



MaBSTOA

Manhattan and Bronx Surface Transit Operating Authority

Notice of Examination

Bus Maintainer Chassis, Exam # 4103

Application Deadline

March 15, 2014

Types of Tests:

Multiple-Choice and Practical

Application Fee:

(Non-Refundable)

\$68.00

Multiple-Choice Test Date:

(subject to change)

Saturday, June 28, 2014

JOB DESCRIPTION

Bus Maintainers Chassis maintain, inspect, test, diagnose, overhaul, rebuild and repair all vehicle systems, components and accessories to industry work standards. This includes, but is not limited to, the vehicle body, structure, interior panels, trim, seating and glazing; axles, suspension, steering and braking components and systems; driveline or propulsion system components, prime movers and auxiliary drive units; HVAC, lighting and electrical systems; microprocessor controllers, Programmable Logic Controllers (PLCs) and multiplex electronic systems; and vehicle energy storage systems and devices. Vehicles may include trucks and buses of various sizes and configurations. They also maintain and repair equipment and tools used in the activities mentioned above; drive motor vehicles; keep written and electronic records of work activities; and perform related work.

Some of the physical activities performed by Bus Maintainers Chassis and environmental conditions they experience are working outdoors in all weather conditions; crawling under and on top of buses; working in confined areas; lifting and carrying heavy parts and equipment; climbing into buses that are suspended on lifts; reaching into dark spaces and making tactile inspections; making visual inspections of equipment; distinguishing colors; reading gauges and prints; reading, interpreting and applying written or graphic technical repair instructions; and responding to sounds from warning bells, horns and vehicle movement.

Special Working Conditions: Bus Maintainers Chassis will be required to work various shifts, including nights, Saturdays, Sundays, and holidays.

(This brief description does not include all of the duties of this position.)

SALARY AND BENEFITS

The current minimum salary is \$29.3700 per hour for a 40-hour week increasing to \$31.8725 in the fourth year. These rates are subject to change. The benefits of this position include, but are not limited to, night and weekend differentials, paid holidays, vacation and sick leave, a comprehensive medical plan and a pension plan.

HOW TO QUALIFY

Education and Experience Requirements: By the **last day of the Application Period** you must have: Three years of satisfactory experience as a journey-level mechanic (i.e., a fully trained, knowledgeable, experienced, proficient and competent mechanic) repairing passenger automobiles, trucks, buses or aircraft. This experience **MUST include work on engines and electrical systems, and at least one other automotive or aircraft system such as brake, transmission or HVAC.**

(Continued)

READ CAREFULLY AND SAVE FOR FUTURE REFERENCE

Filing Opened: February 5, 2014

For the above journey-level experience to be credited, it must be preceded by one of the following:

1. Two years of satisfactory experience as a mechanic's helper, apprentice or trainee performing or assisting in the work described above; or
2. Graduation from a recognized trade school or technical school, approved by a state's Department of Education or comparable agency, with a major course of study in automotive mechanics or a closely related field, totaling 600 hours; or
3. Graduation from a vocational high school, approved by a state's Department of Education or comparable agency, with a major course of study in automotive mechanics, or a closely related field; or
4. Graduation from an accredited college or university with an AAS degree or higher in automotive mechanics or a closely related field. Accreditation must be by a regional, national, professional or specialized agency recognized as an accrediting body by the U.S. Secretary of Education and by the Council for Higher Education Accreditation (CHEA).

You may substitute three months of the satisfactory journey-level mechanic experience listed above for each Automotive Service Excellence (ASE) certification you possess, up to a maximum of one year of journey-level experience for four (4) ASE certifications. Only ASE certifications at the technician level in the automobile/light truck, medium/heavy truck, transit bus, and truck equipment series will be accepted as appropriate substitutions. All applicants **must** possess a minimum of two (2) years of journey-level experience.

The following are types of experience that are not acceptable: auto body and fender repair; auto or truck assembly; dealership make-ready repair; fuel, oil and lube servicing; vehicle inspection; exclusive specialty replacement shop work, such as tire replacement, replacement of exhaust parts (muffler), glass, climate control parts, etc.; and salvage and junkyard extraction.

You may be given the test before we review your qualifications. You are responsible for determining whether you meet the qualification requirements for this examination prior to submitting your application. If you are marked "Not Qualified," your application fee will **not** be refunded and you will **not** receive a score.

REQUIREMENTS TO BE APPOINTED

Driver License Requirement:

1. A Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no disqualifying restrictions, with proof of residency from the state in which that license was issued; or
2. A Motor Vehicle Driver license valid in the State of New York and a Learner's Permit for a Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no disqualifying restrictions.

Candidates who qualify under (2) above will be appointed subject to the receipt of a Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no disqualifying restrictions at the end of a special training course in bus operation.

Candidates who fail to successfully complete the special training course in bus operation, including the receipt of a Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no disqualifying restrictions, will be terminated.

