

CIVIL SERVICE EXAMINATION CROSS-FILER FORM

If you have applied for both State and local government examinations, you must take all of the examinations at the State examination center. You will be advised by letter from the State when and where to report for your examinations.

(Please print legibly)

NAME: _____

ADDRESS: _____

EXAM DATE: _____

SOCIAL SECURITY NUMBER: _____ / _____ / _____

DAY-TIME PHONE NUMBER (with area code): _____

LOCATION WHERE YOU WISH TO TAKE EXAM (If other than State exam): _____

List ALL examination numbers, titles and Civil Service Agencies for which you have applied:

<u>EXAM #</u>	<u>EXAM TITLE</u>	<u>CIVIL SERVICE AGENCY</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SEND TO:

City of Watertown, Civil Service Commission, 245 Washington St., Watertown, NY 13601

~ and ~

to all Civil Service agencies listed above

~ THIS FORM MAY BE COPIED ~