CITY OF NORWICH HR DEPARTMENT

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

NOTICE TO CROSSFILING EXAMINATION APPLICANTS

CANDIDATES WHO ARE CROSSFILING FOR EXAMINATIONS WITH OTHER JURISDICTIONS SHOULD INDICATE ON THEIR APPLICATIONS THAT THEY HAVE CROSSFILED WITH OTHER AGENCIES AND <u>SPECIFY THE EXAMINATION SITE</u> AT WHICH THEY WISH TO BE TESTED. IT IS THE CANDIDATE'S RESPONSIBILITY TO ENSURE THAT HE/SHE HAS FILED AN APPLICATION WITH EACH INDIVIDUAL AGENCY, AND THAT ALL AGENCIES ARE AWARE OF WHICH EXAMINATION SITE HE/SHE HAS CHOSEN.

IF YOU ARE CROSSFILING WITH OTHER JURISDICTIONS, PLEASE LIST THE AGENCIES, THE EXAM NUMBER AND TITLE. RETURN THIS FORM WITH YOUR APPLICATION.

IF YOU ARE TAKING MULTIPLE CITY OF NORWICH EXAMS <u>ONLY</u>, DO NOT COMPLETE THIS FORM.

IF YOU ARE TAKING THE CITY OF NORWICH EXAM IN <u>ADDITION</u> TO OTHER JURISDICTIONS EXAMS, YOU MUST LIST ALL CITY OF NORWICH EXAM TITLES AND EXAM NUMBERS THAT YOU ARE TAKING ALSO.

	EXAM DAT	E:
JURIS	SDICTION	EXAM TITLE AND NUMBER
1		
2		
3		
PLEASE INDICATE THE EXAMINATION SITE AT WHICH YOU WISH TO BE TESTED: EXAM SITE:		
	EXAMISITE	
NAME:		
ADDRESS:		
SS#:		
DAYTIME P	HONE #:	

CITY OF NORWICH ONE CITY PLAZA NORWICH NY 13815 PHONE: 607-334-1235 FAX: 607-