NEW_JERSEY CIVIL SERVICE COMMISSION IEDICAL AUTHORIZATION For Make-up Examinations Involving Professional Engineering Promotional Return the Completed Form You may also Announcements and All Public Safety Announcements with additional documentation, if needed, to: Test security is of critical concern in authorizing make-up examinations. A request for a make-up examination on medical grounds for all police and fire examinations or professional level engineering NJCSC Information Center promotional examinations may only be authorized in cases of a debilitating injury or illness requiring an

extended convalescent period. We understand that a candidate may not be able to return to work while he or she is being treated. However, the issue is whether or not the candidate is able to take a written or oral examination on the scheduled date.

Attn: Make-up Requests P O Box 310 Trenton, NJ 08625-0310

fax it to: Fax: (609) 984-1064 If you have any questions: Telephone: (609) 292-4144

APP. ID/SOCIAL SECURI	TY NUMBER	TEST DATE
	EXAM SYMB	OL
PHYSICIAN'S LICENSE #	PHYSICIAN B	SUSINESS TELEPHONE
		APP. ID/SOCIAL SECURITY NUMBER EXAM SYMBO PHYSICIAN'S LICENSE # PHYSICIAN B ()

Special Accommodations

In many cases, candidates who request a make-up are actually able to take the examination as scheduled when we provide special accommodations at the testing center. The following are some examples of accommodations that we can arrange:

- A separate room with someone on our staff to read the test out loud and/or mark the candidate's answers on his or her answer sheet.
- A separate room to allow the candidate freedom of movement during the test if he or she cannot sit at a desk for an extended period of time.
- Different seating arrangements to allow a candidate to keep his or her limb(s) straight. (Some candidates have brought their own reclining chairs because they were unable to sit up.)
- Extra time to take the test may be allowed depending on the situation.

Physician's Diagnosis and Certification

Please note any information regarding your patient's medical condition will be kept STRICTLY CONFIDENTIAL and in a separate file with the Civil Service Commission

Will the above candidate be able to take the examination as scheduled if the Civil Service Commission provides special accommodations such as those indicated above?

YES Please indicate below what accommodations are needed and why: __

NO For this make-up request to be considered, you must complete this form and provide a separate detailed certification containing a diagnosis and statement clearly indicating why the above candidate's physical condition will preclude him or her from taking the examination as scheduled. It should include the date the injury/illness began, the date of his/her last office visit and the earliest date that the candidate can take this test. The documentation must be on official letterhead, written in layman's terms and legible. A form letter will not be accepted. If insufficient, untimely, or illegible information is provided, the candidate's request will be denied.

I CERTIFY that the foregoing statements along with any additional statements made on the attached sheets are true. I am aware that, if any of these statements are willfully false, I am subject to punishment under penalty of law.

Signature of	of
Physician:	

Date: