



**IT IS IMPORTANT TO READ THIS ANNOUNCEMENT CAREFULLY**  
Only the attached City of White Plains Police Officer application will be accepted

**THE CITY OF WHITE PLAINS IS AN EQUAL OPPORTUNITY EMPLOYER**  
**WOMEN, MINORITIES AND VETERANS ARE ENCOURAGED TO APPLY**

## **POLICE OFFICER OC #62-001**

DATE OF EXAMINATION: SATURDAY, SEPTEMBER 9, 2023 OR SUNDAY SEPTEMBER 10, 2023\*  
LAST DATE FOR FILING: **THURSDAY, MAY 4, 2023**  
PLACE AND TIME OF EXAMINATION: TO BE ANNOUNCED  
SALARY RANGE: \$56,563 - \$110,749

### **HOW TO APPLY: SUBMIT THE FOLLOWING:**

- 1) **\$50** Non-Refundable exam fee (No Cash Accepted- See "Fee Information")
- 2) A completed City of White Plains Police Officer application (Print Your Info Clearly)  
**PRINTABLE VERSIONS AVAILABLE ON OUR WEBSITE: WWW.CITYOFWHITEPLAINS.COM**
  - Police Officer Application
  - Guide to Taking the Examination for the Entry-Level Law Enforcement Officer Series
  - Police Officer Physical Fitness Agility Testing Standards

YOU MAY ALSO OBTAIN AN APPLICATION AT THE FOLLOWING LOCATIONS:

<b>City Hall - Personnel Department</b> 255 Main St, 3 <sup>rd</sup> fl, White Plains, NY 10601 <b>Monday - Friday from 9AM to 5PM</b>	<b>Thomas H. Slater Community Center</b> 2 Fisher Ct, White Plains, NY 10601 <b>Monday - Friday from 9AM to 5PM</b>	<b>El Centro Hispano</b> 346 So. Lexington Ave, White Plains, NY 10606 <b>Monday - Friday from 12PM to 5PM</b>
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- 3) Submit to one of the above locations or Mail (Certified or Signature Required recommended) to:  
City of White Plains, Personnel Department, 255 Main Street, White Plains, NY 10601

**RESIDENCY REQUIREMENT:** Must have been a legal resident for at least one (1) month immediately preceding the date of the written test and continuously until date of appointment of any of the following six Counties:

**Westchester Putnam Nassau Rockland Orange Bronx**

Preference in appointment may be given to successful candidates who have been legal residents of the City of White Plains for at least one (1) month immediately preceding the date of the written test and continuously until date of appointment.

**CANDIDATE'S RESIDENCY WILL BE INVESTIGATED AND VERIFIED BEFORE APPOINTMENT.**  
**CANDIDATES WILL BE FINGERPRINTED.**

**CITIZENSHIP REQUIREMENT:** US Citizenship is a requirement for appointment. It is not necessary for admission to the examination.

### **MINIMUM QUALIFICATIONS:**

**AGE REQUIREMENT:** The following are pursuant to Section 58 of the NYS Civil Service Law:

1. **Minimum Age:** To be certified as eligible for appointment, applicants must be at least 20 years of age.
2. **Maximum Age:** Candidates may not have reached 35 years of age as of the date of the written examination.

**Effect of Military Duty on Age Limits:** In determining an applicant's maximum age for certification appointment, the period of their military duty as defined in Section 243 (1-b and 10-a) of the Military Law, up to six (6) years, shall be subtracted from their chronological age. Candidates exercising this provision must submit form DD-214 with their application.

**DRIVER'S LICENSE:** To be eligible for appointment, candidates must possess a valid New York State Driver's License.

**EDUCATION REQUIREMENT:** Applicant must hold:

1. A High School diploma; **OR**
2. A High School equivalency diploma (GED or TASC) issued by an education department of any state in the United States; **OR**
3. A comparable diploma issued by any commonwealth, territory or possession of the United States or Canal Zone; **OR**
4. A US Armed Forces GED Certificate, HS level.

**Note:** Applicants who do not possess HS (or equivalency) may take the examination, but will not be eligible for appointment until they obtain a HS or equivalency diploma. For information on how to obtain a NYS High School Equivalency Diploma, write New York State Education Department, Albany, New York 12234 or [www.acces.nysed.gov/ged](http://www.acces.nysed.gov/ged).

