

MEMORANDUM

Date:	
To:	Department of General Services Office of Human Resources 707 3 rd St West Sacramento, CA 95605
From:	
Subject:	
NATURE OF	<u>REQUEST</u>

BACKGROUND



BACKGROUND CONTINUED

CLASSIFICATION CONSIDERATIONS CONTINUED		
CONCLUSION		
signed by a person who is authorized by the who signs based on his or her personal know the written justification correctly reflects the applicable, the reasons the appointment of appointment. The authorized person should	e program or agency to do so and wledge, information, or belief that e reasons for the limited-term and, if may convert to a permanent	
Name:	Signature:	
Date:	Title:	
Email:	Work Number:	
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