PLEASE POST CONSPICUOUSLY

LACKAWANNA CIVIL SERVICE COMMISSION

Ralph Galanti
Commissioner

Sharon Beres, Secretary
John Kuryak, Chairperson

Jeff DePasquale
Commissioner

CITY OF LACKAWANNA

EXAMINATION OPEN TO THE PUBLIC

FIREFIGHTER

Exam No. 60062-940

$25.00 Filing Fee
PAY TO: CITY OF LACKAWANNA
MEMO: FIREFIGHTER 60062-940
NO CASH - Check or Money Order Only

Open Competitive examination #60062-940, **FIREFIGHTER**, City of Lackawanna, Department of Public Safety, Fire Division.
Eligible List will be established to fill any future vacancies as they occur. Starting Salary: $41,000-$75,614.20*

*Salary information provided is based on contract in effect, at time of announcement. All salaries will be based on the contract in effect at time of hire and can be confirmed during offer of employment. Upon graduating from the training academy, salary increases. Currently, post training academy salary is $59,730.01 and increases yearly for first 4 years.

EXAMINATION DATE	LAST DATE FOR FILING APPLICATION
January 9, 2027	**November 20, 2026**

COMPLETED APPLICATIONS WITH PAYMENT MUST BE
POSTMARKED ON OR BEFORE FRIDAY NOVEMBER 20, 2026
– OR -
RECEVIED IN THE LOCKBOX OUTSIDE THE CIVIL SERVICE OFFICE, ROOM 107
ON OR BEFORE FRIDAY NOVEMBER 20, 2026 BY 4PM EST

RESIDENCY REQUIREMENT: Candidates must be legal residents of Erie, Niagara, Genesee, Wyoming, Cattaraugus, or Chautauqua County at time of application. **City of Lackawanna, The Code, §31-17 requires new employees to reside in the City of Lackawanna within six (6) months of appointment. During the time of service of such employees, no individual shall cease to be a resident of The City of Lackawanna.**

Preference in certification may be given to successful candidates who are legal residents of the City of Lackawanna at the time of examination and for at least four (4) months immediately preceding the date of the examination. A candidate's residency may be investigated and verified prior to appointment.

MINIMUM QUALIFICATIONS: Graduation from a standard high school, or possession of a New York State high school equivalency diploma, or comparable diploma as described in Section 58 of the Civil Service Law.

SPECIAL REQUIREMENTS:

Citizenship: United States Citizenship is required at time of appointment. It is not necessary for admission to the examination.

Age: Candidates must be at least 19 years of age on or before examination date to be admitted to the written test. Eligibility for appointment as a Firefighter begins when the candidate reaches age 20.

Driver's License: Candidates must possess a valid New York State Operator's license at time of appointment and must maintain it throughout employment.

Fire Service Training: Within 18 months of employment, The NYS Certified Basic Firefighting Course must be completed.

EMT Certificate: Within 12 months of obtaining Firefighter certification (graduating from the Fire Academy) Emergency Medical Technician certification must be obtained and maintained throughout employment.

CONVICTION OF A FELONY WILL BAR, AND CONVICTION OF A MISDEMEANER OR OTHER OFFENSE MAY BAR PARTICIPATION IN EXAMINATION.

GENERAL STATEMENT OF DUTIES: Performs fire prevention and firefighting duties; does related work as required.

DISTINGUISHING FEATURES OF THE CLASS: This position exists in the City Fire Department and involves responsibility for responding to fire and similar emergency calls in the performance of duties. An employee in this class is expected to take prompt effective action to protect life and property. Duties may involve entering burning buildings to evacuate occupants and suppress fire by any means available. The work is performed under direct supervision of a higher-ranking member of the City Fire Department in conformance with departmental rules and regulations. Routine maintenance and custodian work on station and equipment is also performed when not engaged in either fire inspection or firefighting. The incumbent does related work as required.

SUBJECTS OF EXAMINATION:

1. Ability to learn and apply information
2. Basic arithmetic
3. Reading comprehension
4. Situational judgement

SEE EXPANDED SCOPE STATEMENT ATTACHED

Test guide: A Guide for the Written Test for Firefighter 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 request copy of the test guide from the municipal civil service office conducting this examination using the contact information found elsewhere on this announcement.

