EMPLOYEE'S RECORD OF AGGREGATE STATE OF NORTH CAROLINA SERVICE*

Dates of Permanent Full-Time or Permanent Part-Time State of NC Service											
From	ı <u>:</u>		<u>To:</u>								
Mo. Day Yr.			Mo. Day Yr.			Yrs.	Mos.	Place of Employment***	Position Held	Part-Time** or Full-Time	
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If *S	perm chool	anent Admi	Part-Ti nistrati	ime, P ive Un	ercent (it, State	(%) of F e Agenc	`ull-Tim y, Instit	Administrative Units. e ution or other. information is correct.			
Date							_	Signature of Employee			
								Social Security Number			