

City of Oneida

Civil Service Examination and Employment
Application
109 North Main St., Oneida, NY 13421
Phone: 315-363-2022

DO NOT WRITE IN THIS SPACE

Notified: _____

Approved: _____

Conditioned: _____

Please print or type

Read Instructions Carefully

Position Applying for: _____ Exam No: _____
Home telephone: _____ SS#: _____
Work Telephone: _____ Email Address: _____
Name: _____
Address: _____ Apt #: _____
City: _____ State: _____ Zip Code: _____

If you require special testing arrangements due to a disability, religious observance or active military duty, please explain:

Are you under 18 years of age? Yes No
If you are applying for a Police Officer position, please provide date of birth:

State your permanent legal residence and indicate for how long you have resided there continually, up to and including the date of this application (if less than 1 month, also list previous address):

City/Town:

County:

State:

Number of years and/or months at this address:

Date Received by CSC:

CITY OF ONEIDA

An Equal Opportunity/Affirmative Action Employer

It is the policy of the City of Oneida to provide accommodations in testing to individuals with disabilities and religious observers and to provide for & promote equal opportunity in employment, compensation, and other terms and conditions of employment without discrimination because of age, race, creed, color, national origin, gender, sexual orientation, disability, or marital status. NOTE: When filing out your application form, check to make sure that all appropriate questions have been answered. Incomplete applications may result in disqualification.

ALL STATEMENTS ARE SUBJECT TO VERIFICATION

I affirm that all statements made on this application (including any attached papers) are true. I understand that all statements made by me in connection with this application are subject to investigation and verification and that a material misstatement or fraud may disqualify me from appointment and/or lead to revocation of my appointment.

Signature of Applicant

Date

If you answer "yes" to any of the following questions, give specifics below or on a separate sheet. None of the below circumstances represents an automatic bar to employment. Each case is evaluated on the individual merits in relation to the position for which you are applying:

- Were you ever dismissed or discharged from employment for reasons other Than lack of work or funds? Yes No
- Did you ever resign from any employment rather than face dismissal? Yes No
- Did you ever receive a dishonorable discharge from the Armed Forces of The United States? Yes No
- Have you ever been convicted of any crime (felony or misdemeanor)? Yes No
- Are you now under charges for any crime? Yes No

Do you have a NYS Driver's license? Yes No Class & Date of Expiration: _____

I am a U.S. citizen or an alien lawfully authorized to work in the U.S.: Yes No

(NOTE: The Immigration Control and Reform Act of 1986 requires that employers hire only U.S. citizens and aliens lawfully authorized to work in the United States. New employees are required under the Act to provide proof of work eligibility.)

I am a New York State resident: Yes No

Extra Credit for War Time Veterans: Please refer to the back page of this application for complete claim information.

PERSONAL PRIVACY PROTECTION LAW NOTIFICATION:

The information an applicant provides on this application is requested pursuant to Section 50.3 of the NYS Civil Service Law for the principal purpose of determining the eligibility of applicants to participate in the exam(s) for which they have been applied. This information will be used in accordance with Section 96(1) of the Personal Privacy Protection Law, particularly subdivisions (b), (e), and (f). Failure to provide this information may result in disqualification of the application. This information will be maintained by the Oneida City Civil Service Commission.

EDUCATION: Have you graduated from high school? Yes No If yes, year graduated: _____
 If No, highest grade completed? _____ Name & Location of High School: _____
 If you have a high school equivalency diploma, indicate issuing gov't authority: _____
 # and date of issue: _____

HIGHER EDUCATION:

If credit is claimed for partially completed college curriculum or correspondence course, attach a list of courses and credit or semester hours completed. If required to indicate specific course work, do so on a separate sheet of paper.

Name of school & City where located:	Dates of Attendance: From ___ to ___	Type of Course or Major Subject	# of Credits & Type of Degree	Were you graduated?	Date Degree received or Expected:

Other Schools or Special Courses:

LICENSES: If a license, certificate, or other authorization to practice a trade or profession is listed as a requirement on the exam announcement for which you are applying, complete the following: (If not currently licensed, please indicate so.)

Name of trade or profession:	License number:	Granted by: (licensing agency)	City/State of:
Specialty:	Date License First Issued:	Registered:	From: (mo/yr) To: (mo/yr)

DESCRIPTION OF EXPERIENCE: Beginning with the most recent, describe below in detail all employment that is pertinent to the position applied for. If the exam announcement states that volunteer or unpaid experience is acceptable as qualifying, describe it in the same way as paid work showing its volunteer nature in the hours worked box. You are responsible for submitting an accurate, adequate, and clear description of your experience. Omissions or vagueness will not be interpreted in your favor. If your military service includes experience pertinent to the position, describe such as separate employment. If your title or duties changed materially in the course of your service, indicate such clearly.

Length of Employment: From: _____ To: _____ ____ Mo ____ Yr ____ Mo ____ Yr	EXACT TITLE:	Firm name and Address:
Supervisor & Supervisor's title:	Describe Duties:	
# of Hrs worked/week: ____ Paid or ____ Volunteer		
Reason for leaving:		
Length of Employment: From: _____ To: _____ ____ Mo ____ Yr ____ Mo ____ Yr	EXACT TITLE:	Firm name and Address:
Supervisor & Supervisor's title:	Describe Duties:	
# of Hrs worked/week: ____ Paid or ____ Volunteer		
Reason for leaving:		

(Continued on next page).

Length of Employment: From: To: ___ Mo ___ Yr ___ Mo ___ Yr	EXACT TITLE:	Firm name and Address:
Supervisor & Supervisor's title:	Describe Duties:	
# of Hrs worked/week: ___ Paid or ___ Volunteer		
Reason for leaving:		
Length of Employment: From: To: ___ Mo ___ Yr ___ Mo ___ Yr	EXACT TITLE:	Firm name and Address:
Supervisor & Supervisor's title:	Describe Duties:	
# of Hrs worked/week: ___ Paid or ___ Volunteer		
Reason for leaving:		

EXTRA CREDIT FOR WAR TIME VETERANS

Certain veterans are entitled to receive additional credit in competitive Civil Service examinations. Article V, Section 6 of the State Constitution provides that to receive additional credit a veteran:

- Must have served or be serving in time of war (see below);
 - Must have received or expect to receive an honorable discharge or have been released under honorable circumstances;
 - Must be a resident of NYS at time of application for examination.
-

1. I expect to receive or have already received 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 service of the U.S. pursuant to call as provided by law on a full-time active duty basis, other than active duty for training purposes.)

Yes No

If Yes, check for which of the following time of war periods you are claiming extra credit (If you answered "No" to question #1, credits may not be claimed.):

2a. I am now serving or have served on an active duty basis other than active duty for training purposes in the U.S. Armed Forces during one or more of the following:

Korean Conflict (June 27, 1950 to January 31, 1955)

Viet Nam Conflict (December 22, 1961 to May 7, 1975)

Persian Gulf Conflict (August 2, 1990 to the date upon which such hostilities end)

2b. I earned the Armed Forces, Navy, or Marine Corps expeditionary medals for:

Hostilities in Lebanon (June 1, 1983 to December 1, 1987)

Hostilities in Grenada (October 23, 1983 to November 21, 1983)

Hostilities in Panama (December 20, 1989 to January 31, 1990)

(NOTE: If claiming any time of war service prior to 1950, please discuss with the Civil Service Secretary.)

3. I am receiving payments from the U.S. Dept of Veterans Affairs for a service-connected disability rated at 10% or more incurred during a war time period listed above: Yes No

All claims and grants of veteran's credits are tentative and must be verified through inspection of discharge papers and other related documents, as necessary, PRIOR to establishment of the eligible list. You may make application for such credit at any time between date of application for exam & the establishment of the eligible list. Credit may not be granted after an eligible list has been established. If it is determined, based on required proof submitted in a timely manner, that you are entitled to veterans' credits, they shall be granted as follows: Disabled veterans- 10 pts on open competitive exam, 5 pts. On promotion exam; Non-disabled veterans- 5 pts on open competitive exam, 2.5 pts on promotion exam. To be eligible for disabled veterans' credits, one must be certified by the VA as being entitled to receive payments for a service-connected disability rated @ 10% or more, which was incurred during war time, and must provide required proof of that disability. All statements you make in support of your claim for additional credits are subject to investigation and substantiation by the City. In the event of subsequent disclosure of any material misstatement or fraud in this claim, your appointment may be rescinded and you may be disqualified from further appointment(s).

CITY OF ONEIDA CIVIL SERVICE COMMISSION, 109 N MAIN ST, ONEIDA NY 13421

Phone: (315) 363-2022 Email: jkaiser@oneidacityny.gov

APPLICATION FOR VETERANS' CREDITS

City of Oneida Civil Service Commission
109 North Main Street Oneida, NY 13421
315-363-2022
jkaiser@oneidacityny.gov

THIS FORM MUST BE SIGNED ONLY IN THE PRESENCE OF A NOTARY
PUBLIC AND THEN SUBMITTED WITH HONORABLE DISCHARGE

Non-Disabled Veteran

Disabled Veteran

Applicants seeking the use of DISABLED Veterans' Credits will need to submit supplemental proof of at least 10% disability status in the form of a "Summary of Benefits' Statement. Benefit Statements are available by contacting the Department of Veterans' Affairs directly at 1-800-827-1000.

