Internship Program

Request for Internship Reallocation

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| **Department / Division:** |       | **Position Control Number (PCN):** |       |
| **Current Job Class Title:** | [ ]  Student Intern 1[ ]  Student Intern 2[ ]  College Intern 1[ ]  College Intern 2[ ]  College Intern 3[ ]  College Intern 4[ ]  Graduate Intern 1[ ] Graduate Intern 2 | **Requested Job Class Title:** | [ ]  Student Intern 1[ ]  Student Intern 2[ ]  College Intern 1[ ]  College Intern 2[ ]  College Intern 3[ ]  College Intern 4[ ]  Graduate Intern 1[ ] Graduate Intern 2 |
| **Student / Incumbent Name:** |       | **Date reallocation request submitted to DOP-Workforce Services:** |       |

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| **Please send this checklist as an email attachment to your Workforce Services contact.*****If you have not completed this form, your request will be returned!*** |

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| Have you read and followed the Internship Program Guidelines? | Yes: [ ]  | No: [ ]  |

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| Has this position been established under the 2008 flexible staffing provisions per the Internship Program Guidelines? | Yes: [ ]  | No: [ ]  |

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| I certify that the student has successfully completed the training plan, passed all evaluation criteria, and met the requirements to reallocate to the next level.All of the following competed documentation ***must*** be submitted to DOP Workforce Services prior to reallocation:[ ]  Completed Request for Internship Reallocation form.[ ]  Internship Performance Evaluation form.[ ]  Certification student has completed the training plan relevant to current level; this may include submitting the **Internship Training Plan and Evaluation Criteria** form.DOP Workforce Services will notify Classification Operations Team for processing of successful reallocation. | Yes: [ ]  | No: [ ]  |

**This reallocation, recruitment, and selection process is in accordance with any applicable departmental policies and procedures. This recruitment is also in accordance with Department of Administration, Division of Personnel recruitment guidelines, policies, procedures, and State and Federal employment laws. I also understand that if I deliberately provide false information during this process, I may be liable and lose my rights as a hiring manager. I certify that the above information is true and complete.** [ ]  **Yes** [ ]  **No**

**ADDITIONAL COMMENTS:**

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**IF YOU HAVE ANY QUESTIONS REGARDING THESE PROCEDURES OR ANY PART OF THE REALLOCATION AND HIRING PROCESS, PLEASE CONTACT WORKFORCE SERVICES OR RECRUITMENT STAFF IN YOUR HR SERVICE CENTER.**