

# Open Competitive Supervisor, Storeroom Operations (Exam No. 5316)

YOU MUST CAREFULLY READ THIS ENTIRE DOCUMENT BEFORE APPLYING. FAILURE TO DO SO COULD RESULT IN AN INCOMPLETE APPLICATION.

Please read this Notice of Examination IN FULL and complete the steps of the online application (via MyMTA Portal) <u>BEFORE</u> completing your Education and Experience Test Paper (via Microsoft Forms). A critical part of this application process is filling out the Education and Experience Test Paper. THIS IS IN ADDITION TO THE ACTUAL APPLICATION PROCESS AND STEPS LOCATED IN THE "HOW TO SUBMIT AN APPLICATION" SECTION OF THIS NOTICE OF EXAMINATION.

A confirmation number will appear on the same page after submitting your application (Save this number for future reference). Please write this confirmation number down as you will need it to complete your Microsoft Forms Education and Experience Test Paper.

### The link to go back to the Exams Application Website is:

**Exam Applications** (You may need to open the link twice if you get an error regarding enabling cookies):

# The link for the Education and Experience Test Paper can be found here:

Supervisor, Storeroom Operations Education and Experience Test Paper (Exam No. 5316)

\*If you submit the Education and Experience Test Paper more than once, only your first submission will be rated.

If you do not submit your Education and Experience Exam in Microsoft Forms by midnight Eastern time on the last day of the Application Period, your examination will be considered incomplete, you will not be entitled to the appeal process, you will not receive a score and you will not be invited to subsequent portions of this examination.

Please make sure to provide a valid email address when prompted.

If you have any questions or concerns, please reach out to the Examinations Unit at <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a> or via phone at 347-643-7221 or 347-643-7222.

Please Continue Reading This Entire Notice of Examination for ALL Details and Application Steps

**Please Carefully Read the Notice of Examination** 



# **Notice of Examination**

# Supervisor, Storeroom Operations, Exam No. 5316

# **Application Deadline:**

March 15, 2025

### **Types of Tests:**

Multiple-Choice Test, Supervisory Abilities Assessment & Report Writing Assessment

### **Application Fee:**

\$91.00

If you choose to pay the application fee with a credit/debit/gift card, you will be charged a service fee of 2.95% of the payment amount.

This service fee is nonrefundable.

**Test Date:** (subject to change)

Saturday, April 26, 2025 or Sunday, April 27, 2025

Note: Unless otherwise specified, you will be randomly scheduled to test on one of the dates indicated above.

#### JOB DESCRIPTION

**Supervisors, Storeroom Operations** are responsible for a broad range of storeroom activities relating to the receipt, checking, classification, storage, distribution, and issuance of materials and supplies to support MTA Bus Company operating and capital plans. Their responsibilities also include the overseeing, scheduling and monitoring of all trucking activities and ensuring that all safe work practices are adhered to at all locations assigned. They fill requisitions, supervise inventory accountability, handle and weigh obsolete and scrap material, operate and update the automated inventory management/control system, review the stock availability usage reports and recommend the procurement of materials, maintain records, prepare reports, and perform related work.

**Special Working Conditions:** Supervisors, Storeroom Operations may be required to work various shifts including nights, Saturdays, Sundays and holidays.

(This brief description does not include all of the duties of this position.)

#### **SALARY AND BENEFITS**

The current minimum salary for Supervisor, Storeroom Operations is \$41.52 per hour for a 40-hour work week increasing to \$51.90 per hour in the sixth year of service. These rates are subject to change. The benefits of this position include, but are not limited to, night and weekend salary differentials, paid holidays, vacation and sick leave, a comprehensive medical plan and a pension plan.

#### **HOW TO QUALIFY**

**Experience Requirements:** By the **last day of the Application Period**, you must meet the following requirements:

- One year of full-time satisfactory experience as a supervisor, supervising storeroom clerks in the warehouse of a mass transportation, industrial, manufacturing, or wholesaling company or organization; plus the completion of the following, listed below in "2", before obtaining your supervisory experience:
- 2. Two years of full-time satisfactory experience as a storeroom clerk in a warehouse of a mass transportation, industrial, manufacturing or wholesaling company or organization.

If you have qualifying part-time experience, it will be credited on a prorated basis.

You are responsible for determining whether you meet the qualification requirements for this examination prior to applying. You may be given the test and assessments before we determine if you meet the qualification requirements. If you are marked "Not Qualified," your application fee will **not** be refunded, and you will **not** receive a score.

#### THE TEST

The test will consist of three distinct components: a <u>competitive</u> multiple-choice test, a <u>qualifying</u> supervisory abilities assessment and a <u>qualifying</u> report writing assessment. All three components of the test will be given in a single session on the same day. A score of at least 70% is required to pass each test. Your score on the <u>competitive</u> multiple-choice test will be used to determine your place on the eligible list.

You will be assigned to a test date and location, and you cannot request that your scheduled test date or location be changed, unless you meet the conditions in the "Special Test Accommodations" subsection below.

The multiple-choice test and supervisory abilities assessment may include questions on the following topic areas:

- **General Warehousing Documents:** Knowledge of processing paperwork and reports, and keeping records
  - Example: Entering data into an inventory log and into the stock-tracking computerized inventory management systems
- General Warehousing Practices and Procedures: Knowledge of receiving, checking, classifying, storing and distributing materials and supplies; shipping, loading and unloading; operating material-handling equipment and utilizing safe work practices
  - Example: Keeping storage areas and materials neat and orderly, ensuring a safe work environment
- **Tool Usage:** Knowledge of hand tools, power tools and/or multi-purpose tools and their proper and safe usage in general storeroom practices
  - o Example: Using a saw to cut open a crate
- Administration & Management: Knowledge of planning, coordination, and execution of business functions, resource allocation, and production
  - o Example: Coordinating daily itineraries and shipping information

- **Analysis**: The ability to identify problems, securing relevant information, relating data from different sources, and identify possible causes of problems
  - o Example: Determining how much material is needed for emergency work
- **Conflict Management:** Manages and resolves conflicts, grievances, confrontations, or disagreements in a constructive manner to minimize negative personal impact
  - o Example: Resolving a conflict among two of your assigned employees
- **Decisiveness**: Readiness to make decisions, render judgments, take action, or commit oneself
  - o Example: Deciding which jobs employees will be assigned for the day
- **Delegation**: Utilizing subordinates effectively; allocating decision-making and other responsibilities to the appropriate subordinates
  - o Example: Assigning a new employee their weekly and daily call targets
- **Development of Subordinates**: Developing the skills and competencies of subordinates through training and developmental activities related to current and future jobs
  - Example: Training an employee on how to conduct peer training for new hires
- Judgment: Developing alternative courses of action and making decisions based on logical assumptions that reflect factual information and/or recognizing imaginative solutions and innovations in work-related situations
  - Example: Determining which assignments are high priority and should be completed as soon as possible
- Management Control: Establishing procedures to monitor and/or regulate processes, tasks, or activities of subordinates and job activities and responsibilities; taking action to monitor the results of delegated assignments or projects
  - Example: Conducting quality control test calls to ensure employees are providing excellent customer service
- Planning and Organizing: Establishing a course of action for self and/or others to accomplish
  a specific goal; planning proper assignment of personnel and appropriate allocation of
  resources
  - o Example: Preparing a list of customer complaints in priority order
- Sensitivity: The ability to take an action that indicates a consideration for the feelings and needs of others
  - Example: Expressing empathy to a coworker who is going through a hard time

The <u>qualifying</u> report writing assessment will require candidates to write one or more reports based on information provided on the day of the test. Candidates will be evaluated on their ability to write concisely, comprehensively and clearly using good grammatical form. Only those candidates who achieve passing scores on the <u>competitive</u> multiple-choice test and <u>qualifying</u> supervisory abilities assessment will have their <u>qualifying</u> report writing assessment rated.

#### **HOW TO OBTAIN AN APPLICATION**

During the application period, you may apply online for this examination (see the Online Applications sub-section below). Or, if you are unable to apply online, you may obtain an electronic copy of the mail-in application package for this examination by emailing a request to <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a> during the application period. If you believe you have a special circumstance (e.g., a disability, military duty) that prevents you from applying as instructed below, please refer to the Special Circumstances Guide referenced in the "Special Test Accommodations" subsection below.

#### **HOW TO SUBMIT AN APPLICATION**

You must submit an application during the application period, and applications will <u>not</u> be accepted in person. Applicants who apply online and wish to request a Fee Waiver <u>must</u> only complete the Online Applications Steps 1 through 3 below. You will have until midnight Eastern time on the last day of the

Application Period (March 15, 2025) to clearly specify in detail all of your relevant education and experience on your Education and Experience Test and submit it in Microsoft Forms.

If you do not submit your Education and Experience Test in Microsoft Forms by midnight Eastern time on the last day of the Application Period (March 15, 2025), your application will be considered incomplete, you will not be entitled to the appeals process, you will not receive a score, you will not be invited to subsequent portions of this examination (if applicable), and your application fee will not be refunded.

#### **Online Applications:**

If you are not an active MTA employee, apply using <a href="www.mymta.info/exams">www.mymta.info/exams</a> by the last day of the application period (Active MTA employees can apply using the MTA Business Service Center (BSC) employee portal at <a href="www.mymta.info">www.mymta.info</a>). <a href="Note">Note</a>: The application system may <a href="note">not</a> function properly with mobile devices or tablets. For best results when applying, please use the latest version of Microsoft Edge, <a href="mailto:open a new window">open a new window</a>, and avoid having multiple tabs open in the same window.

- 1. To apply, log into your existing account, or create an account if you do not yet have one.
- 2. Follow the steps to submit an application.
- 3. A confirmation number will appear on the same page after submitting your application (Save this number for future reference). Please write this confirmation number down as you will need it to complete your MS Forms Education and Experience Test Paper.

<u>IMPORTANT</u>: If you are requesting a <u>fee waiver</u>, proceed to Step 7, you should not complete Steps 4, 5, or 6 below. Instead, <u>by Monday, March 31, 2025</u>, you must submit documentation supporting your fee waiver request by mail to Supervisor, Storeroom Operations, Exam No. 5132, MTA New York City Transit, 149 Pierrepont Street, Brooklyn, NY 11201, Attn: Exam Administration, 3rd Floor, Room 3.600. You must include your full name, last 4 digits of your Social Security Number (SSN), your Applicant ID Number (if known), your online application confirmation number, and the exam title and number with your request. For fee waiver request documentation requirements, please refer to the Fee Waiver Request Guide, which is accessible online at <a href="http://web.mta.info/nyct/hr/forms\_instructions.htm">http://web.mta.info/nyct/hr/forms\_instructions.htm</a> and will be attached to this Notice of Examination during the application period.

- 4. Below the confirmation number, a Pay Examination Fee button will appear for you to click to open the payment page.
- 5. A major credit card or a bank card associated with a bank account must be used when paying the application fee, and this fee will appear on your credit or bank card statement as "MTA NYCT Exam Fee." <u>Note</u>: Disputing the application fee could result in removal from this examination, and it might affect your ability to apply online for any future examinations.
- 6. You will be sent a confirmation email after you submit payment for the application fee (Save this email for future reference).

<u>Note</u>: If you have trouble paying the application fee after submitting your online application, please visit <a href="http://web.mta.info/nyct/hr/forms\_instructions.htm">http://web.mta.info/nyct/hr/forms\_instructions.htm</a> to access the Online Payment Tutorial.

7. Once you complete the payment, please click the following link: <a href="https://forms.office.com/g/bZhr3zrLUQ">https://forms.office.com/g/bZhr3zrLUQ</a>. This link will bring you to a Microsoft Forms Education and Experience Test Paper that must be completed to finalize the application process. Failure to complete this document will result in you being found not qualified for the examination.

**IMPORTANT**: Your application submission confirms that you have read this Notice of Examination, including any dates and the requirements.

**Application Fee**: This fee is generally not refundable. Under special circumstances, you may be entitled to a refund. Please refer to the Department of Citywide Administrative Services ("DCAS") General Exam Regulation E.3.4 to determine if you are entitled to a refund. Please visit <a href="http://web.mta.info/nyct/hr/forms\_instructions.htm">http://web.mta.info/nyct/hr/forms\_instructions.htm</a> to access the DCAS General Exam Regulations online. Application fee refund requests, along with any relevant supporting documentation, should be emailed to <a href="mailto:examsmakeups@nyct.com">examsmakeups@nyct.com</a> or mailed to the address in the "Correspondence" section below.

Special Test Accommodations: If you plan to request an alternate test date due to your religious observance or special test accommodations due to disability, please follow the instructions included Guide. in the Special Circumstances which is accessible online http://web.mta.info/nyct/hr/forms instructions.htm and will be attached to this Notice of Examination during the application period. An alternate test date due to religious observance must be requested no later than 15 days prior to the date on which testing is expected to begin. Special test accommodations due to disability must be requested no later than 30 days prior to the date on which the multiple-choice test, supervisory abilities assessment, and report writing assessment is expected to begin.

**Make-Up Tests:** You may apply for a make-up test if you cannot take the test as scheduled for any of the following reasons:

- 1. Compulsory attendance before a public body; or
- 2. On-the-job injury or illness caused by municipal employment where you are an officer or employee of the City; or
- 3. Absence from the test within one week after the death of a spouse, domestic partner, parent, parent-in-law, sibling, child, or child of a domestic partner where you are an officer or employee of the City; or
- 4. Absence due to ordered military duty; or
- 5. A clear error for which MTA New York City Transit is responsible; or
- 6. A temporary disability; or
- 7. Pregnancy, childbirth or a related medical condition.

To request a make-up test, submit your request with documentation of the special circumstances that caused you to miss your test (as attachments) by email to <a href="mailto:examsmakeups@nyct.com">examsmakeups@nyct.com</a> or by mail to the address in the "Correspondence" section below as soon as possible.

#### **CORRESPONDENCE**

Change of Contact Information: It is critical that you keep your contact information (i.e., telephone number, mailing address and/or email address) current with MTA New York City Transit. You may miss important information about your exam(s) or consideration for appointment or promotion, including important information that may require a response from you by a specified deadline, if we do not have your correct contact information. To update your contact information, you may:

- 1. Email us at <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a> with the subject "Contact Info Update;" or
- 2. Mail your request to the address at the end of this section.

Your request must include your full name, exam title(s), exam number(s) and your old and new telephone numbers, mailing and/or email address. MTA employees must also visit the employee

portal at <u>www.mymta.info</u> to update their contact information through the MTA Business Service Center (BSC).

