



THE CITY OF NEW YORK  
DEPARTMENT OF CITYWIDE  
ADMINISTRATIVE SERVICES  
APPLICATION UNIT  
1 CENTRE STREET, 14<sup>TH</sup> FLOOR  
NEW YORK, NY 10007

**REQUIRED INFORMATION**

APPLICATION  
EDUCATION AND EXPERIENCE  
TEST  
FOREIGN EDUCATION  
EVALUATION GUIDE  
(IF APPLICABLE)

BILL DE BLASIO  
Mayor

STACEY CUMBERBATCH  
Commissioner

**NOTICE  
OF  
EXAMINATION**

**ASSISTANT PUBLIC HEALTH ADVISER (COMMUNICABLE DISEASE CONTROL)  
Exam No. 6011  
AMENDED NOTICE - November 12, 2015**

**WHEN TO APPLY: From: October 7, 2015**

**APPLICATION FEE: \$47.00**

**To: October 27, 2015**

**If you choose to pay the application fee with a credit/debit/gift card, you will be charged a fee of 2.49% of the payment amount. This fee is nonrefundable.**

**THE TEST DATE: The multiple-choice test is expected to be held on Saturday, January 30, 2016.**

**The Notice of Examination is amended to add the Written Test Description.**

**YOU ARE RESPONSIBLE FOR READING THIS NOTICE IN ITS ENTIRETY BEFORE YOU  
SUBMIT YOUR APPLICATION.**

**WHAT THE JOB INVOLVES:** Assistant Public Health Advisers (Communicable Disease Control), under direct supervision, with some latitude for independent judgment and initiative, learn and apply communicable disease control principles for diseases such as Sexually Transmitted Diseases (STDs), Tuberculosis (TB) and HIV/AIDS. Communicable disease control principles include interviewing, following up with clients who have or may have a communicable disease, and maintaining epidemiological record systems. In addition, Assistant Public Health Advisers (Communicable Disease Control) may assist in visiting patients for follow up and visiting private physicians, laboratories, and hospitals to gather medical information. All Assistant Public Health Advisers (Communicable Disease Control) perform related work.

**Special Working Conditions:** Assistant Public Health Advisers (Communicable Disease Control) may be required to work shifts including nights, Saturdays, Sundays, and holidays.

Some of the physical activities that may be performed by Assistant Public Health Advisers (Communicable Disease Control) and environmental conditions that may be experienced are: traveling to all areas of the City by public transportation, car and/or by foot; visiting clinics, hospitals, doctors, nurses, laboratories, schools, correctional facilities, work sites, and homes of communicable disease clients and their contacts; walking up as many as six flights of stairs; carrying equipment and supplies weighing up to 13 pounds from vehicles to the site and back; and, in accordance with infection control guidelines, wearing protective garments such as gloves and masks.

(This is a brief description of what you might do in this position and does not include all the duties of this position.)

**THE SALARY:** The current minimum salary is \$30,247 per annum. This rate is subject to change.

**HOW TO APPLY:** If you believe you meet the requirements in the "How to Qualify" section, submit an application on the Online Application System (OASys) at [www.nyc.gov/examsforjobs](http://www.nyc.gov/examsforjobs). Follow the onscreen application instructions for electronically submitting your application and payment, and completing any required information. A unique and valid email address is required to file online. Several internet service providers, including but not limited to Google, Yahoo!, AOL, Outlook.com, and Mail.com offer free email addresses. **All new OASys accounts require verification before a candidate can submit an application to ensure the accuracy of candidate information. Verification is instantaneous for most accounts, but some accounts may require up to 24 hours to be reviewed by a staff member and resolved. Email notification will be sent to those creating accounts that require additional documentation before they can be resolved. Please keep this information and the application period deadline in mind when creating your account.** The following methods of payment are acceptable: major credit card, bank card associated with a bank account, or a prepaid debit card with a credit card logo which you may purchase online or at various retail outlets.

If you are receiving or participating in certain forms of public assistance/benefits/programs, or are a veteran, you may qualify to have the application fee waived. For more information on eligibility for a fee waiver and documentation requirements, visit the Fee Waiver FAQ on the Online Application System at <https://a856-eeexams.nyc.gov/OLEE/oasys/FAQFeeWaiver.aspx>.

