**FORM FOR REMOVAL OF NAMES FROM ELIGIBILITY LIST**

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

**(Insert jurisdiction name)**

To: State Examiner's Office

From: Secretary of the Civil Service Board

**The Civil Service Board has received a written statement from the Appointing Authority as to the reasons for removal of these names. All names listed below have been removed from the current eligible employment lists and were not appointed for the reasons indicated:**

1. Declined an offer of appointment.

B. Was interviewed by the appointing authority and rejected. The civil service board found the reasons sufficient to remove the name. **(SEE R.S. 33:2553(5) or R.S. 33:2493(5))**

C. After offer of employment, applicant failed to pass the required physical examination necessary to perform the job with or without accommodation.

D. After repeated attempts, unable to contact applicant by phone or written communications.

E. List and explain any others.

**SIGNATURE OF THE CHAIRMAN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE THE BOARD CLEARED THE ELIGIBILITY LIST:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **NAME OF****APPLICANT** | **EXAM****TAKEN****(CLASS)** | **DATE OF****BOARD'S****APPROVAL OF****GRADES** | **REASON****FOR****BOARD'S****REMOVAL** | **DATE OF****BOARD'S****REMOVAL** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |