



# Jefferson County Promotion Examination Application

Jefferson County Department of Human Resources

175 Arsenal St.

Watertown, NY 13601

PLEASE TYPE OR PRINT

Exam No. & Name:

Social Security Number:

Last Name:

First Name:

M.I.

Street/PO Box:

City:

State:

Zip:

Home Number:

Work Number:

Cell Number:

Special Accommodations in Testing:

Required

Not Required

Department or Agency:

Qualifying Permanent Job Title:

Dates of Qualifying Service:

From: (Mo/Yr) /

To: (Mo/Yr) /

War Time Veterans' Credits Claimed\*

Disabled War Veteran

Non-Disabled War Veteran

I have not used Veterans' Credits for any appointment to a New York State or Local Government job since January 1, 1951.

## FOR CIVIL SERVICE USE ONLY

[ ] PD

Date Received \_\_\_\_\_ By \_\_\_\_\_

[ ] Approved [ ] Conditioned [ ] Disapproved

## THIS AFFIRMATION MUST BE COMPLETED

I affirm that the statements made on this application (including any attached papers) are true under the penalties of perjury.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Indicate any other surname (last name) by which you are or have been known.