

**IT IS IMPORTANT TO READ THIS ANNOUNCEMENT CAREFULLY  
APPLICATION IS ATTACHED**

Only a City of White Plains Police Officer application will be accepted

# POLICE OFFICER OC #65-397

DATE OF EXAMINATION: SATURDAY NOVEMBER 19, 2011  
LAST DATE FOR FILING: THURSDAY, JULY 14, 2011 AT 5:00 PM  
PLACE AND TIME OF EXAMINATION: TO BE ANNOUNCED  
SALARY RANGE: \$55,152 - \$86,372

**HOW TO APPLY:** SUBMIT THE FOLLOWING:

- 1) \$50 Non-Refundable exam fee (No Cash Accepted- See "Fee Information")
- 2) A completed City of White Plains Police Officer application (Print Clearly)

PRINTABLE VERSIONS AVAILABLE ON OUR WEBSITE: [WWW.CITYOFWHITEPLAINS.COM](http://WWW.CITYOFWHITEPLAINS.COM)

- Police Officer Application
- Guide to Taking the Examination for Entry-level Police Officer Series
- Police Officer Physical Fitness Agility Testing Standards

**YOU MAY ALSO OBTAIN AN APPLICATION AT THE FOLLOWING LOCATIONS:**

<b>City Hall - Personnel Department</b> 255 Main St, 3 <sup>rd</sup> fl, White Plains, NY 10601 Monday - Friday from 9AM to 5PM	<b>Thomas H. Slater Community Center</b> Two Fisher Ct, White Plains, NY 10601 Monday - Friday from 9AM to 5PM	<b>El Centro Hispano</b> 346 So. Lexington Ave, White Plains, NY 10606 Monday - Friday from 12PM to 7PM
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- 3) Submit to one of the above locations or Mail (Certified or Signature Required recommended) to:  
City of White Plains, Personnel Department, 255 Main Street, White Plains, NY 10601

**RESIDENCY REQUIREMENT:** Candidates must have been legal residents, for at least one (1) month immediately preceding the date of the written test and continuously until date of appointment, of any of the following six Counties:

**Westchester Putnam Nassau Rockland Orange Bronx County**

Preference in appointment may be given to successful candidates who have been legal residents of the City of White Plains for at least one (1) month immediately preceding the date of the written test and continuously until date of appointment.

**CANDIDATE'S RESIDENCY WILL BE INVESTIGATED AND VERIFIED BEFORE APPOINTMENT.  
CANDIDATES WILL BE FINGERPRINTED.**

**CITIZENSHIP REQUIREMENT:** Citizenship is a requirement for appointment. It is not necessary for admission to the examination.

### **MINIMUM QUALIFICATIONS:**

**AGE REQUIREMENT:** The following are Pursuant to Section 58 of the NYS Civil Service Law:

1. **Minimum Age:** To be certified as eligible for appointment applicants must be at least 20 years of age.
2. **Maximum Age:** Candidates may not have reached 35 years of age as of the date of the written examination.

**Effect of Military Duty on Age Limits:** In determining an applicant's maximum age for certification appointment, the period of his or her military duty as defined in Section 243 (1-b and 10-a) of the Military Law, up to six (6) years, shall be subtracted from his/her chronological age. Candidates exercising this provision must submit form DD-214 with their application.

**DRIVER'S LICENSE:** To be eligible for appointment, candidates must possess a valid New York State Driver's License.

**EDUCATION REQUIREMENT:** Applicant must hold:

1. A High School diploma; **OR**
2. A High School equivalency diploma (GED) issued by an education department of any state in the United States; **OR**
3. A comparable diploma issued by any commonwealth, territory or possession of the United States or Canal Zone; **OR**
4. A US Armed Forces GED Certificate, HS level.

**Note:** Applicants who do not possess HS or equivalency may take the examination, but will not be eligible for appointment until they obtain an equivalency diploma. For information on how to obtain a NYS Equivalency Diploma, write New York State Education Department, Albany, New York 12234 or [www.access.nysed.gov/ged](http://www.access.nysed.gov/ged).

("Education Requirement" Continued on the next page)

**THE CITY OF WHITE PLAINS IS AN EQUAL OPPORTUNITY EMPLOYER**

**Education Note:** \*For appointment from the resulting eligible list, applicants with a foreign HS diploma or college degree and/or course work completed at foreign universities must submit a course by course evaluation of their educational credentials. You must pay the required evaluation fee. Evaluations will be accepted from services such as:

**World Education Services, Inc.**

Bowling Green Station

P.O. Box 5087

New York, NY 10274-5087

Web: [www.wes.org](http://www.wes.org) Phone: (212) 966-6311

**Globe Language Services, Inc.**

319 Broadway #200

New York, NY 10007

Web: [www.globelanguage.com](http://www.globelanguage.com)

Phone: (212) 227-1994

**International Education Research Foundation, Inc.**

P.O. Box 3665

Culver City, CA 90231-3665

Web: [www.ierf.org](http://www.ierf.org)

Email: [info@ierf.org](mailto:info@ierf.org)

**DUTIES:** A Police Officer is responsible for the enforcement of laws, ordinances and protection of lives and property in an assigned area during a specified shift; does related work as required.

**WORK SCHEDULES:** Police Officers work on a rotating shift basis, seven days a week, 52 weeks per year.

**VACANCIES:** The resulting eligible list will be certified to fill vacancies as they occur in the City of White Plains Department of Public Safety.

**EXAMINATION CONSISTS OF THREE PARTS WITH RELATIVE WEIGHTS AS FOLLOWS:**

- |                                    |                   |
|------------------------------------|-------------------|
| 1. Written exam:                   | Graded and Ranked |
| 2. Physical Strength/Agility test: | Pass/Fail         |
| 3. Medical exam:                   | Pass/Fail.        |

Candidates must pass the written test in order to qualify to take the physical strength/agility test. Candidates must pass the physical strength/agility test in order to qualify to take the medical exam.

**FREE TRAINING: THERE WILL BE A FREE TRAINING PROGRAM TO PREPARE APPLICANTS FOR BOTH THE WRITTEN AND PHYSICAL AGILITY PARTS OF THE EXAM. THE DATE AND LOCATION OF THE TRAINING SESSIONS WILL BE SENT TO APPROVED APPLICANTS IN THEIR LETTER OF ADMISSION.**

**WRITTEN EXAMINATION INFORMATION:**

The written exam shall consist of multiple choice questions from which the applicant will be required to select the correct answer from four possible choices. Use of a **CALCULATOR** is **PROHIBITED** for this examination.

A Guide to Taking the Examination for Entry-Level Police Officer Series and Police Officer Physical Fitness Agility Testing Standards is available on our website [www.CityofWhitePlains.com](http://www.CityofWhitePlains.com) or you can pick one up in our office Monday through Friday from 9:00 AM to 5:00 PM.

The written test is being prepared and rated by the New York State Department of Civil Service in accordance with Section 23-2 of the Civil Service Law. The provisions of the New York State Civil Service Rules and Regulations dealing with rating of examinations will apply to this written examination.

The rating key for this examination will be established by the New York State Civil Service Commission prior to the date of the test, upon recommendation of a committee of police experts who will review all the questions for appropriateness and the key answers for correctness. There will be no review of the questions by candidates. This committee was selected with the assistance and endorsement of the Police Conference of New York, Inc., the New York State Association of PBA's, Inc., and the New York State Association of Chiefs of Police, Inc.

**SUBJECTS OF THE WRITTEN EXAMINATION:** There will be a written test designed to evaluate knowledge, skills and/or abilities in the following areas:

**1. Applying written information (rules, regulations, policies, procedures, directives, etc.) in police situations**

These questions test for the ability to apply written rules in given situations similar to those typically experienced by police officers.

**2. Memory for facts and information**

These questions test for the ability to remember facts and information presented in written form. You will be given 5 minutes to read and study the information in the Memory Booklet. After the 5-minute period, the Memory Booklet will be taken away. You will then be required to answer questions about the material that was presented in the Memory Booklet.

**3. Reading, understanding, and interpreting written information**

These questions test for the ability to read, understand, and interpret the kinds of written information that police officers are required to read during their formal training period and on the job.

**4. Preparing written material in a police setting**

These questions test for the ability to prepare the types of reports that police officers write. You will be presented with a page of notes followed by several questions. Each question will consist of four restatements of the information given in the notes. From each set of four, you must choose the version that presents the information most clearly and accurately.

**PHYSICAL AND MEDICAL REQUIREMENTS:**

AN ILLUSTRATED GUIDE TO TAKING THE PHYSICAL AGILITY EXAM IS AVAILABLE ON OUR WEBSITE:

**WWW.CITYOFWHITEPLAINS.COM**

1. The City of White Plains Personnel Department reserves the right to choose only as many successful candidates from the written examination for further processing as may be necessary to fill anticipated vacancies.
2. Applicants who pass the written test will be required to pass a qualifying physical agility test established by the Municipal Police Training Council (MPTC). The MPTC standards may be reviewed at [www.criminaljustice.state.ny.us/ops/docs/registry/policeapptsmed.pdf](http://www.criminaljustice.state.ny.us/ops/docs/registry/policeapptsmed.pdf). Candidates may be required to sign an accident waiver prior to the physical agility test.
3. Candidates offered the position of Police Officer will be required to pass the medical standards established by the MPTC, and a psychiatric evaluation will be required by the Department of Public Safety.
4. Failure of any one of the above qualifying tests will bar a candidate from appointment.
5. Candidates may be subject to a substance abuse test designated by the Department of Public Safety at any time prior to hiring. Candidates who test positive for illegal substance may be subject to removal from the eligible list or termination from employment.

**GENERAL INFORMATION:** Candidates who have successfully passed the written examination and the physical agility test, will be required to provide documents including the following for the Department of Public Safety background investigation:

1. Birth Certificate
2. Social Security Card
3. New York State Driver's License
4. High School Diploma or Equivalency Diploma issued by the NYS Education Department
5. Copy of DD214 (Discharge papers from the Armed Services), if applicable

Conviction of a felony will bar (conviction of a misdemeanor or other offense may bar) participation in examination and appointment. Candidates must be of good moral character, in excellent physical condition, demonstrate clarity of oral expression and cooperate fully with the Personnel Department and the Department of Public Safety in their investigation into the candidate's background.

**VETERANS:** Veterans and Veterans with disability, who meet the criteria set forth in the Application for Examination, may be eligible for additional credits added to their earned scores if successful in examination. **CREDITS SHOULD BE CLAIMED AT THE TIME OF FILING YOUR APPLICATION FOR EXAMINATION AND ATTACH A COPY OF YOUR DD214 SEPARATION PAPERS.** If claiming credit as a **Veteran with disability**, attach the required certification. **If these documents are not submitted within sixty (60) days after the last filing date, your claim will be denied.** Active duty members of the Armed Forces have the right to request veteran credits prior to discharge. If currently on active duty with an anticipated date of discharge within sixty (60) days, check the appropriate box on the application.

**FILING PERIOD FOR MILITARY PERSONNEL:** Anyone who is serving on active duty in the U.S. armed forces or as a member of the organized militia (Army National Guard, Air National Guard, New York Naval Militia, New York Guard) and reserves, other than for training purposes, and requires special testing arrangements should call (914) 422-1260 for criteria and arrangements.

**SPECIAL TESTING ARRANGEMENTS:** Please indicate on your application (question #9) if one of the following are needed so appropriate arrangements can be made:

- A) **Active Military:** See "Filing Period For Military Personnel"
- B) **Sabbath Observers:** May request an alternate test date for religious observance.
- C) **Person with disability:** Reasonable accommodations will be made for disabled candidates who request such arrangement for their disability.
- D) **Alternate Test Date:** If needed, please call Mon-Fri 10am-5pm (914) 422-1257 as soon as possible **BEFORE** the scheduled test date for the alternate test date policy.

**Children** of firefighters and police officers killed in the line of duty shall be entitled, in conformance with section 85-a of the Civil Service Law, to receive an additional ten points in a competitive examination for original appointment in the same municipality in which his or her parent has served. If you are qualified to participate in this examination and are a child of a CWP firefighter or police officer killed in the line of duty, please inform this office of this matter when you submit your application for examination. A candidate claiming such credit has a minimum of two months from the application deadline to provide the necessary documentation to verify additional credit eligibility. However, no credit may be added after the eligible list has been established.

**CROSS FILER INFORMATION:** For candidates who apply for Civil Service Examinations in multiple local government jurisdictions within New York State that are scheduled on same date, you must make arrangements to take all the examinations at one test site. If you have applied for both State and Local government examinations, you must make arrangements to take all your examinations at the State examination center by calling (518) 474-6470 in the Albany area or toll free at 1-877-697-5627 [press 2, then press 1], no later than two weeks before the test date. If you have applied for other local government examinations, contact each Civil Service Agency to make arrangements no later than two weeks before the date of the examination(s) and notify each agency of the test site at which you wish to take your examination(s). **There is no reciprocity with New York City, and you must make a choice between the two jurisdictions.** For the City of White Plains examination call (914) 422-1257 or write to Personnel Department, City of White Plains, 255 Main Street, White Plains, NY 10601.

**FILING REQUIREMENTS:** Applications should be delivered personally or be postmarked no later than the last filing date. The date imprinted by a postage meter is **NOT** accepted as a postmark. Omissions or vagueness in answers will not be interpreted in candidate's favor and may result in disqualification. Approved candidates will be sent notice when and where to appear for examination. Notice will be sent to disapproved candidates.

**CHANGE OF INFORMATION:** Candidates are responsible for reporting in writing, all changes in name and/or address directly to the Personnel Department, City of White Plains, 255 Main Street, White Plains, NY 10601. Please include examination number, name, DOB, old address, new address, effective date of move and signature on all correspondence.

**FEE INFORMATION:** **A NON-REFUNDABLE FEE OF \$50.00 IS REQUIRED.** If the required fee does not accompany your application you will be disqualified and the application will be returned. Send check or money order payable to the City of White Plains and write: "Police Officer OC #65-397" on your check or money order. For your convenience, if applying in person, we also accept VISA/MASTERCARD. **There is a \$20.00 charge for all returned personal checks. If you submit a check that is returned by the bank, we will not accept any personal checks or credit cards for this or future exams. Do not send cash. As no refund will be made, you are urged to compare your qualifications carefully with the requirements for admission and file only if you are clearly qualified.** A waiver of application fee will be allowed if you are unemployed and primarily responsible for the support of a household. In addition, a waiver of application fee will be allowed if you are determined eligible for Medicaid, or receiving Supplemental Security Income payments, or Public Assistance (Temporary Assistance for Needy Families/Family Assistance or Safety Net Assistance) or are certified eligible for the Job Training Partnership Act/Workforce Investment Act through a State or local social service agency. All claims for application fee waiver are subject to verification. If you can verify eligibility for application fee waiver, you must complete a "Request for Application Fee Waiver and Certification" form. The form is available for pick up at the Personnel Department, 255 Main Street Rm #301, White Plains, NY, Monday-Friday, 9am-5pm. You will need to submit the completed form along with your application by the close of business on the Application Deadline.

**APPLICATION QUESTIONS?:** After reading the entire four (4) page announcement and reviewing the FAQ's page on the website, if you still have questions or need assistance in completing the application, you can contact Debra at (914) 422-1257 Monday-Friday 10AM-5PM. Submit application as soon as possible, do not wait until the last day to file your application.

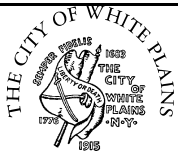
**CONSENT JUDGMENT:** **WHITE PLAINS IS RECRUITING AND HIRING UNDER THE TERMS OF A FEDERAL COURT CONSENT JUDGEMENT IN A CIVIL RIGHTS ACTION BROUGHT BY THE UNITED STATES DEPARTMENT OF JUSTICE. COPIES OF THE CONSENT JUDGEMENT ARE ON FILE WITH THE UNITED STATES COURT FOR THE SOUTHERN DISTRICT OF NEW YORK UNDER THE DOCKET NUMBER 80 CIV. 7407 (ADS).**

**THE CITY OF WHITE PLAINS IS AN EQUAL OPPORTUNITY EMPLOYER**

IT IS THE POLICY OF THE CITY OF WHITE PLAINS TO PROVIDE FOR AND PROMOTE EQUAL OPPORTUNITY IN EMPLOYMENT, COMPENSATION AND OTHER TERMS AND CONDITIONS OF EMPLOYMENT WITHOUT DISCRIMINATION BECAUSE OF AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX, DISABILITY, MARITAL STATUS, MILITARY STATUS, SEXUAL ORIENTATION, OR RECORD OF OFFENSES. WE ENCOURAGE ALL INDIVIDUALS WHO MEET THE MINIMUM QUALIFICATIONS TO APPLY.

TDD NUMBER (914) 422-1258 MONDAY - FRIDAY 10:00 AM - 5:00 PM  
FOR OTHER RECRUITMENT INFORMATION CALL ANYTIME  
(914) 422-1279

APPLICATION FOR **POLICE OFFICER OC #65-397** EXAMINATION



MAIL OR DELIVER TO:  
**CITY OF WHITE PLAINS**  
**PERSONNEL DEPT. - RM 301**  
**255 MAIN STREET**  
**WHITE PLAINS, NY 10601**

This application is part of the examination and must be **printed clearly, complete, and accurate**. Answer **all** questions **fully** in black ink or typed. Attach additional sheets and documents, if needed, to give complete information.

**\$50 NON-REFUNDABLE APPLICATION FEE**

**FOR OFFICE USE ONLY**  
 WP Resident  
 Special Accom.  
 DD214 Attached  
 Restricted

**NO CASH ACCEPTED.** CHECK OR MONEY ORDER PAYABLE TO: CITY OF WHITE PLAINS. INCLUDE THE EXAM NUMBER 65-397. VISA AND MASTERCARD ALSO ACCEPTED. APPLICATIONS RECEIVED WITHOUT THE FILING FEE WILL BE RETURNED. IT IS YOUR RESPONSIBILITY TO RETURN IT WITH THE FEE BY THE FILING DEADLINE. SEE EXAM ANNOUNCEMENT FOR FILING SITE LOCATIONS.

**CITY OF WHITE PLAINS IS AN EQUAL OPPORTUNITY EMPLOYER**

It is the policy of the City of White Plains to provide for and promote equal opportunity in employment, compensation and other terms and conditions of employment without discrimination because of age, race, creed, color, national origin, sex, disability, marital status, military status, sexual orientation or any other protected status. Accordingly, nothing in this application form should be viewed as expressing, directly or indirectly, any limitation, specification or discrimination as to age, race, creed, color, national origin, sex, disability, marital status, military status, sexual orientation or any other protected status in connection with employment by the City of White Plains.

**YOU MUST FILL OUT ALL SECTIONS OF THIS APPLICATION**

**1. SOCIAL SECURITY NUMBER (PLEASE PRINT OR TYPE)**

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**2. LAST NAME** SUFFIX (ex: Jr)

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**3. FIRST NAME** M.I.

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**4. LEGAL RESIDENCE - STREET ADDRESS & APT #**

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**CITY**

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**STATE & ZIP CODE**

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**5. (Fill ONLY If different from Legal Residence) MAILING ADDRESS & APT #**

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**CITY**

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**STATE & ZIP CODE**

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**6. DAYTIME PHONE NUMBER**

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7. Are you a City of White Plains Resident?  Yes, since \_\_\_/\_\_\_/\_\_\_ Date
8. A. Have you any loans made or guaranteed by the NYS Higher Education Services Corporation which are currently outstanding  Yes  No  
 B. If yes, are you presently in default on any such loan?  Yes  No
9. Do you require special testing arrangements?  Yes (circle reason below)  
Reason: Sabbath / active military / alternate test date /person with disability
10. A. Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds?  Yes  No  
 B. Did you ever resign from any employment rather than face dismissal?  Yes  No  
 C. Have you ever been convicted of any crime (felony or misdemeanor)?  Yes  No  
 D. Have you ever forfeited a bail bond posted to answer any criminal charge (felony or misdemeanor)?  Yes  No  
 E. Are you now under charges for any crime (felony or misdemeanor)?  Yes  No

If you answered "yes" to questions 9 and 10 A-E above, you must give specifics. (Attach additional 8 1/2 by 11 sheets.) For A-E, if such explanation is insufficient, a confidential investigation supplement will be sent to you. Except a felony conviction, none of the above circumstances represents an automatic bar of employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position(s) for which you are applying.

**ALL STATEMENTS ARE SUBJECT TO VERIFICATION. MISREPRESENTATIONS MAY CONSTITUTE CAUSE FOR DISQUALIFICATION OR DISCHARGE. PURSUANT TO SECTION 210.45 OF THE NEW YORK PENAL LAW, IT IS A CRIME PUNISHABLE AS A CLASS "A" MISDEMEANOR TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN.**

The City of White Plains is drug-free workplace. Consistent with applicable collective bargaining agreement, employees may be required to submit to drug and/or alcohol testing for reasonable suspicion. Employees utilizing a Commercial Driver's license in their position will be subject to random drug testing per Federal Department of Transportation regulations.

**THIS AFFIRMATION AND AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION MUST BE COMPLETED:** By my signature below, I authorize the City of White Plains, and/or its respective Departments, Offices, Agencies, Boards or Authorities to request verbal records or written verification of any or all information contained herein. I further authorize a review and full disclosure of all records concerning me whether said records are of a public, private or confidential nature. This authorization gives my consent for full and complete disclosure of records. I further release the City of White Plains, and/or its respective Departments, Offices, Agencies, Boards or Authorities, and their respective officers and/or employees from any and all liability which may be incurred as a result of collecting such information. Further, my signature below certifies I have read and fully understand this "Affirmation and Authorization for Release of Personal Information" and have acknowledged that a photocopy of the front page of this Application for Examination/Employment containing this release will be valid as an original thereof, even though said photocopy does not contain an original writing of my signature. I affirm that all statements made on this application (including any attached paper) are true under the penalties of perjury. Applicants are advised that all statements made by them in connection with their applications(s) for employment are subject to investigation and verification. Applicants may be required to undergo a State and national criminal history background investigation, which will include a fingerprint check, to determine suitability for appointment. Failure to meet the standards for the background investigation may result in disqualification.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**11. Is additional information relative to change of name, use of an assumed name or nickname necessary to enable a check on your school and/or work record?**

No  Yes If yes, please indicate here: \_\_\_\_\_

**DO NOT WRITE BELOW - FOR CIVIL SERVICE USE**

APPROVED RESTRICTED \_\_\_\_\_

DISAPPROVED \_\_\_\_\_

VETERAN'S CREDITS POINTS \_\_\_\_\_

**METHOD OF PAYMENT: (\*Print Clearly)**

\_\_\_ Check  
 \_\_\_ Money Order  
 \_\_\_ Visa  
 \_\_\_ Master Card

\*Card No. \_\_\_\_\_

\*Exp Date \_\_\_\_\_

Signature \_\_\_\_\_

If you have any questions regarding this application or any other matter pertaining to the Police Officer Exam, Please call (914) 422-1257 Monday-Friday 10am-5pm.

**DATE OF BIRTH:** For compliance with age requirements set forth in exam announcement. (Example: MONTH: 11 DAY: 19 YEAR: 1976)

MONTH:			DAY:			YEAR:				
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**CITIZENSHIP:** ARE YOU A UNITED STATES CITIZEN?  Yes  No

**EDUCATION:** Check one:

- HIGH SCHOOL Name: \_\_\_\_\_ Location: \_\_\_\_\_ Country: \_\_\_\_\_
- GED Issued By: \_\_\_\_\_ Document Number: \_\_\_\_\_
- US COMMONWEALTH TERRITORY, POSSESSION or CANAL ZONE Location: \_\_\_\_\_
- US ARMED FORCES GED CERTIFICATE Document Number: \_\_\_\_\_

**SERVICE IN ARMED FORCES**

**SECTION 1**

- Have you ever served in the armed forces of the U.S.? \_\_\_\_\_ Yes \_\_\_\_\_ No
- If "Yes", have you ever received a discharge from such forces which was other than honorable? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If "Yes", give full particulars on additional sheet.
- Date of entry into active service \_\_\_\_\_ A dishonorable discharge is not an automatic bar to employment. Each case is considered on its individual merits.
- Date of discharge \_\_\_\_\_
- Service serial number \_\_\_\_\_

**SECTION 2**

- I wish to claim War Time Veterans Credits on this exam
- I have NOT used veterans credits for appointment to a position in NY State or Local Government employment since January 1, 1951.

War Time Veterans and Veterans with disability are eligible for extra credits added to their exam score if they pass. These extra credits can be used **only once** for **any** permanent government employment in New York State. If you want to have the extra credits added to your exam score, you should answer the questions below. You can waive the extra credits later, if you wish.

- I received, or expect to receive, a discharge which was honorable or release under honorable circumstances 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 on a **full-time active duty other than active duty for training purposes.**)
- I served, or am serving on an active duty basis other than active duty for training purposes during one or more of the following time of war or hostile action.  
\*ATTACH A COPY OF DD214 OR PROOF OF ACTIVE DUTY STATUS SUCH AS MILITARY ID, MILITARY ORDERS OR OTHER OFFICIAL MILITARY DOCUMENT

**SECTION 3**

**VETERAN WITH DISABILITY:** TO CLAIM ADDITIONAL CREDITS CHECK THE BOX BELOW

- You must provide certification by the U.S. Dept. of Veterans Affairs stating that you are a veteran who was disabled in the actual performance of duty in any war; that the disability is rated at 10 percent or more; and that the disability exists at the time of application for appointment or promotion.

**CITY OF WHITE PLAINS DEPARTMENT OF PERSONNEL  
RECRUITMENT QUESTIONNAIRE**

This confidential and voluntary reply will be used in our efforts to recruit minority and female candidates and to evaluate our recruitment and test processes. It will in no way affect your participation in this or future civil service examinations.

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_
2. Sex: Male \_\_\_\_\_ Female \_\_\_\_\_
3. Ethnic Group: **(Please check one)**  
African American or Black \_\_\_\_\_ American Indian \_\_\_\_\_ Asian American \_\_\_\_\_ Hispanic \_\_\_\_\_ White \_\_\_\_\_
4. May we give your name and address to the following:  
The Guardian Society Yes \_\_\_\_\_ No \_\_\_\_\_  
Westchester Hispanic Law Enforcement Assoc. Yes \_\_\_\_\_ No \_\_\_\_\_

**FOR OFFICE USE ONLY**

RECEIPT #: \_\_\_\_\_ Application accepted by: \_\_\_\_\_  IN PERSON  BY MAIL

**Payment Info:**

- Appropriate fee amount (\$50)
- Method of payment is checked off (bottom right on front page)
- Candidate's name, exam title & number is clearly printed on CK/MO/CC

**Attachment Info:**

- Special Testing (If "Yes", attachment needed)
- Questions 10 A-E completed (If "yes", attachment needed)
- DD214

Application entered by: \_\_\_\_\_ Missing info ltr on: \_\_\_\_\_ Special testing ltr on: \_\_\_\_\_