



**Department of  
Civil Service**

Albany, NY 12239

**STAFFING SERVICES DIVISION**  
Request for Eligible List Status Change

S-211 (10/2019)

Name of Eligible:	Social Security Number:
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Present Address:  
*(Apartment Number or P.O. Box, Number & Street, City, State, Zip Code)*

Current Email Address:

**PERSONAL PRIVACY PROTECTION LAW NOTIFICATION**

The information that you are providing on this application is being requested for the principal purpose of complying with your request to effectuate changes concerning your eligible list status. This information will be used in accordance with Section 96 (1) of the Personal Privacy Protection Law, particularly subdivisions (b), (e) and (f). Failure to provide this information may interfere with our ability to comply with your request. The information will be maintained by the Director, Staffing Services Division, NYS Department Of Civil Service, Albany, NY 12239. For further information, relating only to the Personal Privacy Protection Law, call (518) 457-9375.

**Please note the following:**

Address change – Previous address \_\_\_\_\_

Name change – Previous name \_\_\_\_\_

Place my name in the active file for the following area(s) (0-13):

- |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 0                        | 1                        | 2                        | 3                        | 4                        | 5                        | 6                        | 7                        | 8                        | 9                        | 10                       | 11                       | 12                       | 13                       | All                      |

(See back for complete listing of geographic areas)

- |  |   |
|--|---|
| <input type="checkbox"/> Permanent Only          | <input type="checkbox"/> Full Time only |
| <input type="checkbox"/> Permanent and Temporary | <input type="checkbox"/> Part Time      |

- For all examinations
- For the following examination(s):

Examination #	Title	Rank	Rating
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- Please INACTIVATE my name on the following (or all) lists:

Examination #	Title	Rank	Rating
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REMARKS:

Signature	Date
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The map below divides New York State into 13 geographic areas. By indicating your choices on the reverse side of this form, we will be able to refer your name for consideration only in the area or areas in which you are willing to accept employment.

