

**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.**

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
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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 ARE NOT eligible for application fee waiver as head of household.

I am currently:

Eligible for Medicaid

Receiving Supplemental Security Income (SSI) payments

Receiving Public Assistance (Temporary Assistance for Needy Families/Family Assistance or Safety Net Assistance):

Enter Public Assistance Case Number \_\_\_\_\_

Certified Job Training Partnership Act/Workforce Investment Act eligible through a State or local social service agency

\*\*\*\*\***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 Number

\_\_\_\_\_  
Candidate’s Signature

\_\_\_\_\_  
Date