

APPLICANT TRACKING

CLASSIFICATION _____ **Location** _____ **Posting No.** _____ **Closing Date** _____

Applicant: _____	Certification # or Eligibility Verification _____
Availability Contact: _____	Comments Summary: _____
__ Phone __ Mail	_____
Interview Date: _____ Time: _____	Job Offer / Position Filled Notice Completed On _____
Scheduled By __ Phone __ Mail	

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RECOMMENDATION: Name _____ at Salary \$ _____ /month _____ Title _____ Date _____
Interviewer Signature

INSTRUCTIONS

This form may be used to document all applicants for the posted position and to request agency hiring approval.

Use of this form begins with the authorization to post a vacant position. Upon such approval, create a form for each posted position.

- First Line:** Using the official job posting, list the approved Division of Personnel (DOP) classification for the position, work location (and shift if applicable), posting number, and closing date.
- Applicant Boxes:** Complete a box for each *eligible* applicant who submits a DOP Application for Examination requesting consideration for this position.
- External Applicants: -**Do Not** list all eligibles certified by DOP. List only those that respond to an availability inquiry by submitting a DOP application.
- Internal Applicants: -List only eligible current or former employees (e.g. meets minimum training and experience requirements (MTE's), eligible for transfer or reinstatement to a classified position, etc.) submitting an application for consideration for the posted position. Request assistance of the DOP, Staffing Services Section, Internal Employee Placement, to determine eligibility, if needed.
- Ineligibles: -**Do Not** list those determined to be ineligible. Current or former State employees or external applicants not eligible for hire, should be notified why they will not be considered for the position and may be directed to DOP for job counseling and application assistance.
- Applicant Name:** Insert the applicant's name as listed on the official DOP application for examination.
- Certification #** Certified Applicants – List the DOP Certification of Eligibles Number or
- Eligibility Verification:** Internal Applicants – Document who verified that the applicant meets the MTE's for the classification – by name or initials or agency.
- Availability Contact:** Indicate how the applicant was contacted (usually certified eligibles) to determine interest in the position by marking the appropriate box
- Phone Mail (Phone or Mail).
- Interview Date/Time:** Fill in the Date and Time of the scheduled interview and indicate how the applicant was contacted to schedule the interview by checking
- Phone Mail the appropriate box (Phone or Mail).
- Comments:** The comments provided describe the disposition of each applicant for the position and briefly explain the employment recommendation. This document becomes an official record of the hiring process for the position. Comments should be limited to a one to two sentence summary of the candidate's status regarding the vacancy. Information may include a summary of the applicant qualifications for the position, applicant self-elimination due to nature of work or salary, or other such relevant information. This form does not replace interviewer notes.
- Recommendation:** List the name of the applicant selected for hire, salary recommendation and complete the Signatory Section (name, title, date).
- Processing:** Upon completion of the selection/interviewing process, a copy of this form along with the standard employment request packet should be submitted, through appropriate agency channels to the appointing authority, for employment request authorization.
- Job Offer and Position Filled Notices:** After final approval has been granted, insert the date the selected applicant was offered the job and the remaining applicants were notified that the position has been filled.
- NOTE:** This form should be retained by the agency for a minimum of three years after the position has been filled.