

HUMAN CAPITAL
Application Processing Unit
1 Centre Street, 14th Floor
New York, New York 10007

SPECIAL CIRCUMSTANCES
DIRECTIONS FOR COMPLETING APPLICATION FOR EXAMINATION FORM

Note: These directions are designed to assist you in completing *section 17* on the APPLICATION FOR EXAMINATION form and to inform you how to notify this Department of a CHANGE OF ADDRESS.

(A) RELIGIOUS OBSERVANCE:

Please be advised that requests for an alternate test date because of a religious observance must be received at least fifteen (15) days before the testing is expected to begin. Accordingly, if you are unable to attend on one of the test dates listed on the Notice of Examination because of religious observance, you must notify DCAS of the potential conflict at least fifteen (15) days before the first listed test date. Please do not wait to submit the notification until you have been assigned a test date. The request must include:

- your full name
- your social security number
- the exam number
- the exam title
- signed statement on letterhead from your religious leader certifying that your religious observance prohibits you from taking the test on the scheduled date.

To submit the above information, you may appear in person, or you may email, fax, or write to:

Address: DCAS Test Administration Unit, 1 Centre Street, 14th Floor, Room 1448, New York, NY 10007
 Email: testingaccommodations@dcas.nyc.gov / Fax: (212) 313-3241

NOTE: DO NOT INCLUDE YOUR RELIGIOUS OBSERVANCE DOCUMENTATION WITH YOUR COMPLETED APPLICATION FORM(S).

(B) DISABILITY:

If you have a disability which will interfere with your ability to take this test without special accommodation(s) or other assistance, you must submit a written request for specific special accommodation(s) either in person or by mail (postmarked) no later than **30 days** before the test date. For some tests, this deadline may vary. Please read the Notice of Examination. The request must include:

- your full name
- your social security number
- the exam number
- the exam title
- the specific nature of your disability
- a justification for the special accommodations
- a statement corroborating your disability by a doctor or agency authorized for this purpose

To submit the above information, you may appear in person, or you may email, fax, or write to:

Address: DCAS Test Administration Unit, 1 Centre Street, 14th Floor, Room 1448, New York, NY 10007
 Email: testingaccommodations@dcas.nyc.gov / Fax: (212) 313-3241

NOTE: DO NOT INCLUDE YOUR SPECIAL ACCOMMODATION DOCUMENTATION WITH YOUR COMPLETED APPLICATION FORM(S).

If you have a temporary disability, pregnancy-related, or child-birth-related condition which prevents you from taking the exam on the date that it is scheduled, you may request a make-up exam by submitting a request to the address listed above, either in person or by mail (postmarked), no later than one week following close of the application period, or, if the temporary disability, pregnancy-related, or child-birth-related condition arises after that date, then within one week following the occurrence. In addition to the information specified above, the request must include original medical documentation signed by an appropriate, licensed doctor specifying 1) the nature of the condition, 2) the duration of the condition, 3) the functional limitations of the condition, and 4) why the condition prevents you from taking the exam as scheduled. Where appropriate and practicable, the Department of Citywide Administrative Services may provide an alternative form of accommodation, such as an alternative exam site.

(C) VETERANS:

For Veterans' or Disabled Veterans' Credit you must meet the following requirements by the date of appointment or promotion:

- a. Be a resident of New York State; **and**
- b. Be a United States citizen or an alien lawfully admitted for permanent residency; **and**
- c. Received an honorable discharge or release under honorable conditions from the Armed Forces of the United States. 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; **and**
- d. Have served on full-time active duty, other than active duty for training, in at least one of the following Time of War periods below:

Armed Forces of the United States during:

- World War II (December 7, 1941 - December 31, 1946); **or**
- Korean Conflict (June 27, 1950 - January 31, 1955); **or**
- Vietnam Conflict (February 28, 1961 - May 7, 1975); **or**
- Persian Gulf Conflict (August 2, 1990 - to be determined)

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You must have received the armed forces expeditionary medal, navy expeditionary medal, or the marine corps expeditionary medal for:

- Hostilities in Lebanon (June 1, 1983 - December 1, 1987); **or**
- Hostilities in Grenada (October 23, 1983 - November 21, 1983); **or**
- Hostilities in Panama (December 20, 1989 - January 31, 1990).

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(C) VETERANS: CONTINUATION

For Disabled Veterans' Credit, in addition to a, b, c, and d, at the time the list is established, you must have been found to have a service connected disability incurred in a Time of War period listed on the previous page, which has been rated at least 10 percent by the U.S. Department of Veterans Affairs (V.A.). If the V.A. has not certified the disability as permanent, it must have been rated at least 10 percent by a V.A. physician no more than one year prior to the date of filing your application or the date of establishment of the eligible list.

Veterans' or Disabled Veterans' Credit should be requested at the time of application, but **must** be requested before the date the eligible list is established. If a candidate requests Veterans' or Disabled Veterans' Credit after an application for an exam has been submitted, the candidate must appear in person or write a letter indicating the candidate's name, address, social security number, and the open-competitive or promotion exam title and number. The letter must be addressed to **DCAS Exam Support Group, 1 Centre Street, 14th Floor, New York, New York 10007**. Claims for Veterans' or Disabled Veterans' Credit cannot be made once the eligible list is established. All claims for Veterans' or Disabled Veterans' Credit will be investigated and you will be required to produce documentation, such as discharge papers, to prove that you are eligible for the credit.

- Note:**
1. You may use Veterans' or Disabled Veterans' Credit only once after January 1, 1951 for appointment or promotion from a City, State, or County civil service list from a jurisdiction within the State of New York.
 2. Veterans' or Disabled Veterans' credit will be added only to the final score of those candidates who pass all parts of the examination.
 3. The above is only a summary of necessary conditions. The complete provisions are contained in statutory and/or decisional law.

(D) LEGACY CREDIT (For Open-Competitive Examinations Only):

Ten points can be added to the open-competitive exam score of a candidate whose parent or sibling, while serving in New York City as a firefighter, police officer, emergency medical technician, or paramedic, died in the line of duty, including as a result of the September 11, 2001 World Trade Center attack or participation in the rescue effort that took place in response to the attack.

A candidate can receive Legacy Credit for no more than one parent or one sibling. A candidate can, however, receive Legacy Credit for both a parent and a sibling, in which case, the candidate may be entitled to 20 points. Legacy Credit should be requested at the time of application, but **must** be requested before the date the eligible list is established. If a candidate requests Legacy Credit after an application for an exam has been submitted, the candidate must appear in person or write a letter indicating the candidate's name, address, social security number, the open-competitive exam title and number for which Legacy Credit is sought, and whether the request is for Parent Legacy Credit, Sibling Legacy Credit, or both. The letter must be addressed to **DCAS Exam Support Group, 1 Centre Street, 14th Floor, New York, New York 10007**. Claims for Legacy Credit cannot be made once the eligible list is established. All candidates making such claims will be required to present to the hiring agency prior to appointment documentation verifying their claim. All claims for Parent or Sibling Legacy Credit will be investigated.

- Note:**
1. You may use Legacy Credit only once for appointment from a City, State, or County open-competitive civil service eligible list from a jurisdiction within the State of New York.
 2. Legacy Credit will be added only to the final score of those candidates who pass all parts of the open-competitive examination.
 3. The above description of Legacy Credit is only a summary of necessary conditions. The complete provisions are contained in the relevant statutory and/or decisional laws governing Parent and Sibling Legacy Credit.

(E) CHANGE OF ADDRESS:

If your mailing address changes after you file for an exam and the eligible list has **not** been established, you must submit a [Data Correction Form](#). The Data Correction Form can be printed and then submitted with the appropriate documentation by email (OASys@dcas.nyc.gov), fax (212-669-4732), mail (Application Processing Group – 1 Centre Street, 14th Floor, New York, NY 10007), or in person at the same address (Monday to Friday 9AM to 5PM).

If your mailing address changes after you file for an exam and the eligible list **has** been established, you must submit a [Data Correction Form](#). The Data Correction Form can be printed and then submitted to:

NYC DCAS
1 Centre Street, 21st Floor – Room 2150 South
New York, New York 10007
Attention: Certification Unit

Please note, you may also request a change of address by coming to the reception area at DCAS in Room 2150 South at 1 Centre Street in lower Manhattan and completing a change of address form. Your completed Data Correction Form will result in a change of address for every eligible list on which your name appears.

Download this form on-line at www.nyc.gov/dcas
For automated information, call (212) 669-1357