



NOTICE OF CONDITIONS OF PROBATION

I, _____ understand that my probable permanent appointment to the positions of Correction Officer is contingent upon me successfully passing the required probationary period, a background investigation and a medical examination.

Failure to satisfy any of the above may result in termination of my employment.

I also understand that, the period of probationary service for each newly appointed employee is (24) months and may be extended by the number of days the employee does not perform the duties of the position which includes but is not limited to sick leave, annual leave, compensatory time off, medically monitored duty, absence without leave or suspension from duty without pay, etc.

Correction Officers are required to work rotating hours and shifts, including nights, Saturdays, Sundays and holidays and ordered overtime when necessary.

I do hereby accept this appointment as Correction Officer, subject to the above conditions.

Exam: _____ List: _____

Name (Print): _____

Signature: _____

Date: _____