



Notice of Examination

Bus Operator, Exam Nos. 4615, 4616, and 4617

Application Fee:

\$68.00

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.

Type of Test:

Multiple-Choice Test

APPLICATION AND TEST SCHEDULE

Periodic application periods and testing will be held as shown in the table below to meet the anticipated hiring needs of the agency.

WHEN TO APPLY

<u>Exam No.</u>	<u>Application Period</u>	<u>Multiple-Choice Test Date</u>
4615	April 1, 2024 – April 30, 2024	Expected to begin May 20, 2024
4616	May 1, 2024 – May 31, 2024	Expected to begin June 24, 2024
4617	June 1, 2024 – June 30, 2024	Expected to begin July 29, 2024

You may apply for more than one exam listed above. You cannot, however, apply for the same exam more than one time. If you submit multiple applications for the same exam you will only be tested one time for that exam and your additional application fee(s) will not be refunded.

JOB DESCRIPTION

Bus Operators, under general supervision, safely and efficiently operate an MTA New York City Transit bus transporting passengers along an assigned route while adhering to a schedule, New York City traffic regulations, New York State laws, and MTA New York City Transit rules and regulations.

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They ensure the proper payment of fares; issue and collect transfers; ensure the safety of passengers; ensure the safety and security of the assigned bus; perform pre-trip and post-trip inspections; complete various reports; and perform related work.

Some of the physical activities performed by Bus Operators and environmental conditions experienced are: working outdoors in all weather conditions; communicating with customers; walking up and down stairways and ramps; avoiding hazards in depots; hearing horns, buzzers, and verbal warnings; distinguishing colored lights; seeing and anticipating traffic hazards at a distance and in all directions; making visual inspections of buses; sitting for long periods of time; operating a wheelchair lift; and climbing into and out of an Operator's seat.

Special Working Conditions: Bus Operators 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 Bus Operator is \$26.98 per hour for a 40-hour work week increasing to \$38.54 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

There are no formal education or experience requirements for this position.

THE TEST

You will be given a multiple-choice test. A score of at least 70% is required to pass this test. Your score on this test will determine your place on the eligible list.

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

Veterans' or Disabled Veterans' Credit will be granted only to eligible passing candidates who request that they be applied. 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 cannot be made once the eligible list is established.

The multiple-choice test may measure your knowledge, skills and abilities in the following and other related areas:

- **Written Comprehension** – The ability to understand written sentences or paragraphs
 - Example: *Understanding written bulletins released by MTA New York City Transit*
- **Written Expression** – The ability to use English words or sentences in writing so others will understand
 - Example: *Writing incident reports regarding unusual occurrences*
- **Short Term Memorization** – The ability to remember information, such as work assignments, rules, and procedures immediately after hearing them
 - Example: *Remembering the bus route detour immediately after the detour was stated by the dispatcher over the two-way radio*

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- **Problem Sensitivity** – The ability to tell when something is wrong or likely to go wrong. It includes being able to identify the whole problem as well as elements of the problem.
 - Example: *Recognizing that a parked truck in the bus lane may interfere with the normal operation of the bus*
- **Deductive Reasoning** – The ability to apply general rules to specific problems to come up with logical answers. It involves deciding if an answer makes sense.
 - Example: *Applying MTA New York City Transit rules and regulations to situations to determine the appropriate action that must be taken*
- **Inductive Reasoning** – The ability to combine separate pieces of information, or specific answers to problems to form general rules or conclusions. It includes coming up with a logical explanation for why a series of unrelated events occur together.
 - Example: *Determining the action that must be taken based on a combination of observations and radio chatter from other Bus Operators and the Dispatcher*
- **Spatial Orientation** – The ability to tell where you are in relation to the location of some object or to tell where the object is in relation to you
 - Example: *Reading a map and understanding where bus stops are in relation to your location*
- **Visualization** – The ability to imagine how something will look after it is moved around or when its parts are moved or rearranged
 - Example: *Understanding that the scene you saw in your front window is the same scene, just rotated when shown in your rear view mirror after you pass the scene*
- **Customer Service** – The ability to provide information to passengers in a professional and courteous manner
 - Example: *Giving a passenger directions to a location*

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 examsunit@nyct.com 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 **not** be accepted in person. Applicants who apply online and wish to request a Fee Waiver **must** only complete the Online Applications Steps 1 through 4 below.

Online Applications:

1. If you are not an active MTA employee, apply using www.mymta.info/exams by the last day of the application period (Active MTA employees can apply using the MTA Business Service Center (BSC) employee portal at www.mymta.info).

Note: The application system may **not** function properly with mobile devices or tablets. For best results when applying, please use the latest version of Microsoft Edge, open a new window, and avoid having multiple tabs open in the same window.

2. To apply, log into your existing account, or create an account if you do not yet have one.
3. Follow the steps to submit an application.

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4. A confirmation number will appear on the same page after submitting your application (Save this number for future reference).

IMPORTANT: If you are requesting a fee waiver, you should not complete Steps 5, 6, or 7 below. Instead, by the first weekday two weeks after the application period deadline for the exam number you applied for, you must submit documentation supporting your fee waiver request by mail to Bus Operator, Exam Nos. 4615, 4616, and 4617, 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 http://web.mta.info/nyct/hr/forms_instructions.htm and will be attached to this Notice of Examination during the application period.

5. Below the confirmation number, a Pay Examination Fee button will appear for you to click to open the payment page.
6. 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.” Note: Disputing the application fee could result in removal from this examination, and it might affect your ability to apply online for any future examinations.
7. You will be sent a confirmation email after you submit payment for the application fee (Save this email for future reference).

Note: If you have trouble paying the application fee after submitting your online application, please visit http://web.mta.info/nyct/hr/forms_instructions.htm to access the Online Payment Tutorial.

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 http://web.mta.info/nyct/hr/forms_instructions.htm to access the DCAS General Exam Regulations online. Application fee refund requests, along with any relevant supporting documentation, should be emailed to examsmakeups@nyct.com 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 in the Special Circumstances Guide, which is accessible online at 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 the multiple-choice 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 testing is expected to begin.

Make-Up Tests: You may apply for a make-up test if you cannot take the multiple-choice 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

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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 examsmakeups@nyct.com 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 examsunit@nyct.com 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, MTA New York City Transit Employees, and employees of other MTA related agencies must also visit the employee portal at www.mymta.info to update their contact information through the “BSC.”**

All other correspondence should be sent to examsunit@nyct.com and must include “Bus Operator, Exam Nos. 4615, 4616, and 4617” in the Subject. Alternatively, you can mail your correspondence to the following address:

Bus Operator, Exam Nos. 4615, 4616, and 4617
MTA New York City Transit
149 Pierrepont Street
Brooklyn, NY 11201
Attn: Exam Administration, 3rd Floor, Room 3.600

TEST SITE REQUIREMENTS

Admission Letter: An Admission Letter will be mailed to you at least 10 days before the first date of the multiple-choice test. If you do not receive an Admission Letter at least 4 days before this date, you **must** email a request for a duplicate Admission Letter to examsunit@nyct.com. 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 **not** permitted. 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.

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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.

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 pass the multiple-choice test, your name will be placed in final score order on an eligible list and you will be given a list number. You will be notified by mail of your test results. If you meet all requirements and conditions, 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 possess a motor vehicle driver license valid in the State of New York for at least three years immediately prior to the date you are appointed to this position. If you have serious moving violations, license suspension or an accident record, you may be disqualified. Additionally, you must have either:

1. A Class A or Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no restrictions that would preclude the performance of Bus Operator work; or
2. A Learner's Permit for a Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no restrictions that would preclude the performance of Bus Operator work.

If you are appointed under "2" above, you must obtain the Class B Commercial Driver License during the training program in bus operation.

The Class A or Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no restrictions must be maintained for the duration of your employment in the title. Such license and/or Learner Permit must not include any restrictions which would preclude the performance of Bus Operator work.

Commercial Motor Vehicle Driving Experience in the Military or New York National Guard: If you are an active member or former member (discharged in the past year) of the military or New York National Guard and have experience driving a Commercial Motor Vehicle in the military or New York National Guard, you may be eligible for a waiver of the New York State commercial driving skills test through the New York State Department of Motor Vehicles. If you believe that you may be eligible for this waiver, you must apply for the waiver through the New York State Department of Motor Vehicles.

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Medical Requirement: Medical guidelines have been established for the position of Bus Operator. You will be examined to determine whether you can perform the essential functions of the position. Where appropriate, a reasonable accommodation will be provided for a person with a disability to enable such person to perform the essential functions of the job.

