SENECA COUNTY

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.

Examination Title(s)			Exam No(s).	Examination Test Date	
Check	the box(es) below that apply to you:			
	I am currently unemployed and I am primarily responsible for support of a household				
	Note: Individuals who can be claimed as a dependent on any other person's tax return <u>ARE NOT</u> eligible for application fee waiver as head of household.				
	l am cu	m currently:			
		Eligible for Medicaid			
		Receiving Supplemental Security Income (SSI) payments			
		Receiving Public Assistance (Temporary or Safety Net Assistance):	Assistance for Needy Fa	milies/Family Assistance	
		Certified Job Training Partnership Act/V or local social service agency	Vorkforce Investment Ac	t eligible through a State	

AFFIRMATION

I have read the above portion of Section 50.5(b) of the Civil Service Law relating to the waiver of application fees and certify that I am qualified to receive such waiver for the reasons indicated above. I understand that my claim for application fee waiver may be investigated and I may be disqualified from the listed civil service examination(s) if I make any false statement regarding my eligibility for application fee waiver.

Candidate's First and Last Name (Please print)

Candidate's Social Security No.

Candidate's Signature

Date