Religious Accommodation Form

Most written tests are held on Saturdays. If you cannot take the test on the announced test date due to a conflict with a religious observance or practice, we will make arrangements for you to take the test on a different date.

TO BE COMPLETED BY THE APPLICANT:

I hereby certify that I am a member of a church or a religious group that will observe the Sabbath on __________________________. It is contrary to the religious tenets of this church or religious group for me to participate in a civil service examination during the Sabbath.

Name of religious organization __________________________________________

Address of religious organization __________________________________________

I further certify that I will neither seek nor receive any information regarding the general or specific content of any examination held on this date.

PRINT NAME ________________________________________________________

DATE __________________________

SIGNATURE _________________________________________________________

EXAM DATE __________________________

SOCIAL SECURITY NUMBER ____________________________________________

EXAM TITLE _________________________________________________________

BROOME COUNTY DEPARTMENT OF PERSONNEL
BROOME COUNTY OFFICE BUILDING, PO BOX 1766
BINGHAMTON, NY 13902
REGULAR HOURS: MONDAY THROUGH FRIDAY 8:30 A.M. – 5:00 P.M

H:forms/civilservice/Religious accomodation
New letterhead- 01/13