If you have serious moving violations, license suspension or an accident record you may be disqualified. The Class B Commercial Driver License valid in the State of New York with a passenger endorsement and no disqualifying restrictions must be maintained for the duration of employment.

Medical Requirement: Medical guidelines have been established for the position of Bus Maintainer Chassis. You will be examined to determine whether you can perform the essential functions of the position of Bus Maintainer Chassis. Where appropriate, a reasonable accommodation will be provided for a person with a disability to enable him or her to perform the essential functions of the job.

Drug Screening Requirement: You must pass a drug screening in order to be appointed.

(Continued next page)

Character and Background Requirement: Proof of good character and satisfactory background are absolute prerequisites to appointment. The following are some of the factors considered as grounds for disqualification: (a) conviction of an offense, the nature of which indicates lack of good moral character or disposition toward violence or disorder; b) repeated convictions where such convictions indicate a disrespect for the law; (c) discharge from employment where such discharge indicates poor behavior or an inability to follow rules and disciplinary guidelines; (d) previous unsatisfactory employment history with Metropolitan Transportation Authority (MTA), or another public employer; (e) dishonorable discharge from the Armed Forces; (f) previous misrepresentation of identity; and (g) previous misrepresentation of authority to work in the United States.

Residency: New York City residency is not required for this position.

English Requirement: You must be able to understand and be understood in English.

Proof of Identity: Under the Immigration Reform and Control Act of 1986, you must be able to prove your identity and your right to obtain employment in the United States prior to employment.

HOW TO OBTAIN AN APPLICATION

During the application period, you may obtain an application for this examination online at <http://mta.info/nyct/hr/appexam.htm> or in person at the MTA Exam Information Center as indicated below.

MTA EXAM INFORMATION CENTER

Open Monday through Friday, from 9 AM to 3 PM, in the lobby at 180 Livingston Street, Brooklyn, New York. Directions: take the A, C, F or R trains to the Jay Street-Metro Tech Station, or the 2 or the 3 train to the Hoyt Street Station.

REQUIRED FORMS

1. **Application:** Make sure that you follow all instructions included with your *Application*, including payment of fee. Save a copy of the instructions for future reference.
2. **Education and Experience Test Paper:** Write your social security number in the box at the top of each page, and the examination title and number in the box provided. **This form must be filled out completely and in detail for you to receive your proper rating.** Keep a copy of your completed *Education and Experience Test Paper* for your records.
3. **Foreign Education Fact Sheet (Required only if you need credit for your foreign education for this examination):** If you were educated outside the United States, you must have your foreign education evaluated to determine its equivalence to education obtained in the United States. The services that are approved to make this evaluation, as well as instructions on how to submit this evaluation are listed in the *Foreign Education Fact Sheet* included with your application packet. When you contact the evaluation service, ask for a "document-by document" (general) evaluation of your foreign education.

HOW TO SUBMIT AN APPLICATION AND PAY THE APPLICATION FEE

If you believe you meet the requirements in the "How to Qualify" section, **you must apply by mail.**

New York City Transit will **not** accept applications in person.

Applications by Mail must:

1. Include all of the required forms, as indicated in the Required Forms section above.
2. Be postmarked by the last day of the application period.
3. Be mailed to the address in the "Correspondence Section" of this notice.
4. Include the appropriate fee in the form of a money order.

(Continued)

The Money Order (Postal Money Order Preferred) must:

1. Be made payable to NYC Transit.
2. Be valid for one year.
3. Have the following information written on it: your name, home address, the last four digits of your social security number, and the exam title and exam number.

Save your money order receipt for future reference and proof of filing an application.

Cash and personal checks will not be accepted.

ADMISSION LETTER

An *Admission Letter* will be mailed to you about 10 days before the date of the multiple-choice test. If you do not receive an *Admission Letter* at least 4 days before the multiple-choice test date, you may obtain a duplicate letter at the MTA Exam Information Center (as indicated above). A paper copy of the *Admission Letter* is your ticket for admission to the test.

THE TEST

You will be given a qualifying two-part multiple-choice test and a competitive practical test. A score of at least 70 is required to pass each part of the multiple-choice test, and the practical test. Only those who pass each part of the qualifying multiple-choice test will be scheduled to take the practical test. Your score on this test will determine your place on the eligible list. Ties resulting from identical scores will be broken in an equitable manner to be determined by the NYCT/MaBSTOA Examinations Section.

Part one of the multiple-choice test will measure your ability to read and comprehend technical and non-technical instructions, bulletins, directives, including drawings, diagrams, and schematics. Part two of the multiple-choice test will include questions on the installation, troubleshooting, testing, and repair of automotive systems, such as engine, electrical, brake, air conditioning, transmission, etc.; the proper selection and use of tools and equipment; and safe work practices and procedures.

The practical test may be designed to measure your ability to use tools; read schematics; install, repair and adjust vehicle components; and troubleshoot and repair electrical components using meters and other equipment.

Warning:

You are not permitted to enter the test site with cellular phones, beepers, pagers, cameras, portable media players, or other electronic devices. Calculators are permitted; however, permitted calculators may only perform the standard four functions (addition, subtraction, multiplication, division), decimal, change sign (+,-), percentage, square root, M+, M-, MR or MRC buttons. They may NOT include: any and all problem solving or programming capabilities, place values, and inequalities.

Electronic devices with an alphabetic keyboard or with word processing or data recording capabilities such as planners, organizers, etc. are prohibited. If you use any of these devices in the building at any time before, during or after the test, you may not receive your test results, your test score may be nullified, and your application fee will not be refunded.

You must leave the test site once you finish the test. If you leave the test site after being fingerprinted but before finishing the test, you will not be permitted to re-enter. If you disregard this instruction and re-enter the test site, you may not receive your test results, your test score may be nullified, and your application fee will not be refunded.

PROOF OF IDENTIFICATION

You must present your ID when you arrive to take each test.

THE TEST RESULTS

If you meet the education and experience requirements and pass both parts of the qualifying multiple-choice test, you will be scheduled to take the competitive practical test. If you pass the practical test your name will be placed in final score order on an eligible list and you will be given a list number. You will be notified by mail of your test results. If you meet all requirements and conditions, you will be considered for appointment when your name is reached on the eligible list. The eligible list for this exam may remain in effect up to 4 years from the date it is established.

SPECIAL ARRANGEMENTS

Special Test Accommodations:

If you plan to request special testing accommodations due to disability or an alternate test date due to your religious belief, follow the instructions included with your *Application* and mail your request to the address found in the "Correspondence Section" below no later than 30 days prior to the scheduled test date.

Make-Up Test: You may apply for a make-up test if you cannot take the test on the regular test date for any of the following reasons:

1. Compulsory attendance before a public body;
2. On-the-job injury or illness where such applicant is an employee of any agency of the Metropolitan Transportation Authority (MTA) of New York State;
3. Absence for one week following the death of a spouse, domestic partner, parent, sibling, child or child of a domestic partner;
4. Absence due to ordered military duty; or
5. A clear error for which MTA New York City Transit is responsible.

To request a make-up test, mail your request with your documentation of special circumstances to the address found in the "Correspondence Section" below within one week of your scheduled test date.

ADDITIONAL INFORMATION

Promotion Test: A promotion examination for this title is being held for eligible MaBSTOA employees. The names appearing on the promotion list will be considered first in filling vacancies.

Training Program: Each appointee will be required to successfully complete and pass all parts of a training course in bus maintenance operations before the end of a one-year probationary period. If you do not successfully complete this training course, you may be terminated.

Probation: Each appointee will be required to successfully complete a one-year probationary period, during which time the appointee may be terminated.

CORRESPONDENCE

All correspondence, including the submission of your application, must be sent to the following address: Bus Maintainer Chassis, Exam # 4103, MTA New York City Transit, 180 Livingston Street, Room 4070, Brooklyn, NY 11201

PENALTY FOR MISREPRESENTATION

Any intentional misrepresentation on the application or examination may result in disqualification, even after appointment, and may result in criminal prosecution.

MaBSTOA IS AN EQUAL OPPORTUNITY EMPLOYER AND WELCOMES APPLICATIONS FROM ALL QUALIFIED PERSONS. THE LIST RESULTING FROM THIS EXAMINATION WILL BE BASED STRICTLY ON EXAMINATION RATINGS ATTAINED BY CANDIDATES THROUGH THEIR TEST SCORES AND SENIORITY RATINGS, AS DESCRIBED ABOVE.

NYCT/MaBSTOA/MTA PERSONNEL TESTING, SELECTION & CLASSIFICATIONS UNIT

Title Code: M2516

Filing Period Opened: February 5, 2014



New York City Transit

Manhattan and Bronx Surface Transit Operating Authority
180 Livingston Street, Room 4070
Brooklyn, NY 11201

APPLICATION INSTRUCTIONS

Note: MTA New York City Transit processes all MaBSTOA exam applications. When applying for examinations, follow the directions below with money orders made out and mailings addressed to MTA New York City Transit. You should apply for an examination **only** if you meet the qualification requirements set forth in the Notice of Examination. Read the Notice of Examination carefully before completing the application form. Fill in all requested information clearly, accurately, and completely. MTA New York City Transit will only process applications with complete, correct, legible information which are accompanied by correct payment or waiver documentation. All unprocessed applications will be returned to the applicant.

- FORMS** All required forms which are listed in the upper-right-hand corner of the Notice of Examination must accompany your application. Failure to include these forms may result in your disqualification and you **will not** receive test scores.
- FEE** The amount of the fee is stated in the Notice of Examination. **Only a money order** made payable to the **MTA New York City Transit** is acceptable payment (checks or cash **are not** accepted). On the front of the money order you must clearly write **your full name, your home address, the last four digits of your social security number, the exam title and the exam number**. Keep your money order receipt as proof of filing. The fee is not refundable.
- APPLICATION SUBMISSION** Your application must be postmarked no later than the last day of the application period indicated on the Notice of Examination. Mail the completed application, supporting documents and required filing fee to **MTA New York City Transit, Attn: (please state the specific Exam Title and Exam Number), 180 Livingston Street, Brooklyn NY, 11201**.

INSTRUCTIONS FOR COMPLETING APPLICATION FORM PROPERLY

To ensure proper processing of this application print all information **CLEARLY** in blue or black ink. **Failure to do so will delay or disqualify your application.**

- 1-4 SSN, EXAM TITLE, NUMBER AND TYPE** A 9 digit Social Security Number is required. See the Notice of Examination, prior to filling in the exact exam number and exam title.
- 5-14 GENERAL INFORMATION** **All Candidates:** Fill in information requested. If you change your address after applying for this exam, send a change of address request to: **MTA New York City Transit, Attn: Address Change, 180 Livingston Street, Brooklyn NY, 11201**.
Employees of MTA Agencies: The address already in existence on your MTA records will be used to respond to all new applications you submit. An application with a new address on it will **NOT** update the records. Please keep your address on MTA records updated. Please note: only one address for each person is maintained on file.
- 15-16 ETHNICITY AND SEX** Completing this information is voluntary. This information will **not** be made available to individuals making hiring decisions.
- 17-18 SPECIAL CIRCUMSTANCES** For Religious Observance or Special Accommodations, please see the "Special Circumstances" form included in the application package.
- 19 E-MAIL ADDRESS** Enter your e-mail address.
- 20 SIGNATURE** Signing the application indicates that all statements you have made in this application are true to the best of your knowledge. Please be aware that if any statements are found to be false you will not be hired. Please be aware that if any willful false statements on your part are discovered after you have been hired by an MTA Agency, your services will be terminated.

Applicants who do not receive an admission letter at least 4 days prior to the tentative test date must come to the MTA Exam Information Center at 180 Livingston Street, Brooklyn, NY 11201



New York City Transit

Manhattan and Bronx Surface Transit Operating Authority
180 Livingston Street, Room 4070
Brooklyn, NY 11201

SPECIAL CIRCUMSTANCES Directions for submission of requests

Note: These directions are designed to assist you in completing Section 17 and 18 on the APPLICATION FOR EXAMINATION form and to inform you how to notify us of a CHANGE OF ADDRESS. You may include your religious observance or disability requests with your completed application form(s) if you provide the correct supporting documentation when you submit your application.

(A) RELIGIOUS OBSERVANCE:

If, because of religious belief, you cannot take the test on a Saturday or on the scheduled test date, you must request an alternate date no later than 30 days prior to the scheduled test date.

The request must include:

<ul style="list-style-type: none"> • your full name • your social security number 	<ul style="list-style-type: none"> • the exam number • the exam title
<ul style="list-style-type: none"> • a signed statement on letterhead from your religious leader certifying that your religious observance prohibits you from taking the test on the scheduled date. 	

If you are submitting your request after you applied, please mail it to **MTA New York City Transit, Attn: (Insert Exam Title and Exam Number) - SABBATH, 180 Livingston Street, Room 4070, Brooklyn NY, 11201.**

(B) DISABILITY:

If you have a disability which will interfere with your ability to take this test without special accommodation(s) or other assistance, you must submit a written request for specific special accommodation(s) postmarked no later than 30 days prior to the test date.

The request must include:

<ul style="list-style-type: none"> • your full name • your social security number • the exam number 	<ul style="list-style-type: none"> • the exam title • the specific nature of your disability • a justification for the special accommodations
<ul style="list-style-type: none"> • a statement corroborating your disability by a doctor or agency authorized for this purpose. 	

If you are submitting your request after you applied, please mail it to **MTA New York City Transit, Attn: (Insert Exam Title and Exam Number) – SP ACCOM, 180 Livingston Street, Room 4070, Brooklyn NY, 11201.**

(C) CHANGE OF ADDRESS:

If your mailing address changes after you file for an exam, you should send a letter stating your name, social security number, exam title, exam number, old address and new address to:

**MTA New York City Transit
Attention Change of Address
(Insert Exam Title and Number)
180 Livingston, Room 4070
Brooklyn NY 11201**



New York City Transit

Manhattan and Bronx Surface Transit Operating Authority
180 Livingston Street, Room 4070
Brooklyn, NY 11201

REQUEST FOR AN MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER

TO ALL APPLICANTS:

In accordance with Civil Service Law Section 50.5(b), the application fee shall be waived for any person who meets at least one of the following criteria during the month you wish to apply for an examination:

A) Unemployed.	B) Receiving Supplemental Security Income (SSI) payments.
C) Receiving Medicaid benefits.	D) Receiving Public Assistance in the form of Temporary Assistance for Needy Families (TANF)/Family Assistance or Safety Net Assistance.
E) Certified eligible for a Workforce Investment Act program through New York City's Workforce1 Career Centers.	F) One-time Veterans Fee Waiver for U.S. Armed Forces service members who have served on full-time active duty, other than reserves and/or training.

You must complete a separate "REQUEST FOR A NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER" form for each exam you wish to apply for.

PRINT CLEARLY OR TYPE INFORMATION

Name: _____ SS#: _____

I request that my application fee for the examination listed below be waived in accordance with the Section 50.5(b) of the State Civil Service Law.

*****AFFIRMATION*****

I have read the above-mentioned portion of Section 50.5(b) of the Civil Service Law relating to the waiver of the application fee and hereby certify that I am qualified to receive such waiver for the reason indicated below. I understand that if I falsify information concerning my current eligibility in order to obtain the application fee waiver, **I may be banned from appointment to any position within the City of New York, and may be subject to criminal prosecution. (All such violations will be referred to the Department of Investigation.)**

Signature: _____ Date: ____-____-____

Fee Waiver Criteria Selection: Check only the box that applies to you and for which you have acceptable documentation as described on pages 2 and 3. Complete, sign, and date this form and return it along with your documentation and the completed required form(s) listed on the Notice of Examination. At the time of applying for the above-indicated examination, I am currently...

A) an individual who is unemployed.

B) an individual who is receiving Supplemental Security Income (SSI) payments.

C) an individual who is receiving Medicaid benefits.

D) an individual who is receiving Public Assistance in the form of Temporary Assistance for Needy Families (TANF)/Family Assistance or Safety Net Assistance.

E) a participant certified eligible for a Workforce Investment Act program through New York City's Workforce1 Career Centers.

F) an individual who has served in the U.S. Armed Forces on full-time active duty, other than reserves and/or training, and has not previously received a Veterans Fee Waiver.

FOLLOW THE INSTRUCTIONS ON PAGES 2 & 3, SUBMIT AND SIGN THIS PAGE WITH THE CORRECT DOCUMENTATION.



New York City Transit

Manhattan and Bronx Surface Transit Operating Authority
180 Livingston Street, Room 4070
Brooklyn, NY 11201

REQUEST FOR AN MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER

- A) For an individual who is unemployed: Submit an “**Unemployment Insurance Benefit Payment History**” inquiry printout. This printout must include Week Ending dates that correspond with the month that you are applying for an exam. You may obtain this printout from the New York State Department of Labor by calling 1 (877) 221-1634 or online at www.labor.state.ny.us. For the Department of Labor outside of New York State, you may access their website at www.dol.gov for assistance in locating this type of documentation online for the state in which you reside. If you are unemployed, but not currently receiving Unemployment Insurance Benefits, you may submit an affidavit signed by you stating that you are unemployed, and notarized by a Notary Public. Your affidavit must be dated within the application period for the exam you are applying for. For unemployment benefits received outside of New York State, you may include a copy of your unemployment check that bears your Name and SS# dated and issued for the month in which you are applying for an exam.
- B) For an individual who is receiving Supplementary Security Income (SSI) payments: Submit a “**Benefit Verification Break Down Letter**”. This printout shows the break down of your monthly payments on letterhead from a Social Security Administration Office in your state that is dated during the month for which you are applying for an exam and specifically indicates that you received SSI benefits that month. Award Letter Notifications re-issued during the month you are applying for an exam that does not include the added information in the OTHER IMPORTANT INFORMATION field that specifically states you are receiving SSI benefits that month will not be accepted. Parents who receive SSI benefits for their minor children are not eligible for a fee waiver.
- C) For an individual who is receiving Medicaid benefits or partial benefits that include Medicaid: Submit the “**MA Case/Suffix/ Individual/Summary**” printout. This printout must verify that either your eligibility for Medicaid is coded “AC” for Active, or your authorization period is currently active, or if your case has been closed, the date your case was closed. These dates must include the month for which you are applying for an exam. You may obtain this printout from your assigned worker, or from a New York City Human Resources Administration Medicaid Office or call 1 (877) HRA-8411. If you applied for Medicaid benefits through a hospital or managed care program/organization, you will need to submit documentation on letterhead from that program/organization that is dated during the month you are applying for an exam that specifically verifies your eligibility of receiving Medicaid benefits that month. For Medicaid benefits received outside New York City, you will need to submit documentation on letterhead from a social service agency in your state that is dated during the month you are applying for an exam that specifically verifies your eligibility of receiving Medicaid benefits, or indicates your case is active that month.



New York City Transit

Manhattan and Bronx Surface Transit Operating Authority
180 Livingston Street, Room 4070
Brooklyn, NY 11201

REQUEST FOR AN MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER

- D) For an individual who is receiving Public Assistance in the form of Temporary Assistance for Needy Families(TANF)/Family Assistance or Safety Net Assistance benefits: Submit the **“PA Case Composition-Suffix/Individual Summary”** printout. This printout must verify that either your eligibility for Public/Cash Assistance is coded “AC” for Active, or if your case has been closed, the date your case was closed. These dates must include the month for which you are applying for an exam. If your case has been coded “SN” for Sanctioned, or if you recently applied for benefits and your case is coded “AP” for Application, you are not eligible to receive a fee waiver. You may obtain this printout from your assigned worker, or from a New York City Human Resources Administration Office or call 1 (877) HRA-8411. For TANF/Family Assistance or Safety Net Assistance benefits received outside New York City, you will need to submit documentation on letterhead from a social service agency in your state that is dated during the month you are applying for an exam that specifically verifies your eligibility of receiving TANF/Family Assistance or Safety Net Assistance benefits, or indicates your case is Active that month.
- E) For a participant certified eligible for a Workforce Investment Act program through New York City’s Workforce1 Career Centers: Submit documentation on letterhead from the Department of Small Business Services that is dated during the month for which you are applying for an exam and specifically indicates that you are a participant registered with the City’s Workforce1 Career Centers for that month. You may obtain this letter only by calling the New York City Department of Small Business Services at (212) 513-6406.
- F) For an individual who has served in the U.S. Armed Forces on full-time active duty, other than reserves and/or training, and has not previously received a Veterans Fee Waiver: Participants must have been discharged under honorable conditions from the Armed Forces of the United States (Army, Navy, Marine Corps, Air Force, Coast Guard or the National Guard only). The Veterans Exam Fee Waiver cannot be used retroactively for any exam for which you have already applied. Proper documentation must accompany your application. Mail a clear copy of your separation papers (Form DD214, long form) or a Statement of Service letter along with your application package. The Veterans Exam Fee Waiver is available for Promotion and Open Competitive exams. Please note that Veterans Preference Credits and the Veterans Exam Fee Waiver are two separate programs that have different purposes and criteria.

Include the **“REQUEST FOR AN MTA NEW YORK CITY TRANSIT EXAMINATION FEE WAIVER”** when you mail your application. You cannot request a Fee Waiver when applying on-line; Fee Waivers must be requested by mail. A separate request for a Fee Waiver must be included with each exam application you submit. Return the completed form(s) to MTA New York City Transit, Attention: Exam Fee Waiver, (please state the specific Exam Title and Exam Number), 180 Livingston Street, Room 4070, Brooklyn, NY 11201 by mail only. MTA New York City Transit will not accept applications in person from candidates, unless otherwise instructed by MTA New York City Transit personnel. An application for a particular exam must be postmarked no later than the last date of the application period for that exam.

Applications that are submitted without the required supporting documentation at the time of filing your application during the application period will be considered incomplete applications. Candidates whose applications are deemed incomplete will not be able to re-submit their applications to MTA New York City Transit once the filing period has closed, nor will they be permitted to take the test on the date scheduled.

FOREIGN EDUCATION FACT SHEET

- To receive credit in the examination for your foreign education, you must have your foreign education evaluated **by one of the approved services listed on the reverse side.**
- Refer to the Required Forms section of the Notice of Examination to find out whether you need a “document-by document” (general) evaluation or a “course-by-course” evaluation (which includes a “document by-document” evaluation) of your foreign education.
- Evaluation fees must be paid by the applicant.
- Your evaluation must be received no later than **8 weeks** from the application deadline. If your evaluation is not received by this time, your foreign education will not be rated. An extension of this time limit is available if the evaluation service submits an acceptable reason in writing for the delay.
- All acceptable foreign education evaluation documents submitted directly by the evaluation service to the address below will be retained by MTA New York City Transit in a permanent file for future reference.

-
1. Have the evaluation service mail your completed original evaluation to:

Personnel Testing, Selection and Classification Unit
c/o (please state the specific Exam Title and Exam Number)
180 Livingston Street, Room 4070
Brooklyn NY 11201

2. Have the evaluation service include:
 - Your **name** and **social security number** with the evaluation; and
 - The **title** and **examination number** of the examination you are applying for on the envelope.
 - A stamped, self-addressed stamped post card (as mentioned in # 6 below).
3. Photocopies sent by candidates will **not** be accepted.
4. Only evaluations which have the raised seal or original stamp of the evaluation service on the document **and** are submitted directly to MTA New York City Transit by an approved evaluation service will be accepted.
5. If you previously had an evaluation by one of the approved services listed on the reverse side, you may request that the service send a certified duplicate original directly to MTA New York City Transit.
6. To obtain confirmation that MTA New York City Transit has received your evaluation from the service, have a stamped, self-addressed post card sent to us by the service along with your evaluation. We will return the post card to you to acknowledge that your evaluation has been received.

