## **CHANGE OF AVAILABILITY FORM**

| NAME:  |   | SSN (Last 4-digits)    |                            |                     |          |  |
|--|---|------------------------|----------------------------|---------------------|----------|--|
| EX   | AMINATION TITLE (S):  |                        |                            |                     |          |  |
|  |   |                        |                            |                     |          |  |
|  |   |                        |                            |                     |          |  |
|  |   |                        |                            |                     |          |  |
|  |   | this section only if y |                            |                     |          |  |
|  | receiving notices to report for job interview.  Withhold my name until: (MM/DD/YY): |                        |                            |                     |          |  |
|  |   |                        |                            |                     |          |  |
|  |   |                        |                            |                     |          |  |
| CHE  | CHECK THE BOXES BELOW IN EACH CATEGORY FOR WHICH YOU ARE INTERESTED IN              |                        |                            |                     |          |  |
| REC  | EIVING NOTICES TO REPO  | ORT FOR A JOB INTI     | ERVIEW.                    |                     |          |  |
| <u>Indic</u>   | cate the TYPES OF APP   | OINTMENT(S) you        | will acce                  | <u>pt</u> :         |          |  |
|  | $\square$ ANY JOB TYPE  | ☐ Intermit             | tent                       |                     |          |  |
|  | ☐ Full-Time   | ☐ Limited              | (jobs tha                  | t last for 8 months | or less) |  |
|  | ☐ Part-Time   | ☐ Trainee              |                            |                     |          |  |
| المطانع  | note veur AVAII ADII ITV  | for the following      | hiffo                      |                     |          |  |
| Indicate your AVAILABILITY for the following shifts:         |   |                        |                            |                     |          |  |
|  | ☐ ANY SHIFT ☐   | l Day                  | veyard                     | ☐ Rotating          | ∐ Swing  |  |
| Indicate the GEOGRAPHIC AREAS where you are willing to work: |   |                        |                            |                     |          |  |
|  | ☐ ANY LOCATION  |                        | ☐ Civi                     | c Center            |          |  |
|  | ☐ Harbor  |                        | ☐ Sou                      | th Central Los Ano  | geles    |  |
|  | ☐ North Central / Hollywood (Griffith Park)   |                        | ☐ Wes                      | t Los Angeles       |          |  |
|  | ☐ Westchester/Venice (LAX-Hyperion)   |                        | ☐ West San Fernando Valley |                     |          |  |
|  | ☐ East San Fernando V   | alley                  | ☐ Bou                      | lder Dam            |          |  |
|  | ☐ Antelope Valley / Moj   | ave                    | ☐ Owe                      | ens Valley          |          |  |
|  | ☐ Intermountain Power   | (Project Utah)         |                            |                     |          |  |
|  | ☐ Ely Nevada  |                        |                            |                     |          |  |

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| Indicate the DEPARTMENT(S) for which you will accept employment: |                                     |   |      |  |
|--|-------------------------------------|---|------|--|
|  | ANY DEPARTMENT                      | ☐ Finance, Office of                      |      |  |
|  | Aging                               | ☐ Fire - Civilian                         |      |  |
|  | Airports                            | ☐ Fire - Sworn                            |      |  |
|  | Animal Services                     | ☐ General Services                        |      |  |
|  | Building & Safety                   | ☐ Harbor                                  |      |  |
|  | Cannabis                            | ☐ Housing                                 |      |  |
|  | City Administrative Office          | ☐ Human Relations Commission              | on   |  |
|  | City Clerk                          | ☐ Information Technology Age              | ncy  |  |
|  | City Employees' Retirement          | ☐ Library                                 |      |  |
|  | City Planning                       | ☐ Mayor (Executive Departmen              | nt)  |  |
|  | City Tourism Department             | ☐ Neighborhood Empowermer                 | nt   |  |
|  | Civil and Human Rights Department   | ☐ Pensions (Police & Fire)                |      |  |
|  | Community Investment for Families   | ☐ Personnel                               |      |  |
|  | Controller                          | ☐ Police - Civilian                       |      |  |
|  | Council                             | ☐ Police - Sworn                          |      |  |
|  | Cultural Affairs                    | ☐ Public Works - Board                    |      |  |
|  | Department of Water & Power - Joint | Public Works - Contract                   |      |  |
|  | Department of Water & Power - Power | Administration Public Works - Engineering |      |  |
|  | Department of Water & Power - Water | ☐ Public Works - Sanitation               |      |  |
|  | Department on Disability            | ☐ Public Works - Street Lightin           | ng   |  |
|  | Economic & Workforce Development    | ☐ Public Works - Street Service           | es   |  |
|  | El Pueblo De Los Angeles            | ☐ Recreation & Parks                      |      |  |
|  | <b>Emergency Management</b>         | ☐ Transportation                          |      |  |
|  | Employee Relations Board            | ☐ Youth Development Departm               | nent |  |
|  | <b>Ethics Commission</b>            | □ Zoo                                     |      |  |

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| SIGNATURE: | DATE: |
|------------|-------|
|------------|-------|

(Not needed if emailed from e-address listed in your NEOGOV account)

Submit form to Personnel Certification Unit via email to <a href="mailto:per.certs@lacity.org">per.certs@lacity.org</a> OR CITY OF LOS ANGELES

PERSONNEL DEPARTMENT

700 EAST TEMPLE STREET

ROOM 235

LOS ANGELES, CA 90012

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