**("Education Requirement" Continued on the next page)**

**\*You may be assigned to either Saturday, September 9, 2023 or Sunday, September 10, 2023. Your admission notice will tell you where and when you are scheduled to appear.**

**Foreign HS Diplomas:** For appointment from the resulting eligible list, applicants with a foreign HS diploma must submit a course by course evaluation of their educational credentials. You must pay the required evaluation fee. Evaluations will be accepted from services such as:

**World Education Services, Inc.**

Bowling Green Station  
P.O. Box 5087  
New York, NY 10274-5087  
Web: [www.wes.org](http://www.wes.org) Phone: (212) 966-6311

**Globe Language Services, Inc.**

305 Broadway Ste. 401  
New York, NY 10007  
Web: [www.globelanguage.com](http://www.globelanguage.com)  
Phone: (212) 227-1994

**International Education Research Foundation, Inc.**

6133 Bristol Pkwy  
Culver City, CA 90230  
Web: [www.ierf.org](http://www.ierf.org)  
Email: [info@ierf.org](mailto:info@ierf.org) Phone: (310) 258-9451

**DUTIES:** A Police Officer is responsible for the enforcement of laws, ordinances and protection of lives and property in an assigned area during a specified shift; does related work as required.

**WORK SCHEDULES:** Police Officers work on a rotating shift basis, seven days a week, 52 weeks per year.

**VACANCIES:** The resulting eligible list will be certified to fill vacancies as they occur in the City of White Plains Department of Public Safety.

**EXAMINATION CONSISTS OF THREE PARTS WITH RELATIVE WEIGHTS AS FOLLOWS:**

- |                                    |                   |
|------------------------------------|-------------------|
| 1. Written exam:                   | Graded and Ranked |
| 2. Physical Strength/Agility test: | Pass/Fail         |
| 3. Medical & Psychological exams:  | Pass/Fail         |

Candidates must pass the written test in order to qualify to take the physical strength/agility test. Candidates must pass the physical strength/agility test in order to qualify for appointment. The medical & psychological exams are scheduled post offer/pre-employment.

**FREE TRAINING: THERE WILL BE A FREE TRAINING PROGRAM TO PREPARE APPLICANTS FOR BOTH THE WRITTEN AND PHYSICAL AGILITY PARTS OF THE EXAM. THE DATE AND LOCATION OF THE TRAINING SESSIONS WILL BE SENT TO APPROVED APPLICANTS IN THEIR LETTER OF ADMISSION.**

**WRITTEN EXAMINATION INFORMATION:**

The written exam shall consist of multiple choice questions from which the applicant will be required to select the correct answer from four possible choices. **USE OF CALCULATORS IS PROHIBITED** for this examination.

A Guide to Taking the Examination for the Entry-Level Law Enforcement Officer Series and Police Officer Physical Fitness Agility Testing Standards is available on our website at [WWW.CITYOFWHITEPLAINS.COM](http://WWW.CITYOFWHITEPLAINS.COM) or in our office.

The written test is being prepared and rated by the New York State Department of Civil Service in accordance with Section 23-2 of the Civil Service Law. The provisions of the New York State Civil Service Rules and Regulations dealing with rating of examinations will apply to this written examination.

The rating key for this examination will be established by the New York State Civil Service Commission prior to the date of the test, upon recommendation of a committee of police experts who will review all the questions for appropriateness and the key answers for correctness. There will be no review of the questions by candidates. This committee was selected with the assistance and endorsement of the Police Conference of New York, Inc., the New York State Association of PBA's, Inc., and the New York State Association of Chiefs of Police, Inc.

**SUBJECTS OF THE WRITTEN EXAMINATION:** There will be a written test designed to evaluate knowledge, skills and/or abilities in the following areas:

**1. Situational Judgement**

These questions test for the ability to identify appropriate and effective responses to work-related challenges. You will be presented with scenarios that reflect the types of challenges one could encounter in a work environment. Each scenario will be followed by several responses to the scenario. You must rate the effectiveness of each response.

**2. Language Fluency**

These questions test for the ability to read, understand, and present a clear and accurate summary of information. For some questions, you will be given a brief reading passage followed by four statements, each summarizing the information. You must then choose the best version. For other questions, you will be given several sentences, one of which contains a spelling, grammatical, or punctuation error. You must then select the line that contains the error.

**3. Information Ordering and Language Sequencing**

These questions test for the ability to properly identify the sequence or order of events, to organize information to fit a timeline. You will be given a brief reading passage followed by one or more questions. You must identify the proper sequence of events in order to answer one or more questions.

**4. Problem Sensitivity and Reasoning**

These questions test for the ability to apply information and to identify a problem or potential problem. For some questions, you will be given information in the form of policies, rules, regulations, laws, followed by a situation. You must then identify the problem and apply the information to select the best course of action to take. For other questions, you will be given a scenario and mock witness statements. You must use this information to answer one or more questions about the scenario.

## **SUBJECTS OF EXAMINATION: (Cont'd)**

### **5. Selective Attention**

These questions test for the ability to focus on completing a task and to pay attention to important details while performing repetitive and monotonous tasks. You will be presented with a series of letters, symbols, and/or numbers. You must select the choice that contains the series of letters, symbols, and/or number that matches exactly.

### **6. Visualization**

These questions test for the ability to imagine how something will look when it is moved around or when its parts are changed, moved, or rearranged. You will be presented with an image of a face followed by four images of faces. Each face is disguised or altered in some way. Three of the images have a difference in facial structure or facial features. You must select the choice that contains the image with the identical facial structure and facial features.

### **7. Spatial Orientation**

These questions test for the ability to understand how to navigate within spaces or how to get from one point to another. You will be provided with a map followed by one or more questions. You must imagine yourself at a certain location and orient yourself to the direction you would move to get to another location by the shortest (least distance) route.

Test guide: A Guide for the Written Test for **Entry-Level Law Enforcement** is available at the New York State website: <https://www.cs.ny.gov/testing/testguides.cfm>. Candidates not having access to a computer or the internet may obtain a copy of the test guide from the Personnel Department, 255 Main Street, Room #301, White Plains, NY 10601, Monday-Friday, 9am-5pm.

## **PHYSICAL AND MEDICAL REQUIREMENTS:**

AN ILLUSTRATED GUIDE TO TAKING THE PHYSICAL AGILITY EXAM IS AVAILABLE ON OUR WEBSITE:  
**WWW.CITYOFWHITEPLAINS.COM**

1. The City of White Plains Personnel Department reserves the right to choose only as many successful candidates from the written examination for further processing as may be necessary to fill anticipated vacancies.
2. Applicants who pass the written test will be required to pass a qualifying physical agility test established by the Municipal Police Training Council (MPTC). The MPTC standards may be reviewed at [www.criminaljustice.ny.gov/ops/docs/registry/policeapptsmed.pdf](http://www.criminaljustice.ny.gov/ops/docs/registry/policeapptsmed.pdf). Candidates will be required to sign an accident waiver prior to the physical agility test.
3. Candidates offered the position of Police Officer will be required to pass the medical standards established by the MPTC, and a psychiatric evaluation will be required by the Department of Public Safety.
4. Failure of any one of the above qualifying tests will bar a candidate from appointment.
5. Candidates may be subject to a substance abuse test designated by the Department of Public Safety at any time prior to hiring. Candidates who test positive for an illegal substance may be subject to removal from the eligible list or termination from employment.

**GENERAL INFORMATION:** Candidates who have successfully passed the written examination and the physical agility test, will be required to provide documents including the following for the Department of Public Safety background investigation:

1. Birth Certificate
2. Social Security Card
3. N.Y.S. Driver's License
4. High School Diploma or Equivalency Diploma issued by an Education Dept of any state in the US
5. Copy of DD214 (Discharge papers from the Armed Services), if applicable
6. Documentary proof of citizenship

Conviction of a felony will bar (conviction of a misdemeanor or other offense may bar) participation in examination and appointment. Candidates must be of good moral character, in excellent physical condition, demonstrate clarity of oral expression and cooperate fully with the Personnel Department and the Department of Public Safety in their investigation into the candidate's background.

**VETERANS:** Veterans and Veterans with disability, who meet the criteria set forth in the Application for Examination, may be eligible for additional credits added to their earned scores if successful in examination. **CREDITS SHOULD BE CLAIMED AT THE TIME OF FILING YOUR APPLICATION FOR EXAMINATION AND ATTACH A COPY OF YOUR DD214 SEPARATION PAPERS.** If claiming credit as a **Veteran with disability**, attach the required certification. **If these documents are not submitted within sixty (60) days after the last filing date, your claim will be denied.** Active duty members of the Armed Forces have the right to request veteran credits prior to discharge. If currently on active duty with an anticipated date of discharge within sixty (60) days, check the appropriate box on the application. Legal residency is determined by home of record on DD214.

**FILING PERIOD FOR MILITARY PERSONNEL:** Anyone who is serving on **ACTIVE DUTY** in the U.S. armed forces or as a member of the organized militia (Army National Guard, Air National Guard, New York Naval Militia, New York Guard) and reserves, **other than for training purposes**, and requires special testing arrangements should call (914) 422-1257 for criteria and arrangements.

**SPECIAL TESTING ARRANGEMENTS:** Please indicate on your application (question #10) if one of the following are needed so appropriate arrangements can be made:

A) Active Military: Go to "Guide for Military Make-up Exams" on the website at [www.cityofwhiteplains.com](http://www.cityofwhiteplains.com)

B) Sabbath Observers: May request an alternate test date for religious observance.

C) Person with disability: Reasonable accommodations will be made for disabled candidates who request such arrangement for their disability.

D) Alternate Test Date: If needed, please call Mon-Fri 9am-5pm (914) 422-1258 as soon as possible BEFORE the scheduled test date for the alternate test date policy.

**Children** of firefighters and police officers killed in the line of duty shall be entitled, in conformance with section 85-a of the Civil Service Law, to receive an additional ten points in a competitive examination for original appointment in the same municipality in which their parent has served. If you are qualified to participate in this examination and are a child of a CWP firefighter or police officer killed in the line of duty, please inform this office of this matter when you submit your application for examination. A candidate claiming such credit has a minimum of two months from the application deadline to provide the necessary documentation to verify additional credit eligibility. However, no credit may be added after the eligible list has been established.

**CROSS FILER INFORMATION:** For candidates who have applied for Civil Service Examinations in multiple jurisdictions when examinations are scheduled on the **same date**.

**Local/Local Crossfilers:** If you applied for other local government examinations in addition to a White Plains exam, write to **each** civil service agency no later than four (4) weeks before the date of the examinations to make arrangements for the test site at which you wish to take your examinations. Be sure to fill out the Cross Filer sections of your application.

**Local/State/NYC Crossfilers:** If you have applied for both State and local government examinations, you must notify the City of White Plains as per above of your intent to take both a State and a local government examination. When taking both a State and a local government examination, you will be required to take all your examinations at a State examination center. You will be advised by letter when and where to report for your examinations. **There is no reciprocity with New York City, and you must make a choice between the two jurisdictions.**

**FILING REQUIREMENTS:** Applications must be delivered personally or be postmarked no later than the last filing date. The date imprinted by a postage meter is **NOT** accepted as a postmark. Omissions or vagueness in answers will not be interpreted in candidate's favor and may result in disqualification. Approved candidates will be sent notice of when and where to appear for examination. Notice will be sent to disapproved candidates.

**CHANGE OF INFORMATION:** Candidates are responsible for reporting in writing all changes in name and/or address directly to the Personnel Department, City of White Plains, 255 Main Street, White Plains, NY 10601. Please see our website for form; include name, examination number, DOB, old address, new address, effective date of move and signature on all correspondence.

