**State of Michigan**

**Candidate Cover Sheet**

**Please attach completed form as an additional document with the candidate resume in dotStaff™. This form is required for all IT staff augmentation positions with the State of Michigan. If the required fields on this form are not completed, the candidate may be withdrawn from consideration**.

\***REQUIRED FIELD**

\***Posting Number:** Click or tap here to enter text.

\***Candidate Name:** Click or tap here to enter text.

**\*Candidate Availability for In Person interview:** Choose an item.

**\*Current Location of Candidate (City, State):** Click or tap here to enter text.

**\*Is candidate through a sub vendor:** Choose an item.

**If yes, sub vendor name:** Click or tap here to enter text.

**\*Earliest availability to start if selected:** Click or tap here to enter text.

**\*Key engagements over the last two years:** Click or tap here to enter text.

**\*Is the Candidate a current State of Michigan employee?** Choose an item.

**\*Has candidate ever worked at the State of Michigan:** Choose an item.

**If yes, type of employment:** Choose an item. **Manager’s Name:** Click or tap here to enter text.

**If yes, what department and division:** Click or tap here to enter text.

**If yes, dates of employment at the State of Michigan:** Click or tap here to enter text.

**\*Does the candidate have any relatives working at the State of Michigan:** Choose an item.

**If yes, list their name(s) and department(s):** Click or tap here to enter text.

**\*Describe how past work experience relates to this position:** Click or tap here to enter text.

**Recruiter Notes:** Click or tap here to enter text.

**By typing my name below, I have validated that all the information contained in the Candidate’s resume related to technical skills and experience is accurate.**

**Vendor Representative Name:** Click or tap here to enter text. **Date:** Click or tap here to enter text.