Examination Title, Exam Number, Exam Date: _____

Open Competitive Exam Promotional Exam

NAME: _____
LAST NAME FIRST NAME MIDDLE INITIAL

ADDRESS: _____
NUMBER STREET CITY/TOWN STATE ZIP

SOCIAL SECURITY #: _____ DATE OF BIRTH: _____ SERVICE SERIAL #: _____

List ANY/ALL your public service employment since January 1, 1951. Attach additional sheet if necessary.

DATES OF EMPLOYMENT					WERE VETERANS' CREDITS USED FOR THIS APPOINTMENT?
FROM:	TO:	NAME OF EMPLOYER	CITY & STATE	TITLE	
					<input type="checkbox"/> YES <input type="checkbox"/> NO

YES NO

TO BE SWORN TO BEFORE A NOTARY PUBLIC

I, _____, hereby certify that the foregoing statements made in this application are complete and are true to the best of my knowledge and belief.
(PRINTED FULL NAME)

Applicant's Signature: _____ Date: _____

Sworn to Before Me On: _____ Notary

{PLEASE SEE COMPLETE APPLICATION FILING INSTRUCTIONS ON THE REVERSE OF THIS FORM.}

PLEASE READ AND FOLLOW THESE INSTRUCTIONS CAREFULLY

Additional credit in examinations may be granted to successful candidates who have claimed and established Non-Disabled or Disabled Veteran status.

Approved Veterans' Credit points are applied to Civil Service examinations in the following manner:

Open Competitive Exams: Disabled Veteran: 10 points Non-Disabled Veteran: 5 points
Promotional Exams: Disabled Veteran: 5 points Non-Disabled Veteran: 2.5 points

Veterans' Credits may only be added to a passing score and are not applied to a failing exam score of 69.0 or below. Veterans' Credits must be applied for prior to the establishment of an eligible list, and may only be granted BEFORE an eligible list is established. Candidates must file a separate Application for Veterans' Credit and Authorization for Disability Record (if applicable) for each examination for which Veterans' Credits are being sought. Approved applicants may withdraw the credit at any time up to appointment. Veterans' Credits are not deemed to have been used where the addition of such credit does not change the veteran applicant's position on the eligible list relative to other candidates or where the applicant was not permanently appointed from the eligible list where the Veterans' Credits were originally applied.

TO APPLY FOR VETERANS' CREDIT: You must answer all questions on the reverse side of this form, attach documentary proof of your eligibility (such as Form: DD-214 [Member-4 Copy], NAVPERS-553, NAVMC-78 PD, WDAGO-53, 55, or WDAGO-53, 98).

If your name is different from that shown on the aforementioned proof of eligibility, include a legal document to verify the change.

Submit this form **no later than two (2) weeks prior to the establishment of the eligible list.** The proof you submit must document the following:

1. That you are a citizen of the United States or an alien lawfully admitted for permanent residence, and that you are a resident of New York State at the time of application for appointment or promotion.

2. That you served on active duty with the Armed Forces of the United States (other than for training purposes) in time of war, as follows:

World War II	December?, 1941-December 31, 1946
Korean Conflict..	June 27, 1950-January 31, 1955
Vietnam Conflict...	February 28, 1961 - May 7, 1975
Hostilities in Lebanon*...	June 1, 1983 - December 1, 1987
Hostilities in Grenada*...	October 23, 1983 - November 21, 1983
Hostilities in Panama*....	December 20, 1989-January 31, 1990
Persian Gulf Conflict	August 2, 1990 - (Not Yet Determined.)

* Credit for Lebanon, Grenada and/or Panama will be limited to those who verifiably received the Armed Forces Expeditionary Medal, the Navy Expeditionary Medal, or the Marine Corps Expeditionary Medal.

Additionally, service in the commissioned Corps of the United States Public Health Service during the periods which follow is qualifying for Veterans' Credit: July 29, 1945 - December 31, 1946 June 27, 1950- July 3, 1952

3. That you were honorably discharged or were released under honorable conditions.

4. That you have not used your Veterans' Credit for permanent appointment in New York State government or any of its civil divisions since January 1, 1951.

To claim credit as a Disabled Veteran and in addition to establishing your status as a war veteran as outlined above, you must also furnish a "Summary of Benefits" statement. Benefit Statements are available by contacting the Department of Veterans' Affairs directly at 1-800-827-1000. Please note that to be considered as a Disabled Veteran, in addition to the above-referenced criteria, you must document a war-incurred disability rated at 10% or more.