

**DEPARTMENT OF GENERAL SERVICES  
BARGAINING UNIT [REDACTED]  
LOCAL WORK AREA POST AND BID  
REASSIGNMENT/TRANSFER**

CURRENT CLASSIFICATION:				POSITION NUMBER:	
EMPLOYEE NAME: (PLEASE PRINT)	FIRST	M.I.	LAST	OFFICE/BRANCH NAME	
PRESENT WORK LOCATION (ADDRESS/CITY/ZIP CODE)				WORK TELEPHONE NUMBER (     )     -	
PRESENT WORK WEEK START AND END DAYS ARE:	START	TO	END	PRESENT SHIFT HOURS BEGIN AND END:	SHIFT BEGINS     TO     SHIFT ENDS
CURRENT SUPERVISOR IS:				SUPERVISOR'S TELEPHONE NUMBER (     )     -	

Pursuant to the provisions of Post and Bid Article, MOU dates and BU MOU, I hereby request that I be considered for the local work location position as referenced below.

RPA Number:	Post & Bid File By Date on JOB:	City Location of Position:	Position Number:
Working Days of Position	Working Hours of Position:	Classification: <b>Stationary Engineer</b>	

I certify that I am currently a full-time permanent employee (having successfully completed my probationary period or having completed all requirements of an authorized State apprenticeship program) in the classification above and am currently working in the city of the position being advertised. I understand that the bidder with the most local seniority will be selected for the position, will be notified of the start date. If I am the most senior bidder and am notified for the start date, I must immediately accept or reject the job offer unless mutually agreed otherwise by the hiring supervisor.	
EMPLOYEE SIGNATURE	DATE

This bid form must be submitted to \_\_\_\_\_, Facilities Management Division, \_\_\_\_\_ and received by \_\_\_\_\_ which is the Post & Bid File By date.

Hiring Office: Please forward all bid forms to C&P analyst after the Post & Bid File By date for seniority calculations.

FOR PERSONNEL USE ONLY					
LOCAL WORK LOCATION TENURE/TIME BASE		LOCAL WORK LOCATION APPOINTMENT DATE		LOCAL WORK LOCATION SENIORITY (MONTHS)	
SSN		SENIORITY VERIFIED BY:		DATE VERIFIED:	
POST AND BID PERIOD VALID FROM :			THROUGH:		