

CPS HR Consulting

For University Civil Service Examinations Unit

ATTN: CUNY Examinations 2450 Del Paso Road, Suite 160 Sacramento, CA 95834 866-864-1072, Option 5

CUNY Student/Employee Application Fee Waiver Request for

Campus Peace Officer, Exam # 2060

Applicant's Signature	Date
Applicant's First and Last Name (Please Print)	Applicant's Last 5 Digits of Social Security Number
I understand that my claim for application fee waiver may be investigated and I may be disqualified from the listed civil service examination if I make any false statement regarding my eligibility for a CUNY student/employee application fee waiver.	

Failure to provide this information will result in a de	nial of the waiver request.
A copy of your current student or employee CUNY request.	ID must be included with the submission of this
□ <u>Active</u> CUNY employee	
□ <u>Active</u> CUNY student	
I request that my application fee for Campus Peace	e Officer, Exam # 2060, be waived because I am an: