**

**SELECTION CERTIFICATION FORM**

**DATE:** \_\_\_\_\_ **DEPARTMENT:** \_\_\_\_\_

**POSITION:** \_\_\_\_\_

**PERSON SELECTED:** \_\_\_\_\_ **Requisition Number:** \_\_\_\_\_

*Is the applicant selected above related to the department head, any manager or the immediate supervisor of this position? Yes: \_\_\_ No: \_\_\_*

*If yes, list name, title and relationship:* \_\_\_\_\_

**CERTIFIED APPLICANT(S) CONSIDERED:**

**Name(s)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason(s) for the selection(s):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I certify that I have treated all certified applicants equally and have not violated the civil rights of any applicant.*

**Appointing Authority Signature:** \_\_\_\_\_

**HUMAN RESOURCES USE ONLY:**

\_\_\_\_\_  
*Director of Human Resources*

**Approved:** \_\_\_\_\_

**Not Approved:** \_\_\_\_\_

**Date:** \_\_\_\_\_