

TO:

FROM:

This letter is to confirm your declination of the position of:

Title:  
Salary Grade:  
Location/county:

**from the eligible list:**

Appointment Type:  PERMANENT/CONTINGENT PERMANENT  TEMPORARY  
Employment Type:  FULL TIME  PART-TIME at %

- You declined an appointment from **our agency at this location**, your name will be removed from this list for consideration for any future vacancies in our agency at this location. [DP]
- You declined an appointment **at this location**, your name will be removed from consideration for any agency in this city, town or village. [LU]
- You failed to report to your scheduled interview on \_\_\_\_\_, your name will be removed from this list for consideration for any future vacancies in **our agency at this location**. [FR]
- You said you are **temporarily unavailable** until \_\_\_\_\_, your name will be inactivated on the list until that time. [TI]
- You requested to be inactive for this canvass only. You have been left active on the list for future consideration. [IC]

**PLEASE SEE REVERSE FOR ADDITIONAL INFORMATION ON THE EFFECT OF THIS DECLINATION, AND ON REACTIVATION**

Signed: \_\_\_\_\_ Date:

Title:

**INFORMATION FOR ELIGIBLES**

**EFFECTS OF DECLINATION — Type of Appointment**

If the type of appointment was **temporary**, your declination affects your future eligibility for temporary appointment.

If the type of appointment was **permanent**, your declination affects your future eligibility for both temporary and permanent appointment.

If the type of employment was **less than full time**, your declination affects your future eligibility for less than full-time.

If the type of employment was **full-time**, your declination affects your future eligibility for both full-time and less than full-time.

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**Reactivation**

- This list has been decentralized to this agency. If you wish to reactivate your name for future consideration, please write to the address that appears on the front of this letter.
- This list is maintained by the Department of Civil Service. If you wish to reactivate your name, or to have your name considered for additional locations/agencies, write to:

NYS DEPARTMENT OF CIVIL SERVICE  
ALBANY, NY 12239  
-OR-

[EmploymentRecords@cs.ny.gov](mailto:EmploymentRecords@cs.ny.gov)

Please provide the eligible list title, the examination number, and the last four digits of your Social Security number in your request.

You can also update your name, address, and list preferences, as well as remove any previous declinations, on ELMS Online at: <https://www.cs.ny.gov/elmspublic>

**PERSONAL PRIVACY PROTECTION LAW NOTIFICATION**

The information you provide on this application is being requested in accordance with sections 81, 81-a, and 81-b 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.

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.