Drug Screening Requirement: You must pass a drug screening in order to be appointed, and if appointed, you will be subject to random drug and alcohol tests for the duration of your employment. Additionally, if you have tested positive on a drug or alcohol test or had a refusal to test during pre-employment or while employed by a Federal DOT-regulated employer during the applicable period, you must have completed the Substance Abuse Professional (SAP) evaluation, referral and education/treatment process required by federal law in order to be appointed to this safety-sensitive position.

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: All appointees must satisfactorily complete a Bus Operator training program in accordance with MTA New York City Transit standards. Appointees who do not satisfactorily complete the training program will be subject to being terminated.

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

PENALTY FOR MISREPRESENTATION

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



New York City Transit

149 Pierrepont Street, Room 3.600
Brooklyn NY 11201

MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST GUIDE

TO ALL APPLICANTS:

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:

A) Unemployed.	B) Receiving Supplemental Security Income (SSI) payments.
C) Receiving Medicaid benefits.	D) Receiving Public Assistance in the form of Temporary Assistance for Needy Families (TANF)/Family Assistance or Safety Net Assistance.
E) Certified eligible for a Workforce Investment Act program through New York City's Workforce1 Career Centers.	F) Veterans Fee Waiver for U.S. Armed Forces service members who have served on full-time active duty, other than reserves and/or training.
	G) One-time Fee Waiver for Spouses or Domestic Partner of a Veteran of the US Armed Forces.

You must complete a separate "EXAMINATION FEE WAIVER REQUEST FORM" for each examination for which you are requesting a fee waiver.

PRINT CLEARLY OR TYPE INFORMATION

Name: _____ SS#: _____ - _____ - _____

Exam Title: _____ Exam 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.

*****AFFIRMATION*****

I have read the above-mentioned portion of Section 50.5(b) of the Civil Service Law relating to the waiver of the application fee and hereby certify that I am qualified to receive such waiver for the reason indicated below. I understand that if I falsify information concerning my current eligibility in order to obtain the application fee waiver, **I may be banned from appointment to any position within the City of New York, and may be subject to criminal prosecution. (All such violations will be referred to the Department of Investigation.)**

Signature: _____ Date: _____

Fee Waiver Criteria Selection: Check only the box that applies to you and for which you have acceptable documentation as described on pages 2 and 3. Complete, sign, and date this form and return it along with your documentation. At the time of applying for the above-indicated examination, I am currently...

- A) an individual who is unemployed.
- B) an individual who is receiving Supplemental Security Income (SSI) payments.
- C) an individual who is receiving Medicaid benefits.
- D) an individual who is receiving Public Assistance in the form of Temporary Assistance for Needy Families (TANF)/Family Assistance or Safety Net Assistance.
- E) a participant certified eligible for a Workforce Investment Act program through New York City's Workforce1 Career Centers.
- F) 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.
- G) an individual who is a spouse or domestic partner of a Veteran of the US Armed Forces (one-time use).

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.

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- 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.
- F) 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.



IMPORTANT: 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 examsmakeups@nyct.com to inquire about any available alternative application options.

(A) RELIGIOUS OBSERVANCE:

Please be advised that if you are unable to test on **any** of the test dates listed on the Notice of Examination because of religious observance, you must notify us of the potential conflict at least **fifteen (15) days** 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 **you** 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 **any** test in this examination without special accommodation(s) or other assistance, you must submit a written request for specific special accommodation(s) for **each** test no later than **thirty (30) days** 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: examsmakeups@nyct.com (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.



(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:

<u>Armed Forces of the United States during:</u> 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).	O R	<u>You must have received the armed forces expeditionary medal, navy expeditionary medal, or marine corps expeditionary medal for:</u> 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).
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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.**

POINTS: Disabled veterans are entitled to receive ten additional points in an exam for original appointment or five additional points in a promotion exam. Non-disabled 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. **Exception:** If you were certified as a disabled veteran after using non-disabled Veterans' Credit, please refer to <https://www.cs.ny.gov/vetcredits/> 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. **Note:** 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: examsunit@nycct.com (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



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: examsunit@nyct.com (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
2. 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 <http://www.mymta.info>.
- 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 (<https://www1.nyc.gov/assets/dcas/downloads/pdf/employment/dp148a.pdf>). 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 osys@dcas.nyc.gov. 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.