



Notice of Examination

Collecting Agent, Exam No. 2604

Application Deadline:

December 21, 2021

Type of Test:

Education and Experience Test

Application Fee:

\$68.00

Test Date:

Not Applicable

JOB DESCRIPTION

Collecting Agents, under supervision, perform routine work involved in the collection, transportation and delivery of revenue and fare media from various New York City Transit and other MTA agency facilities and locations including subway, elevated and surface lines to the central revenue and fare media bureau and from the revenue bureau to banks or depositories; stock MetroCard Vending Machines (MVM) and provide security for MVM technicians; complete forms; keep records; make reports; serve as armed revenue guards; drive armored trucks; and perform related work.

Some of the physical activities performed by Collecting Agents and environmental conditions experienced are: lifting and carrying revenue bags and cash boxes; working as a crew member on armored trucks; walking at a fast pace; standing for long periods; frequently stepping up to and down from two-foot heights; and working outdoors in all weather conditions.

Special Working Conditions: Collecting Agents 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 Collecting Agent is \$24.24 per hour for a 40-hour work week increasing to \$34.63 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.

READ CAREFULLY AND SAVE FOR FUTURE REFERENCE

Application Period Opened: December 1, 2021

HOW TO QUALIFY

Experience and License Requirements:

1. By the **last day of the Application Period**, you must meet one of the following experience requirements:
 - (A) Three years of full-time experience as an armed armored car guard, armed security guard, armed peace officer, armed military police officer or comparable armed work experience in a related field; or three years of full-time experience in New York City Transit as a Station Agent or Transit Property Protection Agent; **or**
 - (B) Two years of full-time experience described in “1A” above, plus at least two years of full-time experience as an unarmed armored car guard or security guard, peace officer, military police officer or in a position performing comparable work.
2. By the **last day of the Application Period**, you must also possess:
 - (A) A valid Carry Business, Limited Carry Business, Carry Guard or Special Carry Guard Handgun License issued by the New York City Police Department or issued by a jurisdiction in New York State, valid for carry in New York City.

You must provide a copy of your Pistol Permit with your application. Failure to provide a copy of your Pistol Permit will result in you being marked “not qualified.”

Persons retired from public service are advised to consult with their pension system regarding the pension implications of a possible appointment as a Collecting Agent with New York City Transit.

The following are examples of types of experience that are **not** acceptable: bail bond investigator, bodyguard, chauffeur, or private investigator.

You are responsible for determining whether you meet the qualification requirements for this examination prior to submitting the *Application*. If you are marked “Not Qualified,” your application fee will **not** be refunded, and you will **not** receive a score.

REQUIREMENTS TO BE APPOINTED

Vaccination Requirement: As of November 14, 2021, MTA New York City Transit is requiring all new hires to be fully vaccinated against Covid-19. “Fully vaccinated” means having received both doses of a 2-dose vaccine and two weeks have elapsed since the second dose, or having received 1 dose of a 1-dose vaccine and two weeks have elapsed since the dose.

You can request a medical or religious accommodation from this requirement by forwarding your requests to Workforce.Relations@nyct.com. To contact us call 347-643- 8209.

(Continued)

READ CAREFULLY AND SAVE FOR FUTURE REFERENCE

Application Period Opened: December 1, 2021

REQUIREMENTS TO BE APPOINTED (Continued)

Handgun License Requirement: At the time of appointment, you must still possess a valid pistol permit described in the "HOW TO QUALIFY" section. At this time, you will receive the New York City Transit endorsement for your pistol permit. This permit must be maintained for the duration of employment. Failure to maintain this permit while employed in the title of Collecting Agent may result in termination.

Driver License Requirement: At the time of appointment, you must possess either:

1. A Class B Commercial Driver License valid in the State of New York with no airbrake restrictions and no restrictions which would preclude the performance of Collecting Agent work; or
2. A motor vehicle driver license valid in the State of New York. A Learner's Permit for a Class B Commercial Driver License valid in the State of New York, with no airbrake restrictions and no restrictions which would preclude the performance of Collecting Agent work, must be obtained within 60 days of appointment.

If you qualify under "2" above, your appointment will be subject to the receipt of a Class B CDL valid in the State of New York with no airbrake restrictions and no other disqualifying restrictions within 60 days of appointment, or your employment will be terminated. If you have serious moving violations, a license suspension or an accident record, you may be disqualified.

The Class B Commercial Driver License (CDL) with a passenger endorsement, no airbrake restrictions and no other disqualifying 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 Collecting Agent 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.

Medical Requirement: Medical guidelines have been established for the position of Collecting Agent. 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 them to perform the essential functions of the job.

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.

READ CAREFULLY AND SAVE FOR FUTURE REFERENCE

Application Period Opened: December 1, 2021

HOW TO OBTAIN AN APPLICATION

During the application period, the application and other required forms for this examination will be attached to this Notice of Examination. Additional copies may be obtained during the application period at <http://mta.info/nyct/hr/appexam.htm> by selecting the exam title in the exam schedule. The MTA Exam Information Center, located in the lobby of 180 Livingston Street, Brooklyn, NY 11201, is currently closed. 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 “How to Submit an Application” section below.

REQUIRED FORMS

1. **Application:** Make sure that you follow all instructions included with your application, including payment of fee. Save a copy of the instructions for future reference.
2. **Education and Experience Test Paper:** Write your social security number in the box at the top of the cover page, and the examination title and number in the box provided. This form must be filled out completely and in detail for you to receive your proper rating. Keep a copy of your completed Education and Experience Test Paper for your records.
3. **Pistol Permit:** You must provide a copy of your Pistol Permit with your application. Failure to provide a copy of your Pistol Permit will result in you being marked “not qualified.”

HOW TO SUBMIT AN APPLICATION

If you believe you meet the requirements in the “How to Qualify” section, you **must** apply by mail. MTA New York City Transit will **not** accept applications in person.

Applications by mail must:

1. Include all of the required forms, as indicated in the “Required Forms” section above.
2. Be postmarked by the last day of the application period.
3. Be mailed to the address in the “Correspondence” section of this notice.
4. Include the appropriate fee in the form of a money order, **or** include appropriate documentation supporting your fee waiver 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.

The Money Order (Postal Money Order preferred) must:

1. Be made payable to MTA New York City Transit.
2. Be valid for one year.
3. Have the following information written on it: your name, home address, the last four digits of your Social Security Number (SSN), and the exam title and exam number.

Save your money order receipt for future reference and proof of submitting an application.

Cash and personal checks will not be accepted.

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

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READ CAREFULLY AND SAVE FOR FUTURE REFERENCE

Application Period Opened: December 1, 2021

HOW TO SUBMIT AN APPLICATION (Continued)

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 Circumstances Guide: This guide is located on the MTA website at <https://new.mta.info/document/45646>. This guide gives important information about requesting an alternate test date because of religious observances or a special test accommodation for disability, claiming Veterans’ or Legacy credit, and notifying New York City Transit of a change in your mailing address. Follow all instructions on the Special Circumstances Guide that pertain to you when you complete your “Application for Examination.”

THE TEST

Your score will be determined by an education and experience test. You will receive a score of 70 points for meeting the experience and license requirements listed above in the “**HOW TO QUALIFY**” section. After these requirements are met, you will receive additional credit for a total of 100 points maximum on the following basis:

- (A) 10 points for a total score of 80 for at least one (1) but less than two (2) years of additional full-time satisfactory experience as an armed armored car guard, armed security guard, armed peace officer, armed military police officer or comparable armed work experience in a related field.
- (B) 20 points for a total score of 90 for least two (2) but less than (3) years of additional full-time satisfactory experience as described in (A) above.
- (C) 30 points for a total score of 100 for three (3) or more years of additional full-time satisfactory experience as described in (A) above.

You will receive a maximum of one year of experience credit for each year you worked. If you have any of the above experience on a part-time basis, it will be credited according to the equivalent percent of full-time experience. Experience used to meet the minimum requirements cannot be used to gain additional credit.

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 TEST RESULTS

If you pass the education and experience test, your name will be placed in final order on an eligible list and you will be given a list number. You will be notified by mail of your results. As vacancies occur, if you meet all the requirement and conditions, you will be considered for appointment when your name is reached on the eligible list.