All other correspondence should be sent to <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a> and must include "Supervisor, Storeroom Operations, Exam No. 5132" in the Subject. Alternatively, you can mail your correspondence to the following address:

Supervisor, Storeroom Operations, Exam No. 5316
MTA New York City Transit
149 Pierrepont Street
Brooklyn, NY 11201
Attn: Exam Administration, 3rd Floor, Room 3.600

#### **TEST SITE REQUIREMENTS**

Admission Letter or Notice of Proposed Disqualification: An Admission Letter or a Notice of Proposed Disqualification will be mailed to you at least 10 days before the first date of the multiple-choice test, supervisory abilities assessment, and report writing assessment. If you do not receive an Admission Letter or Notice of Proposed Disqualification at least 4 days before this date, you must email a request for a duplicate Admission Letter/Notice of Proposed Disqualification to <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a>. A paper copy of the Admission Letter is your ticket for admission to the test.

Applicants **must** keep their mailing address **up to date**. Please refer to the "Correspondence" section above for instructions on how to update your address and other contact information.

**Warning:** You are not permitted to enter the test site with cellular phones, smart watches, beepers, pagers, cameras, portable media players, or other electronic devices. Calculators are permitted; however, they must be hand-held, battery or solar powered, numeric only. Calculators with functions **other than** addition, subtraction, multiplication and division **are prohibited**. Electronic devices with an alphabetic keyboard or with word processing or data recording capabilities such as planners, organizers, etc. are prohibited. If you use any of these devices in the building at any time before, during or after the test, you may **not** receive your test results, your test score may be nullified, and your application fee will **not** be refunded.

You may not have any other person, including children, present with you while you are being processed for or taking the test and no one may wait for you inside of the test site while you are taking the test.

You are also not permitted to use on site any medical assistive devices, including those that give notifications or alerts, or that vibrate, without the prior express written authorization of MTA New York City Transit. You can contact MTA New York City Transit by email at: <a href="mailto:examsmakeups@nyct.com">examsmakeups@nyct.com</a>.

Required Identification: You are required to bring one (1) form of valid (non-expired) signature and photo bearing identification to the test site. The name that was used to apply for the exam must match the first and last name on the photo ID. A list of acceptable identification documents is provided below. If you do not have an acceptable ID, you may be denied testing. Acceptable forms of identification (bring one) are as follows: State issued driver's license, State issued identification card, US Government issued Passport, US Government issued Military Identification Card, US Government issued Alien Registration Card, IDNYC, Employer ID with photo, or Student ID with photo.

**Leaving:** You must leave the test site once you finish the test. If you leave the test site after being fingerprinted but before finishing the test, you will not be permitted to re-enter. If you disregard this instruction and re-enter the test site, you may not receive your test results, your test score may be nullified, and your application fee will not be refunded.

#### THE TEST RESULTS

If you meet the education and experience requirements and pass the competitive multiple-choice test, qualifying supervisory abilities assessment, and qualifying report writing assessment your name will be placed on an eligible list and you will be given a list number. You will be notified by mail of your test results. You will be considered for appointment when your name is reached on the eligible list.

#### REQUIREMENTS TO BE APPOINTED

**Driver License Requirement:** At the time of appointment, you must have a Motor Vehicle Driver License valid in the State of New York with no disqualifying restrictions that would preclude the performance of the duties of this title. If you have serious moving violations, a license suspension or an accident record you may be disqualified. This license must be maintained for the duration of your employment in the title.

**Drug Screening Requirement:** You must pass a drug screening in order to be appointed.

Residency: New York City residency is not required for this position.

**English Requirement:** You must be able to understand and be understood in English to perform the duties and responsibilities of the position.

**Proof of Identity:** Under the Immigration Reform and Control Act of 1986, you must be able to prove your identity and your right to obtain employment in the United States prior to employment with MTA New York City Transit.

#### ADDITIONAL INFORMATION

**Training:** You may be required to undergo a formalized training course during your probationary period. Failure to successfully complete the training course may result in termination.

**Probationary Period:** You will be required to complete a probationary period. If you do not successfully complete the probationary period, you may be terminated.

**Promotion Examination:** A promotion examination for this title is being held for eligible MTA Bus Company employees. The names appearing on the promotion list will be considered first in filling vacancies.

### PENALTY FOR MISREPRESENTATION

Any intentional misrepresentation on the application or examination may result in disqualification, even after appointment, and may result in criminal prosecution.

#### MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST GUIDE

#### NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST FORM

Assistance.

B) Receiving Supplemental Security Income (SSI) payments.

Receiving Public Assistance in the form of Temporary Assistance

for Needy Families (TANF)/Family Assistance or Safety Net

#### **TO ALL APPLICANTS:**

C) Receiving Medicaid benefits.

Unemployed

In accordance with Civil Service Law Section 50.5(b), the application fee shall be waived for any person who meets at least one of the following criteria during the month you wish to apply for an examination:

New York City's Workforce Investment Act program through	have served on full-time duty, other than reserves and/or training.
<b>G)</b> One-time Fee Waiver for Spouses or Domestic Partner of a Vete of the U.S. Armed Forces.	ran
examination for which yo	TION FEE WAIVER REQUEST FORM" for each ou are requesting a fee waiver.
PRINT CLEARLY C	DR TYPE INFORMATION
Name:	SS#:
Exam Title:	Exam Number:
Email Address:	Phone Number:
I request that my application fee for the examination listed above be waived in accordance with the Section 50.5(b) of the State Civil Service Law.	
hereby certify that I am qualified to receive such waiver for the re	FIRMATION********  the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning I may be banned from appointment to any position within the Cit
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concernin I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to pages 2 and 3. Complete, sign, and date this form and return	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  o you and for which you have acceptable documentation as described
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to n pages 2 and 3. Complete, sign, and date this form and return indicated examination, I am currently	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  O you and for which you have acceptable documentation as described it along with your documentation. At the time of applying for the above-
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver, of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to on pages 2 and 3. Complete, sign, and date this form and return indicated examination, I am currently  A) an individual who is unemployed.	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concernin. I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  o you and for which you have acceptable documentation as described it along with your documentation. At the time of applying for the above-
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver, of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to on pages 2 and 3. Complete, sign, and date this form and return indicated examination, I am currently  A) an individual who is unemployed.  B) an individual who is receiving Supplemental Security Incom  C) an individual who is receiving Medicaid benefits.	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  O you and for which you have acceptable documentation as described it along with your documentation. At the time of applying for the above-
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to no pages 2 and 3. Complete, sign, and date this form and return indicated examination, I am currently  A) an individual who is unemployed.  B) an individual who is receiving Supplemental Security Incom  C) an individual who is receiving Medicaid benefits.  D) an individual who is receiving Public Assistance in the form	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  O you and for which you have acceptable documentation as described it along with your documentation. At the time of applying for the above-  e (SSI) payments.  of Temporary Assistance for Needy Families (TANF)/Family Assistance
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to on pages 2 and 3. Complete, sign, and date this form and return indicated examination, I am currently  A) an individual who is unemployed.  B) an individual who is receiving Supplemental Security Incom  C) an individual who is receiving Medicaid benefits.  D) an individual who is receiving Public Assistance in the form or Safety Net Assistance.  E) a participant certified eligible for a Workforce Investment Ac	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concerning I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  O you and for which you have acceptable documentation as described it along with your documentation. At the time of applying for the above-  e (SSI) payments.  of Temporary Assistance for Needy Families (TANF)/Family Assistance
hereby certify that I am qualified to receive such waiver for the remy current eligibility in order to obtain the application fee waiver of New York, and may be subject to criminal prosecution. (Al Signature:  Fee Waiver Criteria Selection: Check only the box that applies to on pages 2 and 3. Complete, sign, and date this form and return indicated examination, I am currently  A) an individual who is unemployed.  B) an individual who is receiving Supplemental Security Incom  C) an individual who is receiving Medicaid benefits.  D) an individual who is receiving Public Assistance in the form or Safety Net Assistance.  E) a participant certified eligible for a Workforce Investment Ac	the Civil Service Law relating to the waiver of the application fee an eason indicated below. I understand that if I falsify information concernin. I may be banned from appointment to any position within the Cit I such violations will be referred to the Department of Investigation.  Date:  O you and for which you have acceptable documentation as described it along with your documentation. At the time of applying for the above-  e (SSI) payments.  Of Temporary Assistance for Needy Families (TANF)/Family Assistance  t program through New York City's Workforce1 Career Centers.

FOLLOW THE INSTRUCTIONS ON PAGES 2 & 3 AND SUBMIT AND SIGN THIS PAGE WITH THE CORRECT DOCUMENTATION.



#### MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST GUIDE

#### **EXAMINATION FEE WAIVER SUPPORTING DOCUMENTATION REQUIREMENTS**

- A) For an individual who is unemployed: Submit an "Unemployment Insurance Benefit Payment History" inquiry printout. This printout must include Week Ending dates that correspond with the month that you are applying for an exam. You may obtain this printout from the New York State Department of Labor by calling 1 (877) 221-1634 or online at www.labor.state.ny.us. For the Department of Labor outside of New York State, you may access their website at www.dol.gov for assistance in locating this type of documentation online for the state in which you reside. If you are unemployed, but not currently receiving Unemployment Insurance Benefits, you may submit an affidavit signed by you stating that you are unemployed, and notarized by a Notary Public. Your affidavit must be dated within the application period for the exam you are applying for. For unemployment benefits received outside of New York State, you may include a copy of your unemployment check that bears your Name and SS# dated and issued for the month in which you are applying for an exam.
- B) For an individual who is receiving Supplementary Security Income (SSI) payments: Submit a "Benefit Verification Break Down Letter". This printout shows the breakdown of your monthly payments on letterhead from a Social Security Administration Office in your state that is dated during the month for which you are applying for an exam and specifically indicates that you received SSI benefits that month. Award Letter Notifications re-issued during the month you are applying for an exam that does not include the added information in the OTHER IMPORTANT INFORMATION field that specifically states you are receiving SSI benefits that month will not be accepted. Parents who receive SSI benefits for their minor children are not eligible for a fee waiver.
- C) For an individual who is receiving Medicaid benefits or partial benefits that include Medicaid: Submit the "MA Case/Suffix/ Individual/Summary" printout. This printout must verify that either your eligibility for Medicaid is coded "AC" for Active, or your authorization period is currently active, or if your case has been closed, the date your case was closed. These dates must include the month for which you are applying for an exam. You may obtain this printout from your assigned worker, or from a New York City Human Resources Administration Medicaid Office or call 1 (877) HRA-8411. If you applied for Medicaid benefits through a hospital or managed care program/organization, you will need to submit documentation on letterhead from that program/organization that is dated during the month you are applying for an exam that specifically verifies your eligibility of receiving Medicaid benefits that month. For Medicaid benefits received outside New York City, you will need to submit documentation on letterhead from a social service agency in your state that is dated during the month you are applying for an exam that specifically verifies your eligibility of receiving Medicaid benefits, or indicates your case is active that month.



#### MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST GUIDE

- D) For an individual who is receiving Public Assistance in the form of Temporary Assistance for Needy Families(TANF)/Family Assistance or Safety Net Assistance benefits: Submit the "PA Case Composition-Suffix/Individual Summary" printout. This printout must verify that either your eligibility for Public/Cash Assistance is coded "AC" for Active, or if your case has been closed, the date your case was closed. These dates must include the month for which you are applying for an exam. If your case has been coded "SN" for Sanctioned, or if you recently applied for benefits and your case is coded "AP" for Application, you are not eligible to receive a fee waiver. You may obtain this printout from your assigned worker, or from a New York City Human Resources Administration Office or call 1 (877) HRA-8411. For TANF/Family Assistance or Safety Net Assistance benefits received outside New York City, you will need to submit documentation on letterhead from a social service agency in your state that is dated during the month you are applying for an exam that specifically verifies your eligibility of receiving TANF/Family Assistance or Safety Net Assistance benefits, or indicates your case is Active that month.
- E) For a participant certified eligible for a Workforce Investment Act program through New York City's Workforce1 Career Centers: Submit documentation on letterhead from the Department of Small Business Services that is dated during the month for which you are applying for an exam and specifically indicates that you are a participant registered with the City's Workforce1 Career Centers for that month. You may obtain this letter only by calling the New York City Department of Small Business Services at (212) 513-6406.
- For an individual who has served in the U.S. Armed Forces on full-time active duty, other than reserves and/or training, and has not previously received a Veterans Fee Waiver: Participants must have been discharged under honorable conditions from the Armed Forces of the United States (Army, Navy, Marine Corps, Air Force, Coast Guard or the National Guard only). The Veterans Exam Fee Waiver cannot be used retroactively for any exam for which you have already applied. Proper documentation must accompany your application. Mail a clear copy of your separation papers (Form DD214, long form) or a Statement of Service letter along with your application package. The Veterans Exam Fee Waiver is available for Promotion and Open Competitive exams. Please note that Veterans Preference Credits and the Veterans Exam Fee Waiver are two separate programs that have different purposes and criteria.
- G) One-time Fee Waiver for Spouses or Domestic Partner of a Veteran of the US Armed Forces: At the time of exam filing, you must be a Spouse or Domestic Partner of a Veteran and the Veteran must be a United States citizen or an alien lawfully admitted for permanent residence, have received an honorable discharge or have been released under honorable conditions from the Armed Forces of the United States (i.e., 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) or have received deployment orders on U.S. Armed Forces letterhead, and have served or is serving on full-time active duty, other than active duty for training.

#### **SUBMISSION INSTRUCTIONS**

By the deadline stated in the Notice of Examination, you must submit documentation supporting your fee waiver request by mail to MTA New York City Transit, ATTN: Fee Waiver Request for (*Insert Exam Title and Number*), 149 Pierrepont Street, Room 3.600, Brooklyn, NY 11201.



# SPECIAL CIRCUMSTANCES Directions for Submission of Requests

<u>IMPORTANT</u>: If you believe you have a special circumstance (e.g., disability, military duty) that prevents you from applying as instructed in the Notice of Examination, you may email us during the application period at <u>examsmakeups@nyct.com</u> to inquire about any available alternative application options.

#### (A) RELIGIOUS OBSERVANCE:

Please be advised that if you are unable to test on <u>any</u> of the test dates listed on the Notice of Examination because of religious observance, you must notify us of the potential conflict at least <u>fifteen (15) days</u> before the first listed test date. Please do not wait to submit your request until you have been sent an Admission Letter, or your request could be denied due to lateness. A separate request must be submitted for **each** exam, and each request must include:

- your full name and Applicant ID (if known) or the last 4 digits of your Social Security Number (SSN),
- · the exam number and title, and
- a signed statement on letterhead from your religious organization certifying that your religious observance prohibits you
  from taking the test on the scheduled date. Please note that <u>you</u> must submit your religious organization's statement
  with your request; the statement must be dated within the last 12 months; and the statement must be signed by your
  religious leader or their designee.

To submit the request and documentation described above, you must email or write to:

examsmakeups@nyct.com (Please include your signed statement from your religious leader as an attachment.)
Mail: MTA NYC Transit, (Insert Exam Title & Number) – Spec. Circumstances, 149 Pierrepont Street, Room 3.600,
Brooklyn NY 11201 NOTE: Mail must be postmarked by the deadline.

#### (B) DISABILITY:

If you have a disability which will interfere with your ability to take <u>any</u> test in this examination without special accommodation(s) or other assistance, you must submit a written request for specific special accommodation(s) for <u>each</u> test no later than <u>thirty (30) days</u> before the first test date listed on the Notice of Examination (NOE). Each request must include:

- your full name and Applicant ID (if known) or the last 4 digits of your Social Security Number (SSN).
- the exam number and title,
- the specific nature of your disability and a justification for the special accommodation(s), and
- a statement corroborating your disability by a doctor or agency authorized for this purpose. Please note that MTA New York City Transit may request additional information, including medical documentation evidencing that you have a disability and the need for specific special testing accommodation(s). If you have been approved for special testing accommodations in the past, either while attending school or for employment purposes, feel free to include that supporting documentation, as it may expedite the review process.

If you have a temporary disability, pregnancy-related, or child-birth-related condition which prevents you from taking a test on the date that it is scheduled, which is listed on the Notice of Examination (NOE), you may request a make-up exam by submitting a request no later than **one week following close of the application period**, or, if the temporary disability, pregnancy-related, or child-birth-related condition arises after that date, within **one week following the occurrence**. In addition to the information specified above, the request must include original medical documentation signed by an appropriate, licensed doctor specifying 1) the nature of the condition, 2) the duration of the condition, 3) the functional limitations of the condition, and 4) why the condition prevents you from taking the test as scheduled. Where appropriate and practicable, MTA New York City Transit may provide an alternative form of accommodation, such as an alternative test site.

IMPORTANT: Supporting documentation must satisfy the criteria above. Documentation satisfying an employer's requirement(s) for a leave of absence may **not** be sufficient.

#### To submit the request and documentation described above, you must email or write to:

Email: <a href="mailto:examsmakeups@nyct.com">examsmakeups@nyct.com</a> (Please attach documentation signed by your doctor or authorized agency.)

Mail: MTA NYC Transit, (Insert Exam Title & Number) — Spec. Circum.,149 Pierrepont Street, Room 3.600, Brooklyn, NY 11201 NOTE: Mail must be postmarked by the deadline, and you are strongly encouraged to purchase tracking when mailing.

Page 1 of 3 03/02/2024JG



# SPECIAL CIRCUMSTANCES Directions for Submission of Requests

#### (C) VETERANS' / DISABLED VETERANS' CREDIT (ONLY FOR CIVIL SERVICE EXAMS):

For Veterans' or Disabled Veterans' Credit, you must meet the following requirements by the date of appointment or promotion:

- a. Be a resident of New York State; and
- b. Be a United States citizen or an alien lawfully admitted for permanent residence; and
- c. Received an honorable discharge or release under honorable conditions 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; and
- d. Have served on full-time active duty, other than active duty for training, in at least one of the following Time of War periods below:

0

R

#### Armed Forces of the United States during:

World War II (Dec 7, 1941 - Dec 31,1946); **or** Korean Conflict (Jun 27, 1950 - Jan 31, 1955); **or** Vietnam Conflict (Feb 28, 1961 - May 7, 1975); **or** Persian Gulf Conflict (Aug 2, 1990 - to be determined). You must have received the armed forces expeditionary medal, navy expeditionary medal, or marine corps expeditionary medal for:

Hostilities in Lebanon (Jun 1, 1983 - Dec 1, 1987); or Hostilities in Grenada (Oct 23, 1983 - Nov 21, 1983); or Hostilities in Panama (Dec 20, 1989 - Jan 31, 1990).

For Disabled Veterans' Credit, in addition to a, b, c, and d, at the time the list is established, you must have been found to have a service connected disability incurred in a Time of War period listed above, which has been rated at least 10 percent by the U.S. Department of Veterans Affairs (V.A.). If the V.A. has not certified the disability as permanent, it must have been rated at least 10 percent by a V.A. physician no more than one year prior to the date of filing your application or the date of establishment of the eligible list. Veterans' or Disabled Veterans' Credit should be requested at the time of application but MUST be requested before the date the eligible list is established. Claims for Veterans' or Disabled Veterans' Credit will not be processed once the eligible list is established. All claims for Veterans' or Disabled Veterans' Credit will be investigated and you will be required to produce documentation, such as discharge papers, to prove that you are eligible for the credit. All requests for Veterans' or Disabled Veterans' Credit must include your full name and Applicant ID (if known) or the last 4 digits of your Social Security Number (SSN), and the exam number and title.

<u>POINTS</u>: <u>Disabled</u> veterans are entitled to receive ten additional points in an exam for original appointment or five additional points in a promotion exam. <u>Non-disabled</u> veterans are entitled to receive five additional points in an exam for original appointment or two and one-half additional points in a promotion exam. <u>Exception</u>: If you were certified as a disabled veteran after using non-disabled Veterans' Credit, please refer to <a href="https://www.cs.ny.gov/vetcredits/">https://www.cs.ny.gov/vetcredits/</a> for additional information.

