

APPLICATION FOR TWELVE-MONTH TRIAL APPOINTMENT PROGRAM FOR PERSONS WITH DISABILITIES

Note: This program is for oral assessments, video, and written examinations. Please refer to Civil Service Regulation 3.05, "Twelve-Month Trial Appointment Process for Persons With Disabilities."

APPLICANT'S NAME		EMPLOYEE IDENTIFICATION NUMBER	
ADDRESS			
CITY	STATE	ZIP CODE	AREA CODE AND TELEPHONE NUMBER
CLASSIFICATIONS		EXAMINATION TITLE AND NUMBER	
Identify the disability and describe how the disability places the applicant at a competitive disadvantage in the written testing situation. Where possible, describe specific functional loss; e.g., actual visual acuity; decibels of hearing loss; type of functional loss of specific limbs, etc. Submission of medical documentation is <u>not</u> necessary.			
CERTIFYING AGENCY			
I have reviewed the applicant's records above and recommend that the applicant be certified for the Twelve-Month Trial Appointment Program for Persons With Disabilities. There is sufficient medical documentation on file to support this recommendation.			
Counselor's Name (Please Print)		OFFICE ADDRESS	
Counselor's Signature		AREA CODE AND TELEPHONE NUMBER	Date
FOR CIVIL SERVICE USE ONLY			
<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
Reviewed By		Date	
Comments			

PROGRAM STANDARDS

The applicant must be self-designated as a person with a disability, as defined by state and federal laws, and must be able to perform the essential job functions of the classification. Written, video, and oral assessments and examinations are applicable for this program. Examinations that are an assessment of an applicant's education and experience are exempted from this process. Applications will be reviewed to determine if reasonable accommodation can be used to assist the applicant while taking the written examination, in accordance with Civil Service Regulation 3.11, "Written, Electronic, and Other Appraisal Method Administration." The requested examination must be open, in accordance with Civil Service Regulation 3.11. The applicant must meet the minimum requirements for the classification. Applicants approved for this process will be placed in an applicant pool in accordance with the time period established by the Office of Classifications and Selections. Applicants in this process may be removed from the referral process for the reasons defined in Civil Service Commission Rule 3-2.2, "Removal from Applicant Pool."

The twelve-month probationary period will serve in lieu of the written examination. Upon satisfactory completion of the probationary period, permanent status may be granted. The same probationary rating methods and time periods will be observed as in regular appointments. Persons with disabilities who receive less than satisfactory ratings are subject to the same penalties as other employees (including separation from employment). Any appeals will be in accordance with Civil Service Commission Rule 3-5.5, "Grievance of Probationary Dismissal or Demotion."

To enable successful job performance, sponsoring rehabilitation agencies are expected to provide, whenever possible, supportive services to persons with disabilities appointed under this process and to employing departments and agencies.

Program Procedures

Responsibility:

Authorized Agency
(Michigan Rehabilitation Services,
Commission for the Blind, or Veterans'
Administration)

Civil Service Commission,
Office of Classifications and Selections

Action:

1. Submits the *Application for Persons With Disabilities Designation and Request for Reasonable Accommodation in the Written Examination Process (CS-944)*, *Application for Twelve-Month Trial Appointment Program for Persons With Disabilities (CS-630)*, and the appropriate examination application forms to the Office of Classifications and Selections.

The forms must include:

- a. The classification and examination title and number.
 - b. The identification of the disability and rationale for the certification.
 - c. The signature of the counselor.
2. Reviews the applications to determine if the applicant is eligible for the program.
 3. If the applicant is eligible for the program:
 - a. Places applicant on applicant pools for which qualified.
 - b. Sends notification letter to the applicant.
 - c. Sends copy of approved CS-630 application to the authorized certifying agency counselor.
 4. If the applicant is not eligible for the program:
 - a. Indicates rejection and rationale for rejection on the CS-630 application.
 - b. Sends copy of the disapproved CS-630 application to the authorized certifying agency counselor.
 5. Files the CS-102, CS-630, and CS-944 applications for six months.