



Edwin M. Lee
Mayor

Micki Callahan
Human Resources Director

CANDIDATE IDENTIFICATION VERIFICATION

Exam Job code/Title: _____

Please **READ** the following carefully:

I understand that I am being admitted to this examination conditionally, and that I must submit acceptable photo identification (State Issued Driver’s License or Identification Card, Alien Registration Card, Military Identification Card, or Passport) by the deadline indicated below. Failure to submit this identification may result in my disqualification from this examination and my scores on this exam may not be released.

Bring identification and this form to: _____
during the normal business hours of _____ to _____ (M-F)
no later than _____

Name of Candidate: _____

Date: _____

Candidate Signature: _____

Paste Candidate Photo Here Before Printing

Official Use Only:
Applicant must return form by: _____
Authorized by _____
Exam Analyst: _____

Type of Identification Provided: _____

Date: _____

Verified By: _____

Candidate Signature: _____

Copy of Photo ID Provided

Provide copies of this form to candidate and retain the originals for exam file.

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Copies of this information can also be obtained at 1 South Van Ness, 4th Floor, San Francisco, CA 94103