Application Fee Waiver Request and Certification Form

Civil Service Law Section 50.5(b): "...fees shall be waived for candidates who certify to the state civil service department, a municipal commission or regional commission that they are unemployed and primarily responsible for the support of a household, or are receiving public assistance."

I request that my application fee(s) for the examination(s) listed below be waived in accordance with Section 50.5(b) of the State Civil Service Law.

Examina	ation Title(s)	Exam No(s	s). Examination Test Da
Check th	ne box(es) below that apply to	you:	
NOTE	E: Individuals who can be cla	nimed as a	esponsible for support of a household dependent on any other person's tax vaiver as head of household.
l am d	currently:		
	Eligible for Medicaid		
	Receiving Supplemental Sec	curity Income	e (SSI) payments
	Receiving Public Assistance Assistance or Safety Net Ass	• •	Assistance for Needy Families/Family
			Enter Public Assistance Case Number
	Certified Job Training Partne State or local social service a	•	orkforce Investment Act eligible through
*****	·***************************	ffirmation**	*********
on fees and and that my	d certify that I am qualified to claim for application fee wai	receive sud ver may be	Service Law relating to the waiver of th waiver for the reasons indicated about investigated and I may be disqualified tement regarding my eligibility for appl
Candidat	e's First and Last Name (Ple	ase Print)	Candidate's Social Security Number
Candidate's Signature			