READ CAREFULLY AND SAVE FOR FUTURE REFERENCE

Application Period Opened: December 1, 2021

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.

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 must also visit the employee portal at www.mymta.info to update their contact information through the MTA Business Service Center (BSC).**

All other correspondence should be sent to examsunit@nyct.com and must include "Collecting Agent, Exam No. 2604" in the Subject. Or, you can mail your correspondence to the following address:

Collecting Agent, Exam No. 2604
MTA New York City Transit
180 Livingston Street, Room 4070
Brooklyn, NY 11201

PENALTY FOR MISREPRESENTATION

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

EXAM APPLICATION FORM



FOLLOW DIRECTIONS ON NEXT PAGE

Fill in all requested information clearly, accurately, and completely. New York City Transit will only process applications with complete, correct, and legible information, which are accompanied by correct payment. All unprocessed applications will be returned to the applicant.

Type or print All Required Information In Blue or Black Ink.

FOR OFFICE USE ONLY

Applid ->		Date:
-Inc	Prctd By:	Date:
- M.O.	Prctd By:	Date:
- Wvd	Prctd By:	Date:
Batch #	Prctd By:	Date:

1. SOCIAL SECURITY #: --

2. EXAM #:

3. EXAM TITLE:

4. EXAM TYPE:

5. FIRST NAME:

7. MIDDLE INITIAL:

6. LAST NAME:

8. MAILING ADDRESS: 9. APT. #:

10. CITY OR TOWN: 11. STATE: 12. ZIP CODE: -

13. PHONE: 13a. CELL PHONE:

14. OTHER NAMES USED IN CITY SERVICE:

Questions 15 & 16

Discrimination on the basis of sex, sexual orientation, race, creed, color, age, disability, status or religious observance is prohibited by law. NYCT and MaBSTOA are equal opportunity employers. The identifying information requested on this form is to be used to determine the representation of protected groups among applicants. This information is voluntary and will not be made available to individuals making hiring decisions.

15. RACE/ETHNICITY:

- White
- Black
- Hispanic
- American Indian/Alaskan Native
- Asian/Pacific Islander

16. SEX:

- Male
- Female

Read the Special Circumstances instructions to be awarded these Special Accommodations:

- 17. Alternate test date for religious observance
- 18. Accommodation for Disability
- 19. Veteran's and/or legacy credits

20. E-MAIL ADDRESS:

21. To be placed on an eligible list for this exam after passing all test parts, **you must check the affirmation box below:**
I affirm that all statements I have provided in connection with the application for this examination and all other information I have provided or will provide on the examination itself are true and subject to the penalties of perjury.

22. YOUR SIGNATURE: _____ DATE: _____



New York City Transit

180 Livingston Street, Room 4070
Brooklyn NY 11201

MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST GUIDE

NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER REQUEST FORM

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) One-time Veterans Fee Waiver for U.S. Armed Forces service members who have served on full-time active duty, other than reserves and/or training.

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.

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 break down 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.
- 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.

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***), 180 Livingston Street, Room 4070, 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:

Email: examsmakeups@nyct.com (Please include your signed statement from your religious leader as an attachment.)

Mail: MTA NYC Transit, (**Insert Exam Title & Number**) – Spec. Circum., 180 Livingston St., Rm 4070, Brooklyn, NY 11201

NOTE: Mail must be postmarked by the deadline, and you are strongly encouraged to purchase tracking when mailing.

(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., 180 Livingston St., Rm 4070, 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@nyct.com (You can attach any relevant supporting documentation to your emailed request)

Mail: MTA NYC Transit, (**Insert Exam Title & Number**) – Spec. Circum., 180 Livingston St., Rm 4070, 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@nyc.com (You can attach any relevant supporting documentation to your emailed request.)

Mail: MTA NYC Transit, **(Insert Exam Title & Number)** – Spec. Circum., 180 Livingston St., Rm 4070, 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@nyc.com, with the subject named CONTACT INFO UPDATE, or
2. Mail us at MTA NYC Transit, **(Insert Exam Title[s] & Number[s])** – Spec. Circum., 180 Livingston St., Rm 4070, 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 ocasys@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.



Personnel Testing, Selection and Classification Unit

180 Livingston Street, Room 4070
Brooklyn, NY 11201

Applicant questions can be emailed to examsunit@nyct.com or mailed to the address above.

FOREIGN EDUCATION FACT SHEET

- In order to receive credit in the examination for your foreign education, you must have your foreign education evaluated by **one of the approved services on the reverse side**.
- Refer to the Notice of Examination to find out whether you need a "document-by-document" evaluation (general) or a "course-by-course" evaluation (which includes a "document-by-document" evaluation) of your foreign education.
- The cost of evaluating your foreign education is paid by the applicant.
- Your evaluation must be received no later than **8 weeks** from the last day to apply for this examination. If your evaluation is not received by this time, your foreign education will not be rated. An extension of this time limit is available if the evaluation service submits an acceptable reason in writing for the delay.
- All acceptable foreign education evaluations submitted directly by the evaluation service to the address below **will be retained in a permanent file for future reference. However, if a document by document evaluation is on file with us and you are now applying for an examination that requires a course by course evaluation to meet the education qualification(s), you will need to have an evaluation service send us a course by course evaluation. If you are having a foreign education evaluation sent to us for the first time and you are applying for multiple exams in the same month, the evaluation service that you use only needs to send us one foreign education evaluation.**
- Photocopies of foreign education evaluations received from candidates will **not** be accepted and may be returned or discarded.
- Only foreign education evaluations submitted directly to us by an approved evaluation service with a *raised seal* or an *original stamp* of the evaluation service on the evaluation will be accepted.
- If you previously had a foreign education evaluation done by one of the approved evaluation services listed on the reverse side for another purpose, we will accept your foreign education evaluation provided that it is stamped "*certified duplicate original*" **and** received directly from that evaluation service.

In order to obtain an official confirmation that we have received your foreign education evaluation from the service that you selected, we recommend that you have a stamped, self-addressed postcard included by the service when your evaluation is sent to us. We will return the post card to you to acknowledge that your foreign education evaluation has been received. **Due to the number of foreign education evaluations received, a delay may occur in confirming the receipt of your evaluation by telephone or in-person inquiries.**

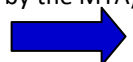
Have the evaluation service include:

- Your **name** and **social security number** on the evaluation; and
- The **Exam Title** and **Examination Number** of the examination you are applying for on the envelope.
- A stamped, self-addressed stamped postcard (for confirmation of receipt of your foreign education evaluation).

Have the evaluation service mail or email your completed original evaluation to:

- New York City Transit
Personnel Testing, Selection and Classification Unit
c/o (please state the specific Exam Title and Exam Number)
180 Livingston Street, Room 4070
Brooklyn, NY 11201
Email: foreigned@nyct.com (Evaluation services must password-protect emailed files, as instructed by the MTA)

TURN OVER FOR THE LIST OF APPROVED FOREIGN EDUCATION EVALUATION SERVICES



APPROVED FOREIGN EDUCATION EVALUATION SERVICES

Center for Applied Research, Evaluation & Education, Inc.

International Evaluation Service
P.O. Box 18358
Anaheim, CA 92817
Phone: (714) 237-9272; 237-9276
Fax: (714) 237-9279
E-mail: info@iescaree.com
Web: <http://www.iescaree.com>

Center for Educational Research & Evaluation (CERE)

140-30 Beech Avenue, Suite #1R
Flushing, Queens, NY 11355
Phone: (718) 445-2790
Fax: (718) 879-5871
E-mail: MJafry8@aol.com
Web: <http://www.degreeevaluation.com>

Evaluation Service, Inc.

333 W. North Avenue #284
Chicago, IL 60610
Phone: (847) 8569
Fax: (312) 587-3068
E-mail: info@evaluationservice.net
Web: www.evaluationservice.net

Educational Perspectives, NFP.

P.O. Box 618056
Chicago, IL 60661-8056
Phone: (312) 421-9300
Fax: (312) 421-9353
Email: info@edperspective.org
Web: <http://www.edperspective.org>

Educational Records Evaluation Service, Inc.

601 University Avenue, Suite 127
Sacramento, CA 95825-6738
Phone: (916) 921-0790
Fax: (916) 921-0793
E-mail: edu@eres.com
Web: <http://www.eres.com>

Foreign Academic Credentials Services, Inc.

P.O. Box 400
Glen Carbon, IL 62034
Phone: (618) 656-5291
Fax: (618) 656-5292
E-mail: facsa@aol.com
Web: www.facsusa.com

Span Tran: The Evaluation Company

450 Fashion Avenue, Suite 1004
New York, NY 10123
Phone: (646) 475-2570
Fax: (713) 789-6022
E-mail: status@spantran.com
Web: <http://www.spantran.com>
Online App: https://www.spantran.com/mta_app

Foundation for International Services, Inc.

505 Fifth Avenue South
Suite 101
Edmonds, WA 98201
Phone: (425) 248-2255
Fax: (425) 248-2262
E-mail: info@fis-web.com
Web: www.fis-web.com

Globe Language Services, Inc.

305 Broadway, Suite 401
New York, New York 10007
Phone: (212) 227-1994
Fax: (212) 693-1489
E-mail: info@globelanguage.com
Web: www.globelanguage.com

Institute of Foreign Credential Services

12 Cedar Street
Dobbs Ferry, NY 10522
Phone: (914) 693-2840
Fax: (914) 231-7782
E-mail: info@ifcsevals.com
Web: <http://www.ifcsevals.com>

International Consultants of Delaware, Inc.

3600 Market Street, Suite 450
Philadelphia, Pa. 19104
Phone: (215) 387-6950 Ext 603
Fax: (215) 349-0026
E-mail: icd@icdeval.com
Web: <http://icdeval.com>

International Education Research Foundation (IERF)

PO Box 3665
Culver City, CA 90231-3665
Phone: (310) 258-9451
Fax: (310) 342-7086
Email: info@ierf.org
Web: www.ierf.org

Josef Silny & Associates, Inc.

International Education Consultants
7101 S.W. 102nd Avenue
Miami, FL 33173
Phone: (305) 273-1616
Fax: (305) 273-1338
E-mail: info@jsilny.com
Web: <http://www.jsilny.com>



Education and Experience Test Paper Instructions

Collecting Agent, Exam No. 2604

Instructions: Carefully read these instructions and fill-in the appropriate bubbles. The Education and Experience Response Form will be used to evaluate your education and experience. To obtain appropriate credit, you must complete this form accurately and completely. **The information on the Education and Experience Test Paper must be verifiable.** At the time of consideration for appointment, you will be required to complete additional forms and describe your education and experience in more detail. You will be disqualified if your statements are found to be false, exaggerated, or misleading and you may be barred from future employment with MTA New York City Transit. Your education and experience will be subject to verification by the New York City Department of Citywide Administrative Services.

All of the requirements listed below must have been met by December 21, 2021.

You must provide a copy of your Pistol Permit with your application. Failure to provide a copy of your Pistol Permit will result in you being marked “not qualified.”

If you have experience with more than one employer, please make a copy of the Education and Experience Test Paper and fill out one for each company.

Experience

NOTE: Full-time experience is 35 work hours or more per week, where the majority of your work hours were spent performing the work described in the respective question.

Your rating below must be accurate. For example, if you have 2 year and 11 months of experience, you must fill-in bubble Ⓒ that corresponds to “Two or more years of experience, but less than three years of experience”.

1. How many years of satisfactory full-time experience as an **armed armored car guard, armed security guard, armed peace officer, armed military police officer or comparable armed work** do you have?
 - Ⓐ No experience
 - Ⓑ Less than two years of experience
 - Ⓒ Two or more years of experience, but less than three years of experience
 - Ⓓ Three or more years of experience, but less than four years of experience
 - Ⓔ Four or more years of experience, but less than five years of experience
 - Ⓕ Five or more years if experience, but less than six years of experience
 - Ⓖ Six or more years of experience

Please indicate the company's name and address: _____



New York City Transit

2. Do you have any part-time experience as an **armed armored car guard, armed security guard, armed peace officer, armed military police officer or comparable armed work?**

- A Yes
- B No

3. If you responded “yes,” to the question 2, please indicate the number of months and the hours each week you worked part-time as an **armed armored car guard, armed security guard, armed peace officer, armed military police officer or comparable armed work.**

Note – Each full year of experience is equal to 12 months. Example: If you have **1 year and 3 months** of part-time experience performing the work described in “10” above, you would bubble-in ① in the first column and ⑤ in the second column for **15 months of experience**. If you worked 25 hours each week, you would bubble-in ② in the first column and ⑤ in the second column for ② ⑤.

