



NC DEPARTMENT OF PUBLIC SAFETY Essential Job Functions (EJFs)

2.22.2013

Position Title _____ Position Number _____

Reminder: An updated job description, ADA Checklist (Form HR 403) and organizational chart *MUST* be submitted with each classification request.

EJF Number _____

I have read, understand and can perform the essential functions of this job with or without an accommodation.

(Applicant Typed/Printed Name)

(Applicant Signature)

(Date)