SEE NEXT PAGE FOR APPROVED FOREIGN EDUCATION EVALUATION SERVICES

FOREIGN EDUCATION FACT SHEET

**Center for Applied Research,
Evaluation & Education, Inc.**

International Evaluation Service
P.O. Box 18358
Anaheim, CA 92817
Phone: (714) 237-9272; 237-9276
Fax: (714) 237-9279
E-mail: eval_caree@yahoo.com

Education Evaluators International, Inc.

P.O. Box 751169
Forest Hills, NY 11375
Phone: (401) 521-5340
Fax: (718) 425-9929
E-mail: gary@educei.com

Education International, Inc.

29 Denton Road
Wellesley, MA 02482
Phone: (781) 235-7425
Fax: (781) 235-6831
E-mail: edint@gis.net
Web: <http://www.educationinternational.org>

Educational Credential Evaluators, Inc.

PO Box 514070
Milwaukee, WI 53202
Phone: (414) 289-3400
Fax: (414) 289-3411
E-mail: eval@ece.org
Web: <http://www.ece.org>

Educational Records Evaluation Service, Inc.

601 University Avenue, Suite 127
Sacramento, CA 95825-6738
Phone: (916) 921-0790
Fax: (916) 921-0793
E-mail: edu@eres.com
Web: <http://www.eres.com>

Evaluation Service, Inc.

333 W. North Avenue, #284
Chicago, IL 60610-1293
Phone: (847) 477-8569
Fax: (312) 587-3068
E-mail: info@evaluationservice.net
Web: www.evaluationservice.net

Foundation for International Services, Inc.

505 Fifth Avenue South, Suite 101
Edmonds, VA 98020
Phone: (425) 248-2255
Fax: (425) 248-2262
E-mail: info@fis-web.com
Web: www.fis-web.com

Globe Language Services, Inc.

305 Broadway Ste. 401
New York, NY 10007
Phone: (212) 227-1994
Fax: (212) 693-1489
E-mail: info@globelanguage.com
Web: www.globelanguage.com

Josef Silny & Associates, Inc.

International Education Consultants
7101 S.W. 102nd Avenue
Miami, FL 33173
Phone: (305) 273-1616
Fax: (305) 273-1338
E-mail: info@jsilny.com
Web: <http://www.jsilny.com>

Span Tran Educational Services, Inc.

7211 Regency Square Blvd., Suite 205
Houston, TX 77036-3197
Phone: (713) 266-8805
Fax: (713) 789-6022
Web: <http://www.spantran-edu.com>

World Educational Services, Inc.


P.O. Box 5087, Bowling Green Station
New York, NY 10274-5087
Phone: (800) 937-3895
Fax: (212) 739-6139
E-mail: info@wes.org
Web: <http://www.wes.org>

Foreign Academic Credentials Services, Inc.

P. O. Box 400
Glen Carbon, IL 62034
Phone: (618) 656-5291
Fax: (618) 656-5292
E-mail: facs@aol.com Web: www.facsusa.com

Applicant ID _____ (if known)

Social Security Number _____ - _____ - _____

 New York City Transit Manhattan and Bronx Surface Transit Operating Authority (MaBSTOA)	For Official Use Only	
	Q	NQ
	FINAL RATING	
BUS MAINTAINER (CHASSIS) <i>Open Competitive</i> Exam No. 4103	1 ST _____ CODE _____ 2 ND _____ CODE _____	1 ST _____ CODE _____ 2 ND _____ CODE _____
	3 RD _____ CODE _____	3 RD _____ CODE _____ Entered By _____

EDUCATION AND EXPERIENCE TEST PAPER (EETP)

This **test** will evaluate your education and experience. To obtain appropriate credit, you must complete this form accurately. Be sure to include your SOCIAL SECURITY NUMBER on each sheet.

If any information is missing, cannot be read or lacks necessary detail, you will be found **NOT QUALIFIED** or receive a lower score on the test. The information on this form must be verifiable. You will be disqualified if your statements are found to be false, exaggerated, or misleading.

Do not write your name anywhere on this EETP or attach your resume. Resumes will not be rated. Print using only Black or Blue Ink.

SECTION A - EDUCATION

Section A.1 - FOREIGN EDUCATION EVALUATION	FOR OFFICE USE ONLY
In order for foreign education to be rated, it must be evaluated by an evaluation service approved by MTA New York City Transit. Follow the instructions on the Foreign Education Fact Sheet, and refer to the Notice of Examination to see which kind of evaluation is required for this test. If you are claiming credit for foreign education, check only one of the following: For this examination: <input type="checkbox"/> I am having an evaluation of my foreign education submitted directly to MTA New York City Transit using an approved evaluation service. <input type="checkbox"/> I wish to use an evaluation of my foreign education which was previously submitted directly to MTA New York City Transit by an approved evaluation service.	
Section A.2 - HIGH SCHOOL OR HIGH SCHOOL EQUIVALENCY	FOR OFFICE USE ONLY
Did you graduate HS? <input type="checkbox"/> Yes ____/____ <input type="checkbox"/> No <small style="margin-left: 100px;">Month Year</small>	
Name of High School: _____ <input type="checkbox"/> USA <input type="checkbox"/> Foreign	
High School located in the State of: _____ Country of: _____	
Do you have a GED? <input type="checkbox"/> Yes ____/____ <input type="checkbox"/> No Name of Agency issuing GED: _____ <small style="margin-left: 100px;">Month Year</small>	

You can find a sample EETP at “<http://www.mta.info/nyct/hr/appexam.htm>”

Use the sample EETP as guide for completing this EETP correctly.



SECTION B – EMPLOYMENT/WORK EXPERIENCE (PAID OR VOLUNTEER)

INSTRUCTIONS

You must complete all sections concerning your employment and you must describe your job duties in detail. Failure to do so will result in your disqualification. DO NOT ATTACH A RESUME. RESUMES WILL NOT BE RATED. Print using only black ink or blue ink. You must not reveal your name anywhere on this test paper.

Include relevant part-time and volunteer experience. If you are or have been in business for yourself, enter "self-employed" on the line labeled "Name of Employer". If you had a substantial change in duties or a return to work after a break in service with the same employer, enter this information in separate boxes. List the percentage of time spent on each duty. The total of these percentages must equal 100 percent.

BOX 1	<p>Most Recent Employment: From: ___ / ___ To: ___ / ___ Total Time: ___ / ___</p> <p style="text-align: center; font-size: small;">Month Year Month Year Year(s) Month(s)</p> <p>Job Title: _____ Other name of your Job Title, if any: _____</p> <p>No. of Hrs. Worked per Week: _____ Starting Salary \$ _____ per _____ Last Salary \$ _____ per _____</p> <p>Name of Employer: _____</p> <p>Address of Employer: _____</p> <p>Nature of Employer's Business: _____</p>
--------------	---

**FOR
OFFICE
USE
ONLY**

Describe each of your duties separately with percentages. (Required for rating)	% Time
Total Time Spent Performing These Duties =	100%

You may describe other relevant jobs by adding additional sheets in the same format. Use a separate box for each job. Number any additional job BOX 4, 5, 6 ... etc.

SECTION B – EMPLOYMENT/WORK EXPERIENCE (PAID OR VOLUNTEER)

BOX 2	<p>Employment: From: ___ / ___ To: ___ / ___ Total Time: ___ / ___</p> <p style="text-align: center; font-size: small;">Month Year Month Year Year(s) Month(s)</p>	FOR OFFICE USE ONLY	
Job Title: _____ Other name of your Job Title, if any: _____			
No. of Hrs. Worked per Week: _____ Starting Salary \$ _____ per _____ Last Salary \$ _____ per _____			
Name of Employer: _____			
Address of Employer: _____			
Nature of Employer's Business: _____			
Describe each of your duties separately with percentages. (Required for rating)			% Time
Total Time Spent Performing These Duties =		100%	

SECTION C – LICENSES AND CERTIFICATES

Refer to the Notice of Examination to see if a license or certificate is required. If it is, and you possess this license or certificate, fill in the following information. You may describe additional licenses or certificates on a separate sheet of paper using the same format.

<p>Drivers License:</p> <p>Class: _____ Check all endorsements currently on your license: <input type="checkbox"/> Hazardous Waste <input type="checkbox"/> Air Brake <input type="checkbox"/> Passenger</p> <p>State Where License was issued: _____ License Number: _____</p> <p>Date Issued: _____ Expiration Date: _____</p> <p>Other Licenses/Certificates:</p> <p>Title of License or Certificate: _____</p> <p>Issued by: _____</p> <p>License Number: _____</p> <p>Date Issued: _____ Expiration Date: _____</p>	<p>FOR OFFICE USE ONLY</p>
--	---

SECTION D – SELECTIVE CERTIFICATION(S)

<p>If you want to apply for Selective Certification as described in the Notice of Examination, complete this section. I am requesting selective certification(s)</p> <p>for: _____</p>	<p>FOR OFFICE USE ONLY</p>
--	---

SECTION E – SUBMISSION CHECKLIST

(Optional)

- Yes, my 9 digit social security number and exam number is included on every page of this document.
- No, I did not include my name anywhere in this document.
- Yes, I have read the Notice of Examination and filled out only the sections that are required for the position I am applying for.
- No, I have not included my resume because only this form will be evaluated.
- Yes, I have used extra sheets of paper to list schools and previous employment that did not fit on this form.
- Yes, I have listed more than 1 duty for each place of employment included and those duties add up to 100%.
- Yes, I have listed the class, endorsements and restrictions for my drivers license. (If the position requires a drivers license)