THE USE OF CALCULATORS IS RECOMMENDED FOR THIS EXAMINATION.

Notice to Candidates: Unless otherwise notified, candidates are permitted to use quiet, hand-held solar or battery powered calculators. Devices with typewriter keyboards, spell checkers, personal digital assistants, address books, language translators, dictionaries, or any similar devices are prohibited. Use of books and other reference material is prohibited.

CANDIDATES WHO PASS THE WRITTEN TEST WILL BE REQUIRED TO PASS A QUALIFYING PHYSICAL FITNESS TEST AND CANDIDATES WHO ARE OFFERED EMPLOYMENT OFF THE ELIGIBLE LIST ESTABLISHED AS A RESULT OF THIS WRITTEN TEST, WILL BE REQUIRED TO PASS A PSYCHOLOGICIAL EXAM AND A QUALIFYING MEDICAL EXAMINATION WHICH WILL INCLUDE DRUG SCREENING.

QUALIFYING PHYSICAL FITNESS TEST: The three elements measured in the qualifying physical fitness test are muscular endurance, absolute strength and cardiovascular capacity. The following is a brief description of the physical fitness test.

1. **Core Muscular Endurance (Sit-Up)**
   This test measures core muscular endurance. The requirement is for a number of bent-leg sit-ups to be performed in one minute.

2. **Upper Body Muscular Endurance (Push-Up)**
   This test measures muscular endurance of the upper body (anterior deltoid, pectoralis major and triceps). The requirement is for a number of full body repetitions that a candidate must complete without breaks.

3. **Cardiovascular Activity (Run)**
   1.5 mile run; the requirement is for the attainment of a score calculated in minutes and seconds.

The Lackawanna Civil Service Commission uses the physical fitness-screening test adopted by Municipal Police Training Council which is based on the model formulated by the Cooper Institute of Aerobics Research. The minimum passing scores, depending on age and sex, represent the fortieth (40^{th}) percentile of physical fitness as established by the Cooper Institute.

Pursuant to the Civil Service Meeting Item 4b, held May 31, 2024 you will be allowed two (2) opportunities, and only two (2) opportunities, to pass the Physical Agility Examination. Candidates will be mailed two (2) admission notices for a first opportunity attempt and a second opportunity attempt. Candidates that pass the exam on the first attempt should not attend the second opportunity date.

If the candidate shows up on the first available date indicated, and fails to bring the required documentation, this will be marked as "INCOMPLETE FIRST ATTEMPT". If the candidate shows up on the first available date indicated and fails any portion of the physical agility exam, this will be marked as "INCOMPLETE FIRST ATTEMPT". If the candidate does not appear for the first attempt, this will be marked "INCOMPLETE FIRST ATTEMPT" If the candidate is not able to attend the first attempt due to a scheduling issue, this will be marked as "INCOMPLETE FIRST ATTEMPT". The candidate is permitted to attend the second indicated date and participate in the second and final retake attempt of the Physical Agility Exam. If the candidate shows up on the second available date indicated, and fails to bring the required documentation, this will be marked as "FAIL". If the candidate shows up on the second available date indicated and fails any portion of the complete physical agility exam, this will be marked as "FAIL". If the candidate does not appear for the second attempt, this will be marked "FAIL". If the candidate is not able to attend the second attempt due to a scheduling issue,

this will be marked as "FAIL". Candidates must complete all 3 fitness standards and procedures according to their age and gender, based on the exam date, in a single attempt, to remain active on the eligible list and be eligible to continue with employment investigations. FAILURE ON ANY PART OF THE QUALIFYING TEST WILL REMOVE YOUR NAME FROM FURTHER CONSIDERATION FOR APPOINTMENT. Your name will not be certified from the eligible list until you have successfully qualified on the Agility portion. Physical Fitness testing is scheduled based on the need of the hiring authority. If you are scheduled to appear, you must contact the Lackawanna Civil Service Commission in writing if you are not able to appear. Failure to notify our office will result in the removal of your name from the Eligible list.

Copies of the physical fitness and medical standards are available upon request from the Lackawanna Civil Service Commission.

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

Background Investigation: Applicants will be required to undergo a State and national criminal history background investigation, to determine suitability for appointment. Failure to meet the standards for the background investigation may result in disqualification.

Psychological Investigation: Candidates will be required to participate in a psychological evaluation to determine fitness to perform essential duties for the position of Firefighter. Failure to meet the standards may result in your offer of employment being rescinded or in your disqualification. Eligible candidates will be called for psychological assessments as needed, to fill existing or anticipated vacancies.

New Hire Physical/Drug Screen: All newly hired city employees, as a condition of employment, shall agree and consent in writing to the city's right to the employees' present and past medical history and to submit to a physical examination and drug/alcohol testing by a physician designated by the city, who shall evaluate his/her/their health qualifications. All new employees must consent to submit to drug and alcohol testing at any time, at the request of the employee's supervisor, while the employee is on a "probationary basis." Any illegal controlled substance or alcohol abuse discovered during testing subjects the employee to immediate termination.

Saturday Religious Observer: Most written tests are held on Saturdays, if you cannot take the test on the announced test date due to a conflict with religious observances or practice, indicate this on your application. We will make arrangements for you to take the test on a different date.

Persons with Disabilities: If special arrangements are required for testing, indicate this on your application. Candidates requesting an accommodation are required to furnish documentation of the disabling condition no later than Friday December 11th, 2026. Failure to do so may not give the agency enough time to prepare, and may lead to standard testing conditions.

Military Service Members: If you apply for an examination during the filing period but are on active military duty on the date the examination is scheduled, you may request a military makeup examination. Contact the Lackawanna Civil Service Commission for more information. If you are on active duty or discharged after the filing period has begun, you may apply for the examination up to ten days before the test date. Candidates will be required to submit a copy of a DD-214 or military orders to substantiate active-duty status during test date AND certify they have no prior knowledge of the contents of the examination.

Veterans: Disabled and Non-disabled veterans as defined in Sec. 85 New York State Civil Service Law, will have 10 and 5 points respectively added to an earned passing score on the exam. You should claim these credits when you file your application (file application for veteran's credits and present a copy of DD214 Military Discharge) but you have the option to waive the credits any time prior to appointment. If you have already used these credits you may not use them again. **Special Notice to Active-Duty Members of the Armed Forces:** Effective 1/1/98 the State Constitution was amended to permit a candidate currently in the armed forces to apply for and be conditionally granted veteran's credit in examinations. Any candidate who applies for such credit must provide proof of military status to receive the conditional credit. No credit may be granted after the establishment of the list. It is the responsibility of the candidate to provide appropriate documentary proof indicating that the service was in time of war, as defined in Section 85 of the Civil Service Law, and that the candidate received an honorable discharge or was released under honorable conditions in order to be certified at a score including veteran's credits.

In accordance with Section 85-a of the Civil Service Law, children of firefighters and police officers killed in the line of duty shall be entitled to receive an additional ten points in a competitive examination for original appointment in the same municipality in which his or her parent has served. If you are qualified to participate in this examination and are a child of a firefighter or police officer killed in the line of duty in this municipality, 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.

Applying for Examinations in Multiple Jurisdictions on the Same Date: If you have applied for both State and local government examinations, you must notify the Lackawanna Civil Service Commission of your intent to take both a State and local government examination. When taking both a State and 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 examination.

If you have applied for other local government exams, you must call or write to each civil service agency to make arrangements. You must make your request for arrangements no later than 3 weeks before the exam date. You must notify all local civil service agencies with whom you have filed an application of the test site at which you want to take your exams.

Application Fee Waiver: A waiver of application fee will be allowed if you are unemployed and primarily responsible for the support of a household. In addition, a waiver of application fee will be allowed if you are determined eligible for Medicaid, or receiving Supplemental Security Income payments, or Public Assistance (Temporary Assistance for Needy Families/Family Assistance or Safety Net Assistance) or are certified Job Training Partnership Act/Workforce Investment Act eligible through a State or local social service agency. **All claims for application fee waiver are subject to verification. If you can verify eligibility for application fee waiver, complete a "Request for Application Fee Waiver and Certification" form and submit it with your application by the close of business on the Application Deadline as listed on the Examination Announcement.**

Provide Civil Service Commission in writing of any changes in address or telephone number as soon as possible. The form is available online: http://lackawannany.gov/government/civil-service/. Failure to do so may lead to disqualification. Notifying the Post Office to forward mail is NOT effective to ensure that notices for examinations or appointments will reach you. You may request the form by calling 716-827-6467 or emailing civilservice@lackny.com. RETURNED MAIL WILL RESULT IN THE REMOVAL OF YOUR NAME FROM THE ELIGIBLE LIST.

How to Apply: Application forms are available in the lobby of City Hall, 2838 SOUTH PARK AVENUE, LACKAWANNA, N.Y. 14218. They are also available outside the Lackawanna Civil Service Commission Office, City Hall Room 107, Lackawanna, N.Y. and online http://lackawannany.gov/government/civil-service/.

Submission by mail: Completed applications with payment must be **POSTMARKED ON OR BEFORE November 20, 2026**.

Submission In-person: Completed applications with payment must be **RECEIVED ON OR BEFORE November 20, 2026 – by @ 4 pm EST** in the Lackawanna Civil Service Commission Lockbox outside Room 107, CITY HALL, 2838 South Park Avenue, Lackawanna, N.Y. 14218.

Application Fee: NYS has mandated that a fee of $25 is required for each separately numbered examination for which you apply. The required fee must accompany your application. **Check or money order** payable to: City of Lackawanna MEMO: FIREFIGHTER 60062-940. **DO NOT SEND OR BRING CASH**. As no refund will be made, you are urged to compare your qualifications carefully with the requirements for admission and file only for those examinations for which you are clearly qualified.

ADMISSION TO EXAMINATION: Notice to appear for the test will be conditional, as review of application for minimum requirements may not be made until after the written test. Call or write this Commission if you have not received your notice 3 days before the date of the test. You may not be admitted to the examination room without official notice.

INCLEMENT WEATHER: If the exam is cancelled due to a local snow or weather-related emergency the voicemail for the Civil Service Office @ 716-827-6467 will have an explicit message confirming cancellation on the morning of the exam.

Publish: 10/21/2026
Applications with payment accepted: 10/21/2026-11/20/26 4PM EST or POSTMARKED by 11/20/2026

BY ORDER OF:

LACKAWANNA CIVIL SERVICE COMMISSION

EXPANDED SCOPE STATEMENT

1. ABILITY TO LEARN AND APPLY INFORMATION

These questions test for the ability to learn new information and apply it to answer questions effectively. Candidates will read information presented in a Training Lesson and then answer questions regarding the information and procedures covered in the Training Lesson. All information needed to answer the questions will be provided in the Training Lesson, and candidates will be able to refer to the Training Lesson when answering the questions. Some of the questions may require candidates to combine information from different portions of what has been learned in the Training Lesson. No prior knowledge of any specific job or subject matter is needed.

2. BASIC ARITHMETIC

This section requires candidates to use basic arithmetic (add, subtract, multiply, divide) to find a missing value in a table of numbers. Candidates will not need to refer to the Training Lesson or any other section of the test to answer the questions in this section. All information needed to answer each question will be contained in this section. No knowledge of firefighting or any other job is required. **Candidates should bring a hand-held battery- or solar-powered calculator for use on this test.** Candidates will **not** be permitted to use the **calculator** function on their **cell phone**.

3. READING COMPREHENSION

These questions test for the ability to understand written materials (e.g., sentences, passages) and answer questions about the information presented. Candidates will be provided with reading passages, followed by questions related to each passage. Each question will require candidates to demonstrate that they have read and understood the information contained in the passage.

4. SITUATIONAL JUDGEMENT

This section tests for the ability to identify appropriate and effective responses to work-related challenges. Candidates will be presented with several scenarios that reflect the types of challenges one could encounter in a work environment. They will then be asked to rate the effectiveness of a number of possible responses to each scenario.

Test guide: A Guide for the Written Test for **Firefighter** 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 request copy of the test guide from the municipal civil service office conducting this examination using the contact information found elsewhere on this announcement.

CITY OF LACKAWANNA APPLICATION FOR EXAMINATION OR EMPLOYMENT

Send Completed Application to:	Lackawanna Civil Service Commission City Hall Room 213 714 Ridge Rd. Lackawanna, NY 14218

NO. AND EXACT TITLE OF EXAMINATION OF POSITION APPLYING FOR

Exam Number	Title	Date of Exam

NOTE: A SEPARATE APPLICATION MUST BE COMPLETED FOR EACH EXAMINATION YOU WISH TO TAKE

This application is part of your examination. **Answer all questions fully and carefully.** Print in ink or use typewriter. Attach additional sheets if necessary in order to give complete and detailed information.

1. NAME, MAILING ADDRESS AND PHONE (Please Print)

Last Name First M.I.

Street Address

City or Post Office State Zip Code

Phone (include area code) Home Business

IMMEDIATE NOTICE SHOULD BE GIVEN OF ANY CHANGE IN ADDRESS BEFORE OR AFTER EXAMINATION

2. SOCIAL SECURITY NUMBER

___ ___

3. Are you 18 years of age or older ☐ Yes ☐ No
Birthday:

Mo._____Day_____Year_____

4. If your religion forbids you from taking this examination on a Saturday, please contact the Lackawanna Civil Service Commission.

5. If you require special arrangements as a handicapped person, please contact the Lackawanna Civil Service Commission.

6. If you are claiming Veterans/Disabled Veterans Credits please see page 4 of this application

7. Are you a citizen of the United States? ☐ Yes ☐ No

If you are not a citizen of the United Sates, do you have the legal right to accept employment in the United States

☐ Yes ☐ No

DO NOT WRITE IN THIS SPACE

Application #_____ Received _____

Check #_____ Approved _____

M.O. #_____ Disapproved _____

8. NON-REFUNDABLE PROCESSING FEE

CHECK ONE

☐ I have enclosed the fee

The fee will **NOT** be refunded if application is disapproved.

NO FEE IS DUE BECAUSE:
Subject to verification
(See Announcement)

☐ I am unemployed and primarily responsible for the support of a household

☐ I am receiving public assistance

9. Check the appropriate box to the right of each question

A. Were you ever dismissed or discharged from any employment for reasons other than lack of funds, disability or medical condition?	☐ Yes	☐ No
B. Did you ever resign from employment rather than face discharge?	☐ Yes	☐ No
C. Did you ever receive a Dishonorable Discharge from the armed forced of the United States?	☐ Yes	☐ No
D. Have you ever been convicted of any crime (Felony or Misdemeanor)?	☐ Yes	☐ No
E. Are you now under charges for any crime?	☐ Yes	☐ No

If you answered YES to any of these questions, provide details under REMARKS on page 4. Your failure to answer any of these questions or to provide details will significantly delay any determination concerning your qualifications and may deprive you of potential employment opportunities.

10. State your actual permanent legal residence and indicate for how long you have resided there continually, up to and including the date of this application.

I AM PRESENTLY A LEGAL RESIDENT OF:		**Years**	**Mos.**
City of			
Town of			
County of			
School Dist.			

Note: When filling out your application form, check to make sure that all appropriate questions have been answered. An incomplete application may result in disapproval.

ALL STATEMENTS ARE SUBJECT TO VERIFICATION

THIS AFFIRMATION MUST BE COMPLETED. I affirm that the statements made on this application (including any attached papers) are true under penalty of perjury. I understand that all statements made by me in connection with this application are subject to investigation and verification and that a material misstatement, omission or fraud may disqualify me from appointment and/or lead to revocation of my appointment

Signature of Applicant Date

Indicate any other name(s) under which you have been known that is necessary to verify former employment and/or education. (Please Print)

CITY OF LACKAWANNA APPLICATION FOR EXAMINATION OR EMPLOYMENT

11. EDUCATION:

Do you have a High School or Equivalency Diploma? ☐ Yes ☐ No	if YES, Name and location of High School or Issuing Governmental Authority:
If NO, circle highest grade completed: 6 7 8 9 10 11 12 Still Attending ☐	
I have a New York State High School Equivalency Diploma, Number: ☐ Copy Attached Date of Issue:	

IF REQUIRED, INDICATE ADVANCED EDUCATION HERE

If your eligibility for this position is based wholly or in part by college training, a verifying transcript must be submitted prior to appointment

☐ I have requested my college to send my transcript(s) directly to the Lackawanna Civil Service Commission

☐ My transcript(s) are attached ☐ My transcript(s) are already on file with the Lackawanna Civil Service Commission

	Name of School and City in which located	Dates of Attendance From To	Full or Part Time	No. of Years Credited	Did you graduate?	Type of Course or Major Subject	Number of Credits Received	Type of Degree	Date Degree Received or Expected
College University Professional or Technical School									
Other Schools or Special Courses									

12. LICENSE OR CERTIFICATION:
Complete the following if a license, certificate or other authorization to practice a trade or profession is required on the announcement(s).

Trade or Profession	**License Number**	**Date License First Issued**	**Registered: From Mo/Yr To Mo/Yr**	If you are not currently licensed check this box ☐
Specialty	**Granted by (Licensing Agency)**		**City, State**	

13. DRIVER'S LICENSE: Do you have a valid NYS Motor Vehicle License? ☐ Yes ☐ No If Yes, Class: _____

14. DESCRIBE YOUR EXPERIENCE:
Beginning with the most recent, describe below in detail **ALL EMPLOYMENT THAT IS PERTINENT TO THE POSITION APPLIED FOR.** If the examination announcement stated that volunteer or unpaid experience is acceptable as qualifying, describe it in the same way as paid work, showing its volunteer nature in the "Earnings" box. Relevant volunteer (unpaid experience will be considered if verified and fully documented. You are responsible for submitting an accurate, adequate and clear description of your experience. Omissions or vagueness will NOT be interpreted in your favor. If you have had military service which includes experience pertinent to the position, describe such experience as a separate employment. If your title or duties changed materially in the course of your service in any one organization, indicate such change clearly and as separate employment, (If more space is needed, attach an 8 ½ x 11 sheet (s) of paper(s).
UNDER "DUTIES" FOR EACH EMPLOYMENT, DESCRIBE THE NATURE OF WORK PERSONALLY PERFORMED BY YOU WITH ESTIMATED PERCENTAGE OF TIME SPENT ON EACH TYPE OF WORK. STATE SIZE AND KIND OF WORKING FORCE, IF ANY, SUPERVISED BY YOU AND THE EXTENT OF SUCH SUPERVISION (DIRECT, INDIRECT; FULL-TIME, OCCASIONAL)

Length of Employment Mo Yr Mo Yr **From** / **To** /	Firm Name/Type of Business	Address	City and State
Earnings (circle one)			
$ **wk/mo/yr**			
Your Exact Title			
Name of Supervisor			
Supervisor's Title			
No. of Hrs. Worked Per Wk. (Exclusive of Overtime):			

CITY OF LACKAWANNA APPLICATION FOR EXAMINATION OR EMPLOYMENT

Length of Employment Mo Yr Mo Yr From / To /	Firm Name/Type of Business	Address	City and State
Earnings (circle one) $ wk/mo/yr			
Your Exact Title			
Name of Supervisor			
Supervisor's Title			
No. of Hrs. Worked Per Wk. (Exclusive of Overtime):			

Length of Employment Mo Yr Mo Yr From / To /	Firm Name/Type of Business	Address	City and State
Earnings (circle one) $ wk/mo/yr			
Your Exact Title			
Name of Supervisor			
Supervisor's Title			
No. of Hrs. Worked Per Wk. (Exclusive of Overtime):			

Length of Employment Mo Yr Mo Yr From / To /	Firm Name/Type of Business	Address	City and State
Earnings (circle one) $ wk/mo/yr			
Your Exact Title			
Name of Supervisor			
Supervisor's Title			
No. of Hrs. Worked Per Wk. (Exclusive of Overtime):			

CITY OF LACKAWANNA APPLICATION FOR EXAMINATION OR EMPLOYMENT

VETERANS INSTRUCTIONS AND INFORMATION

Answering the following questions means that you are requesting extra credits. Do not answer the questions if you are not a war time active duty member of the armed forces or a War Time veteran or if you do not want to request the extra credits. If you are currently in the Armed Forces on full-time active duty (other than for training) or if you are a War Time Veteran or Disabled Veteran, you are eligible for extra credits added to your exam score if you pass. These extra credits can be used only once for any permanent government employment in New York State. If you want to have these extra credits added to your exam score you must answer the questions now. You can waive the extra credits later if you wish. You must submit documentation, such as discharge papers (DD214), to prove that you are eligible for the extra credits. If you are claiming credits as a disabled war veteran, you must submit written documentation certified by the Veterans Administration as being entitled to receive payments for a service-connected disability rated at ten (10) percent or more, incurred during a "Time of War". Effective January 1, 1998, the State Constitution was amended to permit a candidate currently in the armed forces to apply for and be "conditionally granted" veteran's credit in examinations. Any candidate who applies for such credit must provide proof of military status to receive the conditional credit. These credits are granted on the following basis:

DISABLED VETERANS:	10 points for Open-Competitive Exams
	5 points for Promotional Exams
NON-DISABLED VETERANS:	5 points for Open-Competitive Exams
	2.5 points for Promotional Exams

These additional credits, which are combined with the final score obtained in the examination, may be granted to PASSING CANDIDATES at the time of the establishment of the eligible list. Candidates are permitted a minimum period of 60 days from the last filing date to submit veterans credits forms for a particular examination. These forms will be accepted until such time as the eligible list is established. **It is the responsibility of the candidate to insure that all required forms are filed timely.**

All of your answers must be "Yes" to claim additional credits.

☐ Yes ☐ No Have you served in the Armed Forces of the USA?

Dates of active service From_____To_____

(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 basis other than active duty for training purposes.

☐ Yes ☐ No I am now serving, or have served, on an active duty basis other than active duty for training purposes during one or more of the following Time of War periods:

In the Armed Forces:

August 2, 1990 to the date when the Persian Gulf hostilities ends
February 28, 1961 to May 7, 1975
June 27, 1950 to January 31, 1955
December 7, 1941 to December 31, 1946

Or earned the armed forces, navy or marine corps expeditionary medal for service in:

(Panama) December 20, 2989 to January 31, 1990
(Lebanon) June 1, 1983 to December 1, 1987
(Grenada) October 23, 1983 to November 21, 1983

Or in the U.S. Public Health Service:

June 26, 1950 to July 3, 1952
July 29, 1945 to September 2, 1945

☐ Yes ☐ No I am a United States citizen or an alien lawfully admitted for permanent residence.

☐ Yes ☐ No I am a New York State resident.

To claim additional credits as a Disabled Veteran, you must also answer "Yes" to this question.

☐ Yes ☐ No I am currently receiving payments from the U.S. Dept. of Veterans Affairs for a service-connected disability rated at 10% or more incurred during a "Time of War" period listed above.

Have you attached a copy of your separation papers to this application? ☐ Yes ☐ No

Have you previously used veteran's credits to receive permanent competitive class appointment in the service of the State of New York or any civil division within the State of New York? ☐ Yes ☐ No

Government Name _____ Length of Employment From_____To_____

Department _____ Your Official Title_____

THE NEW YORK STATE HUMAN RIGHTS LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT BECAUSE OF AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, OR CRIMINAL RECORD. ACCORDINGLY, NOTHING IN THIS APPLICATION FORM SHOULD BE VIEWED AS EXPRESSING, DIRECTLY OR INDIRECTLY, ANY LIMITATION, SPECIFICATION, OR DISCRIMINATION AS TO AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, OR CRIMINAL RECORD IN CONNECTION WITH EMPLOYMENT.

REMARKS

ALL STATEMENTS ARE SUBJECT TO VERIFICATION