



<b>General Preplacement Scheduling</b> (518) 233-3108 or (518) 233-3109 Fax - (518) 233-3132	<b>Scheduling Requirements:</b> Dates not available: Preferred Time: AM or PM
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**PERSON REQUESTING EXAMINATION**

<b>Print Name:</b>		<b>Date of Request:</b>
<b>Title:</b>	<b>Phone Number:</b>	<b>Fax Number:</b>
<b>Agency Name and Address:</b>		
<b>Agency Code:</b>	<b>Cost Center Code:</b>	<b>Division:</b>
<b>Preferred Service Location (See Note #1 below)</b>		

*I affirm that the candidate referenced below has been given a conditional offer of employment.*

**Signature of Person Requesting Examination:** \_\_\_\_\_

<b>Name of Agency Payment Coordinator:</b>	<b>Address:</b>	<b>Phone:</b>
<b>Name of Contact Person to Schedule Appointment:</b>		<b>Phone:</b>
<b>E-mail Address:</b>		

**INFORMATION CONCERNING CANDIDATE**

<b>Candidate's Name:</b>	<b>Social Security Number:</b> <i>(See note #3 below)</i>	
<b>Street Address:</b>	<b>DOB:</b>	<b>Phone:</b>
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Preplacement Title (See note #2 below):</b>	<b>Examination/Eligible List Number:</b>	

**Notes:**

1. A Preferred Service Location may not be available if the preplacement title has a physical agility test requirement. Unless decentralized to the agency, most agility testing is conducted in the Employee Health Service Examination Center.
2. For a current copy of the Physical/Medical Standard for a preplacement title, please call the General Preplacement Scheduling number above.
3. For appointments in the Labor Class and Non-Competitive Class, the Social Security Number will expedite the EHS processing.

<b>COMMENTS:</b>		
Person to contact with results:	Fax Number:	Phone Number:
E-mail address:		