

AVAILABILITY FOR EMPLOYMENT IN A POSITION IN NEW YORK STATE GOVERNMENT

Eligible List Canvass Letter (DCS-S-60 9/2023 L)

Return To:

Attn:
Telephone:

Date Mailed:

This is not an offer of employment. Do not leave your present job.

We have been informed by the Department of Civil Service that your name appears on an eligible list for the position indicated below. Please complete and return this canvass letter by:

To:

If you do not return this canvass letter your name will not be considered for any future vacancies at this location in this agency. **If you return it after the date above**, your name will not be considered for this position; however you may be considered for future positions at this location in this agency.

TITLE OF POSITION

☐ Beginning SALARY
Open-competitive list

Geographic
LOCATION

☐ Salary GRADE:
Promotion & Transition list

ADDITIONAL INFORMATION (for agency use only): SHIFT: _____

TYPE OF APPOINTMENT

TYPE OF EMPLOYMENT

☐ PERMANENT / CONTINGENT PERMANENT

☐ FULL TIME (85-100%): _____%

☐ TEMPORARY

☐ LESS THAN FULL TIME _____%

**CHECK THE BOX WHICH MOST ACCURATELY APPLIES AND PROVIDE THE ADDITIONAL REQUIRED INFORMATION.
SEE REVERSE FOR EFFECT OF ACCEPTANCE OR DECLINATION.**

- ☐ YES, I am interested in this position. I can report to work by: (date)_____.
- ☐ Please do not consider me for this position and leave my name active on this list for future consideration.
- ☐ NO, I am **temporarily unavailable** for any appointment from this list until (date): _____; please inactivate my name until then.
- ☐ NO, I am not interested in an **appointment in this agency at this location for this title**; please inactivate my name for **this title** in this agency at this location.
- ☐ NO, I am not interested in an **appointment at this location for this title**; please inactivate my name for **this title** in any agency at this location.
- ☐ NO, I am not interested in a **temporary** appointment **from this list**; please inactivate my name for any temporary appointments.
- ☐ NO, I am not interested in a **less than full time** appointment **from this list**; please inactivate my name for all positions with less than full time employment.
- ☐ NO, I am not interested in an appointment from this list to a position with **this shift**; please inactivate my name for any positions **filled from this list** with this shift.

Personnel Office/Civil
Service use only

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NOTE: If you want to inactivate yourself on a list so that you no longer receive canvass letters or emails, visit <https://www.cs.ny.gov/elmspublic>

YOUR SIGNATURE

DATE

PHONE NUMBERS:

work: _____

home: _____

e-mail: _____

AVAILABILITY FOR EMPLOYMENT CANVASS LETTER - GENERAL INFORMATION AND INSTRUCTIONS

THE CANVASS, INTERVIEW AND APPOINTMENT PROCESS

This canvass letter is not an offer of employment. We wish to know whether you are interested in this position and are available for appointment. Returning this letter and indicating your willingness to accept appointment under the conditions listed on the front will not necessarily result in appointment or even in your receiving an interview. However, failure to return this letter will indicate that you do not wish to be considered for any future vacancies at this location in this agency. If you are a person with a disability and need a reasonable accommodation in order to participate in the interview process, please call the telephone number on the front of this inquiry.

Although we may not communicate with you again concerning this position, we assure you that your interest and availability will be given every possible consideration.

The State Civil Service Law requires that appointment to a position in the competitive class shall be made by the selection of a person on the appropriate eligible list whose final rating is equal to or higher than the rating of the third highest ranking eligible on the list who is willing to accept appointment. It does not require that we conduct an interview prior to appointment. However, if you are among those persons interviewed for appointment and another person is appointed, we will notify you in writing of your not having been selected.

If you claimed veterans credits and received additional points you should be prepared to provide documentation of your veterans status if you are invited to an interview.

You may be required to pass a medical examination conducted at our expense; you may be required to pay laboratory fees. If fingerprinting is required, you may be required to pay a fee.

Prior to appointment, you will be required to provide proof of the required qualifying education, current license and/or certification; qualifying work experience may also be verified. Failure to provide the necessary documentation can result in inactivation from the eligible list.

You must be legally eligible to work in the United States at the time of appointment and throughout your employment with New York State. If appointed, you must produce documents that establish your identity and eligibility to work in the United States, as required by the federal Immigration Reform and Control Act of 1986, and the Immigration and Nationality Act.

SALARY

The starting salary for this position includes any differential that may apply; for example, geographic location or working hours of employment. Eligibles who are entitled to a higher salary due to previous State service should discuss this at their interview. Salary increases for many employees are negotiated by management and employee organizations, specified in contract agreements, and are subject to approval by the legislature.

EFFECT OF ACCEPTANCE OR DECLINATION

- If the type of appointment is TEMPORARY, your response will not affect your future eligibility for permanent/contingent permanent appointment **from this list**.
- If the type of appointment is PERMANENT/ CONTINGENT PERMANENT, your response will affect your future eligibility for both temporary and permanent/contingent permanent appointment **from this list**.
- If the type of employment is LESS THAN FULL TIME, your response will not affect your future eligibility for full time appointment **from this list**.
- If the type of employment is FULL TIME, your response will affect your future eligibility for both full time and less than full time appointment **from this list**.
- If this is a SHIFT position, your response will affect your future eligibility for appointment to a position with that shift **from this list**.

You can update your name, address and preferences on ELMS Online

at: <https://www.cs.ny.gov/elmspublic> or by writing to:

**EMPLOYMENT RECORDS SECTION
NYS DEPARTMENT OF CIVIL SERVICE
ALBANY, NY 12239**

-OR-

EmploymentRecords@cs.ny.gov

You must write to the above address to request reactivations. PROVIDE THE ELIGIBLE LIST NUMBER, TITLE AND LAST FOUR DIGITS OF YOUR SOCIAL SECURITY NUMBER IN YOUR REQUEST in all correspondence.

It is the policy of the State of New York to provide for and promote equal opportunity employment, compensation, and other terms and conditions of employment without unlawful discrimination on the basis of age, race, color, religion, disability, national origin, gender, sexual orientation, veteran or military service member status, marital status, domestic violence victim status, genetic predisposition or carrier status, arrest and/or criminal conviction record, or any other category protected by law, unless based upon a bona fide occupational qualification or other exception.

PERSONAL PRIVACY PROTECTION LAW NOTIFICATION

The information you provide on this application is being requested in accordance with section 61 of the Civil Service Law for the principal purpose of determining your availability for employment. The 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 the information requested may prevent your being considered for employment opportunities. This information will be maintained by the Director, Division of Staffing Services, Department of Civil Service, Albany, NY 12239; telephone (518) 473-6437. For information concerning the Personal Privacy Protection Law, call (518) 457-9375.