



WATERVLIET CIVIL SERVICE COMMISSION
City Hall - 2 Fifteenth Street – Watervliet, NY 12189
518-270-3800 Ext. 114
www.watervliet.com

ALTERNATE TEST DATE APPLICATION

Name (Last, First, I)	SSN	Exam #(s) and Title	Date of Exam(s)

Please review the Watervliet Civil Service Commission Alternate Test Date Policy prior to completing this form to verify your eligibility for an alternate test date.

Reason for Alternate Test Date Request (circle all that apply):

1. A death in the immediate family or household within the week preceding the examination (10 day advance notice will be waived).
2. Military commitment.
3. Being a member of a traditional, religious or civil ceremonial party.
4. Religious accommodations. Please elaborate on a separate sheet of paper.
5. Professional or Educational Examination
6. Vacations for which non-refundable down payments were made before the examination announcement was issued.
7. Required court appearances.
8. Medical emergencies.
9. Emergency weather conditions (Public Safety verification required).
10. Other (list) _____

Please attach appropriate documentation verifying the need for the alternate test date.

The Secretary or the Civil Service Commission reserve the right to make the final decision in granting permission to obtain an alternate test date.

Applicant Signature

Date

For Civil Service Use Only:

Application Approved: Yes No If Disapproved State Reason:

Date Disposition Sent to Applicant:

Date and Time of Alternate Exam:

Approver's Name:

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