



New York City
CIVIL SERVICE COMMISSION

Nancy G. Chaffetz, Chair
Commissioner

Rudy Washington, Vice-Chair
Commissioner

Charles D. McFaul
Commissioner

Alina A. Garcia
Director and General Counsel

**APPELLANT
NOTICE OF HEARING APPEARANCE**

| | |
|-------------------------------|---------------------|
| <u>Appellant Name:</u> | <u>Date:</u> |
|-------------------------------|---------------------|

Appellant's Information:

| | |
|---|--|
| Address: | |
| Phone #: | |
| Email Address: | |
| May the CSC contact you via email? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Do you have a representative/ attorney? | <input type="checkbox"/> YES <input type="checkbox"/> NO |

Appellant's Witness Information:

| | |
|---------------|--|
| Witness Name: | |
| Address: | |