

Michigan Civil Service Commission
OFFICE OF CLASSIFICATIONS, SELECTIONS, AND COMPENSATION
400 South Pine Street, P.O. Box 30002
Lansing, Michigan 48909

REQUEST FOR CREDENTIAL REVIEW

This form is to be completed by the appointing authority and sent to the Civil Service Commission, Office of Classifications, Selections, and Compensation. AN APPLICATION OR RÉSUMÉ AND ALL APPLICABLE DOCUMENTS (E.G., TRANSCRIPTS, LICENSES, ETC.) MUST BE ATTACHED WITH THE SUBMISSION OF THIS FORM.

NOTE: Possession of the minimum qualifications does not necessarily mean the applicant(s) can be appointed. For classifications requiring an examination, the applicant(s) must have taken and passed the requisite examination OR be eligible to have his/her name added to the applicant pool.

AGENCY (PROCESS LEVEL)	CONTACT PERSON NAME	TELEPHONE NUMBER
CIVIL SERVICE LIAISON		DATE
CLASSIFICATION AND LEVEL TO BE REVIEWED		SUBCLASS CODE(S), IF APPLICABLE
APPLICANT'S NAME		EMPLOYEE ID NUMBER
1. CIVIL SERVICE COMMENTS		FOR CIVIL SERVICE USE ONLY <input type="checkbox"/> INCOMPLETE/NO ACTION <input type="checkbox"/> DOES POSSESS <input type="checkbox"/> DOES NOT POSSESS
2. CIVIL SERVICE COMMENTS		<input type="checkbox"/> INCOMPLETE/NO ACTION <input type="checkbox"/> DOES POSSESS <input type="checkbox"/> DOES NOT POSSESS
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