

CLINTON COUNTY APPLICATION FOR PROMOTIONAL EXAMINATION

NAME: _____ EXAM TITLE: _____

STREET ADDRESS: _____ EXAM #: _____

CITY/STATE/ZIP: _____ SOCIAL SECURITY #: _____

Would you like to claim War Time Veterans Credits for this exam? YES NO If YES, you MUST complete an Application for Veterans' Credits.

Section 50-b of the NYS Civil Service Law requires that ALL APPLICANTS for exam be asked the following: Have you any loans guaranteed by the NYS Higher Education Services Corp. which are currently outstanding? YES NO

If YES, are you presently in default on any such loans? YES NO

If you need special arrangements in order to participate in this exam, you must notify this agency by **EITHER** indicating the special arrangements you require below **OR** writing to the Clinton County Department of Personnel, 137 Margaret St., Plattsburgh, NY 12901, no later than the last date of filing for this exam. Your request must include exam title and number and the type of special arrangements required. If your request involves a medical condition, provide documentation from your physician explaining the need for your request.

THE FILING FEE OF \$12.50 (CHECK OR MONEY ORDER MADE OUT TO THE CLINTON COUNTY TREASURER) WILL NOT BE REFUNDED IF YOUR APPLICATION IS DISAPPROVED.

SIGNATURE

DATE

FOR CIVIL SERVICE USE ONLY:

FEE: PAID WAIVED RECEIPT # _____ RECEIVED BY: _____ DATE RECEIVED: _____

APPROVED CONDITIONAL DISAPPROVED