

**CROSS-FILER FORM**

**NOTICE OF APPLICATION FOR EXAMINATIONS  
BY CITY, COUNTY AND STATE\* CIVIL SERVICE AGENCIES**

If you have applied for more than one examination offered by the Civil Service Commission (s) of a **City in New York State, County in New York State**, and /or the **State of New York** \* on the same date, you **MUST** complete this form and submit it with your application/s. You will be advised on your admission letter when and where to report for your examinations. If you have any questions, contact our office at (315) 798-5726.

**(Please print legibly)**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EXAMINATIONS FILED FOR:**

**OFFERED BY:**

<u>EXAM #</u>	<u>EXAM TITLE</u>	<u>COUNTY</u>	<u>CITY</u>	<u>STATE*</u>	<u>OTHER(NAME)</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I wish to have all of these examinations administered by the (check one):

- \_\_\_\_\_ Oneida County Civil Service (Department of Personnel).
- \_\_\_\_\_ County of \_\_\_\_\_ Civil Service Commission.
- \_\_\_\_\_ City of Utica, Civil Service Commissioner.
- \_\_\_\_\_ City of Rome, Civil Service Commissioner.
- \_\_\_\_\_ City of Sherrill, Civil Service Commissioner.
- \_\_\_\_\_ City of \_\_\_\_\_ Civil Service Commission.
- \_\_\_\_\_ State of New York Civil Service Commission.

**\*Please Note: IF YOU HAVE APPLIED FOR BOTH NEW YORK STATE AND LOCAL GOVERNMENT EXAMINATIONS, YOU MUST TAKE ALL TESTS AT THE NEW YORK STATE EXAMINATION TEST SITE.**

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(SOCIAL SECURITY NUMBER)

\_\_\_\_\_  
(DAYTIME PHONE NUMBER)