

# POLICE OR FIRE EXAM APPLICATION FEE STATEMENT

APPLICATION FEE: \$25.00

**ONLY APPLICATIONS WITH PAYMENTS RECEIVED OR SIGNED FEE WAIVERS WILL BE REVIEWED.**

**PAYMENT DUE DATE:**

1. **ANNOUNCED EXAMS** - Fee or waiver due at time of application; **NO FEES OR WAIVERS** WILL BE ACCEPTED **AFTER DEADLINE** DATE FOR APPLICATIONS.
2. **UNANNOUNCED EXAMS** - Fee or waiver is due upon date specified in written notice which will be mailed to candidates.

THERE WILL BE NO REFUND OF FEES IF YOU DO NOT QUALIFY FOR AN EXAM OR IF YOU FAIL TO APPEAR FOR THE EXAMINATION.

**TO PAY BY MAIL:**

COMPLETE THE **BOTTOM SECTION ② OF THIS STATEMENT** AND MAIL ALONG WITH YOUR EXAM APPLICATION AND A CHECK OR MONEY ORDER TO THE ADDRESS BELOW. MAKE CHECK OR MONEY ORDER PAYABLE TO **CITY TREASURER (NO CASH)**.

CIVIL SERVICE EXAM ADMINISTRATION  
CITY HALL, ROOM 103-A  
30 CHURCH STREET  
ROCHESTER, NY 14614-1280

Payment Verification

**TO PAY IN PERSON:** PLEASE COMPLETE **BOTH** SECTIONS 1 & 2 AND TAKE with CASH, CHECK, OR MONEY ORDER TO THE CASHIER'S OFFICE ON THE MAIN FLOOR OF CITY HALL BEFORE 4:00 PM on the application deadline date stated on the exam announcement. Take **this verified paid statement WITH the APPLICATION** to Room 103A, City Hall, 30 Church Street, Rochester, New York.

① EXAM TITLE: \_\_\_\_\_  
EXAM#: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
SS#: \_\_\_\_\_

(DETACH HERE)

PLEASE PRINT!!

**\$25.00**

② EXAM TITLE: \_\_\_\_\_  
EXAM #: \_\_\_\_\_  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
SS#: \_\_\_\_\_

**CITY OF ROCHESTER - BUREAU OF HUMAN RESOURCE MANAGEMENT**

**EXAM 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 for the examination listed below be waived in accordance with Section 50.5(b) of the State Civil Service Law.**

<u>Examination Title</u>	<u>Exam No</u>	<u>Examination Test Date</u>
_____	_____	_____

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 Workforce Investment Act (WIA) eligible through a State or local social service agency (such as Rochesterworks! or B.E.S.T.)

\*\*\*\*\*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 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

**REFUND/RETURN OF EXAM FEE**

Examination Fees will be refunded or returned ONLY for the following reasons:

- ◆if candidate does not submit an application for the examination
- ◆if an application is received or postmarked after application deadline date (late)
- ◆if it is an application for an exam that is not scheduled
- ◆if the candidate presents an acceptable fee waiver after payment is processed
- ◆if an examination is cancelled, with no alternative date scheduled