



CONDITIONS OF EMPLOYMENT (FORM 631)

Route Sales Representative

Your Name (Printed):

Last Name

First Name

M.I.

If you are successful in the above exam, your name will be placed on the active list and certified to fill vacancies according to the conditions you have specified on this form. If you are unable to accept employment or do not reply to contacts from the California State Lottery, your name will be placed on the inactive list for this classification.

PLEASE SELECT YOUR CHOICE(S) INDICATING LOCATION(S) YOU ARE WILLING TO WORK:

- | | | |
|--------------------------|------|----------------|
| <input type="checkbox"/> | 3401 | Sacramento |
| <input type="checkbox"/> | 1005 | Central Valley |
| <input type="checkbox"/> | 3801 | San Francisco |
| <input type="checkbox"/> | 0107 | East Bay |

PLEASE SELECT THE TYPE OF APPOINTMENT(S) YOU WILL ACCEPT:

- | | | | |
|--------------------------|---|----|--|
| <input type="checkbox"/> | A | 11 | Permanent or Temporary – full time, part time, or intermittent |
| <input type="checkbox"/> | C | 55 | Permanent or Temporary – full time only |
| <input type="checkbox"/> | M | 44 | Permanent or Temporary – part time or intermittent only |
| <input type="checkbox"/> | D | 58 | Permanent only – full time only |
| <input type="checkbox"/> | K | 85 | Temporary only – full time only |
| <input type="checkbox"/> | R | 41 | Permanent – part time or intermittent OR Temporary – full time, part time, or intermittent |

Please notify the California State Lottery Personnel Services unit, in writing, of any change in your address or availability for employment.

California State Lottery
Human Resources Division
Attn: Brenda Ruiz
P.O. Box 2630
Sacramento, CA 95812-2630