



# NOTICE OF CORRECTION PERSONNEL HIRE

This form must be signed by the hiring authority or designee and submitted to the CJTC **immediately** upon hire/appointment.

## SECTION 1: Corrections Personnel Information

<b>AGENCY</b> (Do not abbreviate):	<b>STATUS:</b> <input type="checkbox"/> Corrections Officer <input type="checkbox"/> Corrections Deputy <input type="checkbox"/> Other: _____
<b>FULL NAME</b> (Last, First, Middle):	<b>GENDER IDENTITY:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
<b>DATE OF BIRTH</b> (MM/DD/YYYY):	<b>SOCIAL SECURITY NUMBER:</b>
<b>DATE OF HIRE</b> (MM/DD/YYYY):	<b>Most Previous Corrections Employment:</b> Agency: _____
<b>AGENCY EMAIL ADDRESS:</b>	Location (City/State): _____ Dates (mm/yyyy – mm/yyyy): _____ - _____

## SECTION 2: Conditions of Employment and Requirements of Training

Per WAC 139-10-211, through the submission of this individual's fingerprints, this agency completed a criminal records check to include a search of state and national criminal history records information and there were no disqualifying convictions. **This act was completed on or about:** \_\_\_\_\_

- **Basic Corrections Officer Academy**, training must occur within 6 months of hire date. Please refer to [WAC 139-10-210](#) for admission requirements.
- **Basic Corrections Academy Equivalency**, the decision to request an employee's participation within the equivalency process shall be discretionary with the chief executive officer of the employing agency. Please refer to [WAC 139-10-215](#) for admission requirements.

## SECTION 3: This section must be signed by the hiring authority, or designee.

I hereby attest that I have read and understand the requirements of [Chapter 139-10 WAC](#) and above named individual has met these requirements and is a duly authorized employee of this agency.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, in \_\_\_\_\_, Washington.

\_\_\_\_\_  
Hiring Authority/Designee's Signature

<b>Hiring Authority/Designee's Printed/Typed Name:</b>	<b>Hiring Authority/Designee's Rank/Title:</b>
<b>Hiring Authority/Designee's Contact Email:</b>	<b>Hiring Authority/Designee's Phone:</b>

\*The commission shall maintain this notification in a permanent file, subject to [RCW 43.101.400](#)