CITY OF NEW ORLEANS CIVIL SERVICE FORM

EMPLOYEE REQUEST FOR SAME OR EQUIVALENT EXTRAORDINARY OR SUPERIOR QUALIFICATIONS, EXPERIENCE, CREDENTIALS (Rule IV Section 2.7)

This form is to be completed by employees who believe that they possess the same or equivalent qualifications, experience, and/or credentials as other employees who have been hired above the minimum. Submit this form and supporting documentation by email to csno@nola.gov or to the Civil Service Department at 1340 Poydras Street, Suite 900.

Your name:		
Classification:		
Department:		
Email address:		
Classification: Department: Effective date of pay:		
QUALIFICATIONS Use the information included columns one and two.	l on the previously approved extraordinary q	ualifications form to complete
Minimum qualifications (from job announcement):	Extraordinary qualification(s) of employee currently receiving extraordinary qualifications pay that exceeds the minimum:	Your same or equivalent qualifications, experience and/or credentials:
1)		
2)		
3)		
	not the same as the existing recipient of ication as to why you believe they are e	
credentials (e.g., résun	h supporting documentation of your quané, diploma, certifications, etc.), as you believe is the same or equiventials.	well as, the extraordinary
Appointing Authority Agra Appointing Authority Sign Appointing Authority Nan	nature:	

The approval of your appointing authority is not required provided that Civil Service determines that you meet the requirements of Rule IV Section 2.7. Retroactive application of this Rule requires the approval of the Civil Service Commission.