**FEE INFORMATION: A NON-REFUNDABLE FEE OF \$50.00 IS REQUIRED.** If the required fee does not accompany your application you will be disqualified and the application will be returned. Send check or money order payable to the City of White Plains and write: "Police Officer OC #62-001" on your check or money order. For your convenience, if applying in person, we also accept VISA, MASTERCARD AND AMERICAN EXPRESS. **There is a \$20.00 charge for all returned personal checks. If you submit a check that is returned by the bank, we will not accept any personal checks or credit cards for this or future exams. Do not send cash. As no refund will be made, you are urged to compare your qualifications carefully with the requirements for admission and file only if you are clearly qualified.** Candidates must meet one of the following criteria to be eligible for a **FEE WAIVER:** unemployed and primarily responsible for the support of a household; eligible for Medicaid; receiving Supplemental Security Income payment; or certified Job Training Partnership Act/Workforce Investment Act eligible through a State or local social service agency. All fee waiver applications require supporting documentation to prove eligibility. Applications are available for pick up at the Personnel Department, 255 Main Street, Room #301, White Plains, NY 10601, Monday - Friday, 9am - 5pm. All fee waiver requests and documentation must be submitted along with your application by the application deadline.

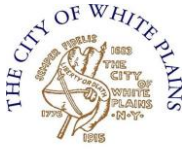
**APPLICATION QUESTIONS?:** After reading the entire four (4) page announcement and reviewing the FAQ's page on the website, if you still have questions or need assistance in completing the application, you can contact Scott at (914) 422-1260, Monday-Friday 9am-5pm. Submit application as soon as possible, do not wait until the last day to file your application.

**CONSENT JUDGMENT: WHITE PLAINS IS RECRUITING AND HIRING UNDER THE TERMS OF A FEDERAL COURT CONSENT JUDGEMENT IN A CIVIL RIGHTS ACTION BROUGHT BY THE UNITED STATES DEPARTMENT OF JUSTICE. COPIES OF THE CONSENT JUDGEMENT ARE ON FILE WITH THE UNITED STATES COURT FOR THE SOUTHERN DISTRICT OF NEW YORK UNDER THE DOCKET NUMBER 80 CIV. 7407 (ADS). THE ABOVE HIRING PROCEDURES ARE SUBJECT TO ANY FURTHER DEVELOPMENTS IN THAT CASE.**

### **THE CITY OF WHITE PLAINS IS AN EQUAL OPPORTUNITY EMPLOYER**

IT IS THE POLICY OF THE CITY OF WHITE PLAINS TO PROVIDE FOR AND PROMOTE EQUAL OPPORTUNITY IN EMPLOYMENT, COMPENSATION AND OTHER TERMS AND CONDITIONS OF EMPLOYMENT WITHOUT DISCRIMINATION BECAUSE OF AGE, RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, MEDICAL CONDITION OR DISABILITY, MARITAL STATUS, MILITARY OR VETERAN STATUS, GENDER IDENTITY, SEXUAL ORIENTATION, CRIMINAL CONVICTIONS OR ANY OTHER CLASSIFICATION PROTECTED BY FEDERAL, STATE OR LOCAL LAW. WE ENCOURAGE ALL INDIVIDUALS WHO MEET THE MINIMUM QUALIFICATIONS TO APPLY.

**APPLICATION FOR POLICE OFFICER OC #62-001 EXAMINATION**



**MAIL OR DELIVER TO:**  
**CITY OF WHITE PLAINS**  
**PERSONNEL DEPT.-RM 301**  
**255 MAIN STREET**  
**WHITE PLAINS, NY 10601**

This application is part of the examination and must be **printed clearly, completely, and accurately**. Answer all questions **fully in black or blue ink or type**. Attach additional sheets and documents, if needed, to give complete information.

**\$50 NON-REFUNDABLE APPLICATION FEE**

**FOR OFFICE USE ONLY**

- WP Resident
- Cross Filer
- Special Accom.
- DD214/Military
- Restricted

**NO CASH ACCEPTED.** CHECK OR MONEY ORDER PAYABLE TO: CITY OF WHITE PLAINS. INCLUDE THE EXAM NUMBER ABOVE. VISA, MASTERCARD AND AMERICAN EXPRESS ALSO ACCEPTED. APPLICATIONS RECEIVED WITHOUT THE FILING FEE WILL BE RETURNED. IT IS YOUR RESPONSIBILITY TO RETURN IT WITH THE FEE BY THE FILING DEADLINE. READ THE EXAM ANNOUNCEMENT.

