

Human Capital - Bureau of Examinations
List Management and Audit (LMA)
The David N. Dinkins Municipal Building
One Centre Street, 21st Floor, Room 2150
New York, NY 10007

Request For Restoration To An Eligible List

Instructions: This is a fillable form. Please type or print your information clearly. You **must** complete a separate form for each restoration request. Forms must be completed in its entirety, including your telephone number and email address.

Completed forms **must** be sent to DCAS via email to LMACustomerService@dcas.nyc.gov or by mail to the Office of List Management and Audit, One Centre Street, 21st Floor, Room 2150, New York, NY 10007.

Check one (1) box below:

- I am submitting this restoration form for an open-competitive eligible list. **Please complete both Section A and Section C on the second page.**
- I am submitting this restoration form for a promotion eligible list. **Please complete Section A and Sections B and C on the second page.**

Section A: Candidate's Information

Exam Title:

Exam No.: List No.:

Social Security No. (last 4-digits): Profile No.:

Last Name: First Name: MI:

Address 1:

Address 2:

Apt No.:

City and State: Zip Code:

Is this a **new address**? Check box if **Yes**.

Telephone No. (include area code):

Email:

(Turn Over For Section B and Section C)

Section B: For Promotion Lists Only

Check the location(s) you would be willing to accept.

(Please Note: This does not apply to the operation forces of the Transit Authority or to the uniformed forces of the Police, Fire, and Sanitation Departments and the Housing Authority.)

- Any Location Citywide Field
- Bronx Brooklyn Staten Island Manhattan Queens

Check the special type of employment you would be willing to accept.

- Temporary Rotating Shifts Night Shift

Section C: Restoration Reason and Signature

Reason for Restoration:

Signature:

(electronic or physical)

Date:

Do Not Write Below: For DCAS Use Only

Special Comments:

Staff Initials & Date: