



**Department of
Civil Service**

Albany, NY 12239

STAFFING SERVICES DIVISION

Request for Reinstatement

S-46 (4/15 L)

CIVIL SERVICE COMMISSION ACTION

[Empty box for Civil Service Commission Action]

PART 1: TO BE COMPLETED BY AGENCY (See Reverse for Instructions)

EMPLOYEE INFORMATION

Name of Nominee		Social Security Number	
Agency requesting reinstatement and address			
Title Code	Title to be reinstated to		
Location	County	County Code	Original permanent date of entry into State service
Reinstatement based on permanent service as (title)			
Date of permanent appointment to qualifying title		Date separated from State service	

REEMPLOYMENT LIST INFORMATION

Are there any reemployment lists for this title and location at this time? No Yes (list below)

[Empty box for Reemployment List Information]

ELIGIBLE LIST INFORMATION

Are there any eligible lists for this title: No Yes (fill below)

List No./Type and Title	Date list(s) established
Number of eligibles on list(s)	

AGENCY JUSTIFICATION FOR REINSTATEMENT (If more space is necessary attach additional sheets of paper):

[Empty box for Agency Justification for Reinstatement]

Name (Please print)	Title	
Signature	Date	Telephone

PART 2: For Civil Service Use Only

REEMPLOYMENT LIST INFORMATION

Are there any reemployment lists for this title and location at this time? No Yes (list below)

STAFFING SERVICE COMMENTS (Optional):

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Verified and Prepared by (Signature)	Date	Telephone
Reviewed by (Signature)		

INSTRUCTIONS

Agency:

Complete *Employee Information, Reemployment List Information, Eligible List Information* and *Justification for Reinstatement sections*.

Sign and submit two (2) copies to your Staffing Services Section. Incomplete or inaccurate forms will be returned to you for correction.

Staffing Services:

Section: Verify accuracy of information submitted by agency. Type or print request. Use *Comments* space to explain any unusual aspects of the request.

Section Head: Sign and forward one copy to the Civil Service Commission for consideration.

Director's Office: Initial and forward one copy to the Civil Service Commission for consideration.

NOTE: The Civil Service Commission will notify the agency of the disposition of the request by letter.