

**TOWN OF COLONIE
Civil Service Department
PO Box 508, Newtonville, NY 12128**

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 Number(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 of 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 (print)

Candidate’s Social Security Number

Candidate’s Signature

Date

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