



Niagara County Civil Service Special Testing Arrangements Form

Submit only if you require Special Testing Arrangements

CANDIDATE NAME: _____

SPECIAL TESTING ARRANGEMENTS: Exam Title _____ Exam Date _____

RELIGIOUS ACCOMMODATION: Most written tests are held on Saturdays. If you cannot take the test on the announced test day due to a conflict with a religious observation or practice, check the space below. We will make arrangements for you to take the test on a different day (usually the following business day).

I cannot be tested on the scheduled examination date due to a conflict with a religious observance or practice.

SPECIAL ACCOMMODATIONS IN TESTING: Niagara County provides reasonable accommodations for individuals with a disability during application, examination, interview and employment. If you need a reasonable accommodation, check the space below and attach a written description of the accommodation sought. Medical documentation is required.

I require special accommodation to take this examination.

OTHER ACCOMMODATIONS NEEDED: If you require accommodations for reasons other than religious or disability, check the box below and attach a written description of the accommodations sought.

I require other accommodations to take this examination.

ALTERNATE TEST DATE NEEDED: It is the policy of the Niagara County Personnel Officer to provide an alternate test date to those candidates who are unable to appear on the announced day of exam due to an emergency or a scheduling conflict beyond their control, **provided acceptable documentation is submitted.** However, this policy will be weighed against the overriding need of the Personnel Officer to maintain the security and integrity of the examination process. If you cannot take the test on the announced test day, check the space below and provide an explanation and documentation supporting your request. The [Alternate Test Date Policy](#) is posted on the Niagara County website.

I require an alternate test date.

First date available to take test: _____ (provide date and time)

Reason for request: _____

Signature

Date