<u>Question 3</u>		<u>Question 3</u>	
Total Months worked Part-Time		Hours each week worked Part-Time	
①	①	①	①
②	②	②	②
③	③	③	③
④	④	④	④
⑤	⑤	⑤	⑤
⑥	⑥	⑥	⑥
⑦	⑦	⑦	⑦
⑧	⑧	⑧	⑧
⑨	⑨	⑨	⑨



New York City Transit

4. How many years of satisfactory full-time experience as an **unarmed armored car guard or security guard, peace officer, military police officer or in a position performing comparable work** do you have?
- (A) No experience
 - (B) Less than one year of experience
 - (C) More than one year of experience, but less than two years of experience
 - (D) Two or more years of experience

Please indicate the company's name and address: _____

5. Do you have any part-time experience as an **unarmed armored car guard or security guard, peace officer, military police officer or in a position performing comparable work**?
- (A) Yes
 - (B) No
6. If you responded "yes," to the question 5, please indicate the number of months and the hours each week you worked part-time as an **unarmed armored car guard or security guard, peace officer, military police officer or in a position performing comparable work**.

<u>Question 6</u>	<u>Question 6</u>
Total Months worked Part-Time	Hours each week worked Part-Time
<input type="radio"/> 0 <input type="radio"/> 0	<input type="radio"/> 0 <input type="radio"/> 0
<input type="radio"/> 1 <input type="radio"/> 1	<input type="radio"/> 1 <input type="radio"/> 1
<input type="radio"/> 2 <input type="radio"/> 2	<input type="radio"/> 2 <input type="radio"/> 2
<input type="radio"/> 3 <input type="radio"/> 3	<input type="radio"/> 3 <input type="radio"/> 3
<input type="radio"/> 4 <input type="radio"/> 4	<input type="radio"/> 4 <input type="radio"/> 4
<input type="radio"/> 5 <input type="radio"/> 5	<input type="radio"/> 5 <input type="radio"/> 5
<input type="radio"/> 6 <input type="radio"/> 6	<input type="radio"/> 6 <input type="radio"/> 6
<input type="radio"/> 7 <input type="radio"/> 7	<input type="radio"/> 7 <input type="radio"/> 7
<input type="radio"/> 8 <input type="radio"/> 8	<input type="radio"/> 8 <input type="radio"/> 8
<input type="radio"/> 9 <input type="radio"/> 9	<input type="radio"/> 9 <input type="radio"/> 9

Licenses

7. Which of the following Pistol Permits do you currently possess? You may select more than one options if you have two or more pistol permits.
- Ⓐ Carry Business
 - Ⓑ Limited Carry Business
 - Ⓒ Carry Guard
 - Ⓓ Special Carry Guard
 - Ⓔ Other: _____ (write the license name exactly as it is written on your license)
 - Ⓕ I do not possess a pistol permit
8. Which of the following Commercial Driver Licenses, accepted by the New York State Department of Motor Vehicles, do you currently possess? You may select multiple options if you have two or more licenses.
- Ⓐ Class A Commercial Driver License
 - Ⓑ Class B Commercial Driver License
 - Ⓒ Class C Commercial Driver License
 - Ⓓ I do not possess any of these Driver Licenses
9. Please write the name of the state where your Commercial Driver License: _____
10. Please write the date your Commercial Driver License was issued: _____
11. Please write the expiration date of your Commercial Driver License: _____
12. Please write your Commercial Driver License number: _____

You must provide a copy of your Pistol Permit with your application. Failure to provide a copy of your Pistol Permit will result in you being marked "not qualified."