

**SAMPLE OF RECOMMENDATION LETTER
ON EMPLOYER'S LETTERHEAD**

Date _____

**Fire Department
Bureau of Fire Prevention
9 MetroTech Center
Brooklyn, N.Y. 11201-3857**

Dear Sir/Madam:

I'm pleased to recommend _____ to apply
(applicant's name)
for a Certificate of Fitness for _____. He/She has
(type of certificate)
_____ of experience and will be employed at _____.
(years, months) (address of building)
Applicant is of GOOD CHARACTER and is PHYSICALLY ABLE to perform the functions required by the
holder of the Certificate of Fitness.

(signature of employer)

**NOTE: IF NOT ON EMPLOYERS
LETTERHEAD
SIGNATURE MUST BE NOTARIZED**

Fire Department - City of New York
Bureau of Fire Prevention
*****PLEASE READ THIS NOTICES*****

To: Applicants for Certificates of Fitness

The instructions involving the written examination for the Certificate of Fitness are as follows:

1. **ONCE YOU HAVE STARTED YOUR TEST**, You will not be allowed to leave the testing room for any reason. Ex: Bathroom, Phone calls, Money for parking at a meter.....etc. This will have to be done before you enter the room. **IF YOU MUST LEAVE THE ROOM..your test will be changed and you will have to start your exam over.**
2. **STUDY MATERIAL** (Notice of Examination) are available at the front desk before taking any Certificate of Fitness test. **PLEASE NOTE:** You must tell the examiner if you wish to get the study material or read the study material **BEFORE** you sit to take your test!!! Once you start your test, you will not be allowed to use the study material.
3. All test booklets and all other confidential materials remains the property of the Fire Dept. It must not be removed from this room at anytime.
4. **I cannot** withdraw from the examination after the starting time without being charged a failure.
4. If I fail this examination, I will not be permitted to take another examination for a period of **90 days**, at which time a new application and letter of recommendation must be filed and **another fee of \$25.00 will be charged.**
5. I am aware that impersonating another for test-taking purposes is a misdemeanor, punishable by law.
6. I am aware that knowingly submitting an application which contains a false statement or false information to this Department is a felony, punishable by law.
7. I am aware that offering a bribe to any employee of the City of New York is a felony, punishable by law.
8. **I am aware that using any materials, other than the test itself, during the Certificate of Fitness exam will disqualify me as an applicant.**
9. I understand that this Certificate is being issued conditionally upon clearance of any delinquency status regarding Child Care obligations by the NYC Administration for Children's Services.

I agree to immediately return any issued license upon notification by this agency of delinquent status as reported by the NYC Administration for Children's Services.

Applicant's Signature

Date

NOTE: This signed statement to be attached to the applicant's letter of recommendation.