

Original Exam No.
Exam Title
Date Effective

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**Westchester County  
Department of Human Resources  
Recruitment and Selection  
148 Martine Avenue  
White Plains, NY 10601**

**Request for Alternate Exam Date  
For Religious Observance /Practice**

**Social Security #** \_\_\_\_\_

This is in reply to your request that special arrangements be made for you to take the above examination on an alternate date due to conflict with a religious observance or practice.

Arrangements will be made to grant your request. You are to report for the written test at the time and place stated on your alternate admission card that will be mailed at a later date. It is necessary that Part I of the attached form be completed by your Pastor, Rabbi, or official of your church. Mail this notice, with Parts I and II completed, or bring it with you when you report for the examination. You will not be admitted to the examination unless you present this form signed by your Pastor, Rabbi or official of your synagogue, church or religious group.

This form may remain in effect for a period of three years.

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