Texas Department of Criminal Justice
CORRECTIONAL OFFICER (CO) CAREER LADDER PLACEMENT REVIEW REQUEST

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY. INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY CHECKING THE APPLICABLE BOX AND SIGNING IN THE SPACE PROVIDED. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR HR REPRESENTATIVE.

I believe I will be eligible for a CO career ladder adjustment to CO III – pay level 3 based on my active military service and/or my bachelor's degree as indicated below. I am a CO I or CO II and am eligible for a higher salary rate based on the following:

☐ I have at least two years of active military service. I have been released from military service under honorable conditions or I am a current member of a reserve component of the uniformed services.

Documentation Requirements:

- **If you are no longer a member of the uniformed services, you do not need to provide any documentation at this time. Your DD214 may already be on file.**
- **If you are a current member of the uniformed services, provide a Statement of Service that is signed or authorized by your commanding officer and includes your name, social security number, and periods of active service.**

☐ I have a bachelor's degree granted by an institution of higher education that is accredited by the Council for Higher Education Accreditation (CHEA).

Documentation Requirements: Provide a copy of your college transcript or diploma.

I certify that the best of my knowledge and belief the above statement is true and correct. If I indicated that I have a bachelor's degree, I authorize the representative(s) from the college/university at which I have attended to verify to the Texas Department of Criminal Justice transcript information with regard to the degree obtained. I release all such parties from all liability from any damages which may result from furnishing such information to the Texas Department of Criminal Justice.

_____	_____
Printed Name (First, MI, Last)	Social Security Number
_____	_____
Unit of Assignment	Current Position
_____	_____
Signature	Date (mm/dd/yyyy)

Employee Instructions: Provide the original form and a copy of the required supporting documentation, if any, to your human resources representative.

HR Representative Instructions: Upon receipt, provide the employee with a copy of the form and supporting documentation. Maintain the original form and a copy of the supporting documentation. Fax the form and the supporting documentation to Paula Gilbert, (936) 437-3111. File the documents with the fax confirmation sheet in the unit/department employee human resources file, payroll section.

ELIGIBILITY: YES / NO **SIGNATURE AND DATE**: _____

PAYROLL EFFECTIVE DATE:_____ **PATTY GARCIA, DIRECTOR, HUMAN RESOURCES**