#### Note:

- 1. You may use Veterans' or Disabled Veterans' Credit only once after January 1, 1951 for appointment or promotion from a City, State, or County civil service list from a jurisdiction within the State of New York. <u>Note</u>: See exception above.
- 2. Veterans' or Disabled Veterans' credit will be added only to the final score of those candidates who pass all tests associated with the examination.
- 3. Above is only a summary of necessary conditions; complete provisions are contained in statutory and/or decisional law. 
  To submit a request after applying and before the eligible list is established, you must email or write to:

  Email: <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a> (You can attach any relevant supporting documentation to your emailed request)

  Mail: MTA NYC Transit, (Insert Exam Title & Number) Spec. Circum., 149 Pierrepont Street, Room 3.600, Brooklyn, NY 11201 NOTE: Mail must be postmarked by the deadline, and you are strongly encouraged to purchase tracking when mailing.

## (D) LEGACY CREDIT (ONLY FOR OPEN COMPETITIVE CIVIL SERVICE EXAMS):

Ten points can be added to the open competitive exam score of a candidate who is the child or sibling of (1) an individual who served the City of New York as a Firefighter, Police Officer, Emergency Medical Technician or Paramedic and was killed in the line of duty; (2) an individual who served the City of New York as a Firefighter or Police Officer and died in the performance of duty as the result of the World Trade Center attack on September 11, 2001 or as the result of participation in the rescue efforts that took place in response to the attack; or (3) an FDNY EMS member in the service of the City of New York who died in the performance of duty as the result of the World Trade Center attack on September 11, 2001 or as the result of participation in the rescue efforts that took place in response to the attack. A candidate can receive Legacy

Page 2 of 3 03/2/2024JG



# SPECIAL CIRCUMSTANCES Directions for Submission of Requests

Credit for no more than one parent or one sibling. A candidate can, however, receive Legacy Credit for both a parent and a sibling, in which case, the candidate may be entitled to 20 points. Legacy Credit must be requested in accordance with the instructions below before the date the eligible list is established. Claims for Legacy Credit will not be processed once the eligible list is established. All candidates making such claims will be required to present to the hiring agency prior to appointment documentation verifying their claim. All claims for Parent or Sibling Legacy Credit will be investigated. All Requests for Legacy Credit, whether sent by mail or email, must include your full name and Applicant ID (if known) or the last 4 digits of your Social Security Number (SSN); the exam title and number; and whether the request is for Parent Legacy Credit, Sibling Legacy Credit, or both.

#### Note:

- 1. You may use Legacy Credit only once for appointment from a City, State, or County open competitive civil service eligible list from a jurisdiction within the State of New York.
- 2. Legacy Credit will be added only to the final score of those candidates who pass all parts of the open competitive examination.
- 3. The above description of Legacy Credit is only a summary of necessary conditions. The complete provisions are contained in the relevant statutory and/or decisional laws governing Parent and Sibling Legacy Credit.

#### To submit the request described above, you must email or write to:

Email: <a href="mailto:examsunit@nyct.com">examsunit@nyct.com</a> (You can attach any relevant supporting documentation to your emailed request.)

Mail: MTA NYC Transit, (Insert Exam Title & Number) – Spec. Circum., 149 Pierrepont Street, Room 3.600, Brooklyn, NY 11201 NOTE: Mail must be postmarked by the deadline, and you are strongly encouraged to purchase tracking when mailing.

#### (E) CHANGE OF CONTACT INFORMATION:

It is critical that you keep your contact information (e.g., email address, mailing address, telephone number) current with MTA New York City Transit. If your contact information is not up to date, you could miss important information about your exam(s) or consideration for appointment, including important information that may require a response by a specified deadline. Your request must include your full name and Applicant ID (if known) or the last 4 digits of your Social Security Number (SSN), your exam title(s) and number(s), and your previous and new contact information.

#### To update your contact information:

- 1. Email us at examsunit@nyct.com, with the subject named CONTACT INFO UPDATE, or
- Mail us at MTA NYC Transit, (Insert Exam Title[s] & Number[s]) Spec. Circum., 149 Pierrepont Street, Room 3.600, Brooklyn NY, 11201.

#### **IMPORTANT:**

- If you are an MTA employee, all changes to your contact information must also be made through the MTA Business Service Center (BSC) via the employee portal at <a href="http://www.mymta.info">http://www.mymta.info</a>.
- If you are on an established eligible list for a Civil Service exam (i.e., an exam for NYC Transit or Bridges and Tunnels), you must also keep your contact information current with New York City's Department of Citywide Administrative Services (DCAS). To request a change to your name or SSN, you must complete and submit DCAS' Data Correction Form (<a href="https://www1.nyc.gov/assets/dcas/downloads/pdf/employment/dp148a.pdf">https://www1.nyc.gov/assets/dcas/downloads/pdf/employment/dp148a.pdf</a>). To request a change to your contact information, you must submit your request to DCAS by mail at 1 Centre Street, 14th Floor, New York, NY 10007, or by email at <a href="mailto:oasys@dcas.nyc.gov">oasys@dcas.nyc.gov</a>. Please include your old (i.e., incorrect) and new (i.e., correct) information with your request(s). You may miss a chance for appointment or promotion if DCAS does not have your correct name, SSN, and/or contact information.

Page 3 of 3 3/2/2024JG