**CITY OF WHITE PLAINS IS AN EQUAL OPPORTUNITY EMPLOYER**

It is the policy of the City of White Plains to provide for and promote equal opportunity in employment, compensation and other terms and conditions of employment without discrimination because of age, race, color, religion, national origin, sex, medical condition or disability, marital status, military or veteran status, gender identity, sexual orientation, criminal convictions or any other classification protected by Federal, State or Local Law.

**YOU MUST FILL OUT ALL SECTIONS OF THIS APPLICATION**

**1. SOCIAL SECURITY NUMBER (PLEASE PRINT OR TYPE)**

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**2. LAST NAME** **SUFFIX (ex: Jr)**

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**3. FIRST NAME** **M.I.**

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**4. LEGAL RESIDENCE - STREET ADDRESS & APT #**

--

**CITY**

--

**STATE** **ZIP CODE**

--	--

**5. (FILL ONLY IF DIFFERENT FROM LEGAL RESIDENCE)**

**Mailing Address & Apt #**

--

**CITY**

--

**STATE** **ZIP CODE**

--	--

**6. DAYTIME PHONE NUMBER**

--	--	--

**7. E-MAIL ADDRESS**

--	--

- gmail.com
- yahoo.com
- \_\_\_\_\_

**ALL STATEMENTS ARE SUBJECT TO VERIFICATION. MISREPRESENTATIONS MAY CONSTITUTE CAUSE FOR DISQUALIFICATION OR DISCHARGE. PURSUANT TO SECTION 210.45 OF THE NEW YORK PENAL LAW, IT IS A CRIME PUNISHABLE AS A CLASS "A" MISDEMEANOR TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN.**

The City of White Plains is a drug-free workplace. Consistent with applicable collective bargaining agreement, employees may be required to submit to drug and/or alcohol testing for reasonable suspicion. Employees utilizing a Commercial Driver's license in their position will be subject to random drug testing per Federal Department of Transportation regulations.

**THIS AFFIRMATION AND AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION MUST BE COMPLETED:** By my signature below, I authorize the City of White Plains, and/or its respective Departments, Offices, Agencies, Boards or Authorities to request verbal records or written verification of any or all information contained herein. I further authorize a review and full disclosure of all records concerning me whether said records are of a public, private or confidential nature. This authorization gives my consent for full and complete disclosure of records. I further release the City of White Plains, and/or its respective Departments, Offices, Agencies, Boards or Authorities, and their respective officers and/or employees from any and all liability which may be incurred as a result of collecting such information. Further, my signature below certifies I have read and fully understand this "Affirmation and Authorization for Release of Personal Information" and have acknowledged that a photocopy of the front page of this Application for Examination/Employment containing this release will be valid as an original thereof, even though said photocopy does not contain an original writing of my signature. I affirm that all statements made on this application (including any attached paper) are true under the penalties of perjury. I understand that any omission, misrepresentation and/or falsification of information in this application may constitute grounds for my disqualification and/or dismissal. I understand that all statements made in this applications(s) for employment are subject to investigation and verification, and may be required to undergo a State and national criminal history background investigation, which will include a fingerprint check, to determine suitability for appointment. Failure to meet the standards for the background investigation may result in disqualification and/or dismissal.

**SIGNATURE OF APPLICANT:**

**DATE:**

**DO NOT WRITE BELOW - FOR CIVIL SERVICE USE**

<input type="checkbox"/> APPROVED _____	<input type="checkbox"/> RESTRICTED _____	
<input type="checkbox"/> DISAPPROVED _____		
<input type="checkbox"/> VETERAN'S CREDITS _____	POINTS _____	

**If mailed and being paid by credit card must include: (\*Print Clearly)**

\*Card No. \_\_\_\_\_

\*Exp Date \_\_\_\_\_

\*3 - digit Code \_\_\_\_\_

\*Signature \_\_\_\_\_

**If you have any questions regarding this application or any other matter pertaining to the Police Officer Exam, Please call (914) 422-1257 Monday-Friday 9am-5pm.**

**CITIZENSHIP:** Are you a United States Citizen?  YES  NO

**DATE OF BIRTH:** For compliance with age requirements set forth in exam announcement. (Example: MONTH: 09 DAY: 10 YEAR: 1988)

MONTH:			DAY:			YEAR:				
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**EDUCATION:** See Announcement for Acceptable HS Diplomas.  
Do you have one of the following? **CHECK ONE/PROVIDE INFO:**

- Yes H.S. DIPLOMA School: \_\_\_\_\_ Location: \_\_\_\_\_ Country: \_\_\_\_\_
- Yes GED or TASC Issued By: \_\_\_\_\_ Document Number: \_\_\_\_\_
- Yes US COMMONWEALTH TERRITORY, POSSESSION or CANAL ZONE Location: \_\_\_\_\_
- Yes US ARMED FORCES GED CERTIFICATE Document Number: \_\_\_\_\_

### SERVICE IN ARMED FORCES

ATTACH A COPY OF DD214 OR PROOF OF ACTIVE DUTY STATUS SUCH AS MILITARY ID, ORDERS OR OTHER OFFICIAL MILITARY DOCUMENT

- SECTION 1 -**
- 1) Have you ever served in the armed forces of the U.S.?  Yes  No
- 2) I wish to claim War Time Veterans Credits on this exam?  Yes (If Yes, complete Section 2 below)  No

**SECTION 2 -** War Time Veterans and Veterans with disability are eligible for extra credits added to their exam score if they pass. For non-disabled, these extra credits can be used only once for any permanent government employment in New York State. If you want to have the extra credits added to your exam score, you should answer the questions below. You can waive the extra credits later, if you wish.

- 1) Have you ever used veteran's credit for appointment to a position in NY State or Local Government employment since January 1, 1951?  Yes  No
- 2) Date of entry into active service: \_\_\_\_\_ Date of discharge: \_\_\_\_\_
- Yes  No I received, or expect to receive, an HONORABLE discharge or release under HONORABLE circumstances from the Armed Forces of the United States. (The Armed Forces of the United States means the Army, Navy, Marine Corps, Air Force and Coast Guard, including all components thereof, and the National Guard when in the service of the United States pursuant to call as provided by law on a full-time active duty other than active duty for training purposes.)
- Yes  No I served, or am serving on an active duty basis (other than for training purposes) during a determined time of war, conflict or hostile action.
- 3) Have you ever received a discharge from US armed forces which was other than honorable?  Yes  No  
(A dishonorable discharge is not an automatic bar to employment. Each case is considered on its individual merits. Give full particulars on an additional sheet.)

### SECTION 3 - VETERAN WITH DISABILITY: TO CLAIM ADDITIONAL CREDITS CHECK THE BOX BELOW

- You must provide certification by the U.S. Dept. of Veterans Affairs stating that you are a veteran who was disabled in the actual performance of duty in any war; that the disability is rated at 10 percent or more; and that the disability exists at the time of application for appointment or promotion.

### CROSS FILERS

For exam date: \_\_\_\_\_, list all **other** exam numbers, titles and agencies for which you have also applied:

Exam #	Exam Title	Government Agency

Government agency where you would prefer to take the above examinations: \_\_\_\_\_ You must notify each of the above.

### RECRUITMENT QUESTIONNAIRE

This confidential and voluntary reply will be used in our efforts to recruit minority and female candidates and to evaluate our recruitment and test processes. It will in no way affect your participation in this or future civil service examinations. (PLEASE PRINT)

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_
2. Gender: Male  Female
3. Ethnic Group: (**Please check one**) African American/ Black  American Indian/ Alaskan Native  Asian  Caucasian/ White   
Hispanic/ Latino  Native Hawaiian/ Pacific Islander  Two or more races (Non Hispanic)

### FOR OFFICE USE ONLY

RECEIPT #: \_\_\_\_\_ Application accepted by: \_\_\_\_\_  IN PERSON  BY MAIL

- Payment Info:**  Appropriate fee amount (\$50)  Candidate's name, exam title & number is clearly printed on payment
- Attachment Info:**  Special Testing #10 (If yes, attachment needed)  Questions 11-14 completed (If yes, attachment needed)

Method of Payment: Check/MO Credit Card Fee Waiver

Application entered by: \_\_\_\_\_ Missing info ltr sent on: \_\_\_\_\_ by: \_\_\_\_\_ Special testing ltr on: \_\_\_\_\_ by: \_\_\_\_\_  
Initials Date Initials Date Initials