

STATE PE
PERSONNEL SYSTEM

For the purpose of this preference, INDIVIDUAL WITH A DISABILITY means anyone who has a physical or mental impairment which substantially limits one or more of their major life functions, or has a record of such impairment or is regarded as having such impairment.

Preference will be awarded ONLY upon the Arizona Department of Administration Human Resources Information Solutions' (HRIS) receipt of this signed and dated "Request for Disability Preference" form. The completed form is intended for use solely in connection with A.R.S. 38-492. The information is requested on a voluntary basis and will be kept confidential. Refusal to provide the requested information will not result in adverse treatment.

Requests for reasonable accommodation in the interview/testing process should be made directly to the hiring agency when they contact you.

Once you have completed this form, please save it then upload it to the "Veterans and Disability Preference" page when applying for a job.

I hereby request preference. I affirm/certify that I meet the above definition of an INDIVIDUAL WITH A DISABILITY, and am eligible for preference.

Last
Name

First
Name

M.I.

Street
Address

City

State

Zip Code

Daytime Phone
Number

Signature

Date