**READ CAREFULLY AND SAVE FOR FUTURE REFERENCE**

You may come to the DCAS Computer-based Testing & Applications Centers to file for this examination online and submit a money order payable to DCAS (Exams) or to submit documentation for a fee waiver.

The centers will be open Monday through Saturday from 9:00 AM to 5:00 PM:

**Manhattan**  
2 Lafayette Street  
17<sup>th</sup> Floor  
New York, NY 10007

**Brooklyn**  
210 Joralemon Street  
4<sup>th</sup> Floor  
Brooklyn, NY 11201

**The DCAS Computer-based Testing & Applications Centers will be closed on Monday, October 12, 2015.**

**Special Circumstances Guide:** This guide is located on the DCAS website at [www.nyc.gov/html/dcas/downloads/pdf/misc/pdf\\_c\\_special\\_circumstances\\_guide.pdf](http://www.nyc.gov/html/dcas/downloads/pdf/misc/pdf_c_special_circumstances_guide.pdf) and available at the DCAS Computer-based Testing & Applications Centers. This guide gives important information about requesting an alternate test date because of religious observance or a special test accommodation for disability, claiming Veterans' or Legacy credit, and notifying DCAS of a change in your mailing address. Follow all instructions on the Special Circumstances Guide that pertain to you when you complete your "Application for Examination."

**HOW TO QUALIFY:** You may be given the test before we verify your qualifications. You are responsible for determining whether or not 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.

**Education and Experience Requirements:**

1. A four-year high school diploma or its educational equivalent **and** one year of satisfactory, full-time experience performing interviews or field investigations in a communicable disease control program; or
2. Education and/or experience equivalent to "1" above. Undergraduate college credit can be substituted for experience on the basis of 15 semester credits from an accredited college for six months of full-time experience. However, all candidates must have a four-year high school diploma or its educational equivalent.

**The education requirement must be met by January 31, 2016. The experience requirement must be met by the last day of the Application Period (October 27, 2015).**

The high school diploma or its educational equivalent must be approved by a State's Department of Education or a recognized accrediting organization. The college or university must be accredited by regional, national, professional, or specialized agencies recognized as accrediting bodies by the U.S. Secretary of Education and by the Council for Higher Education Accreditation (CHEA).

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. This is required only if you need credit for your foreign education in this examination.

**You must clearly specify in detail all of your relevant education and experience on your Education and Experience Test and submit it by the end of the Application Period.** If you are currently employed by the City of New York, do not assume that persons reviewing your Education and Experience Test will know information which you do not provide on your Education and Experience Test, including information about your current job. If you have applied for a previous examination, do not assume that persons reviewing your Education and Experience Test will know about information you provided on a previous Education and Experience Test.

You will not receive credit for education which you obtain after January 31, 2016 or experience which you obtain after the end of the Application Period.

**Medical Requirement:** Medical guidelines have been established for the position of Assistant Public Health Adviser (Communicable Disease Control). Candidates will be examined to determine whether they can perform the essential functions of the position of Assistant Public Health Adviser (Communicable Disease Control). Where appropriate, a reasonable accommodation will be provided for a person with a disability to enable him or her to take the examination, and/or to perform the essential functions of the job.

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

**Residency Requirement Advisory:** Under New York City Administrative Code Section 12-120, you might need to be a resident of the City of New York within 90 days of the date you are appointed to this position. Since residency requirements vary by title, appointing agency and length of service, consult the **appointing agency's personnel office** at the time of the appointment interview to find out if City residency is required.

**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 with the City of New York.

**REQUIRED INFORMATION:**

1. **Application for Examination:** Follow the online instructions, including those relating to the payment of fee and, if applicable, those found in the Special Circumstances Guide.
2. **Education and Experience Test:** Fill out **Sections A.1 (if applicable), A.2, A.4 (if applicable), and B (if applicable).** This test must be filled out completely and in detail for you to receive your proper rating. Follow the online instructions.
3. **Foreign Education Evaluation Guide (Required only if you need credit for your foreign education to meet the education and experience requirements):** 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 are listed on the Foreign Education Evaluation Guide located on the DCAS website at [www.nyc.gov/html/dcas/downloads/pdf/misc/foreigneducation.pdf](http://www.nyc.gov/html/dcas/downloads/pdf/misc/foreigneducation.pdf). When you contact the evaluation service, ask for a "**document-by-document**" (**general**) evaluation of your foreign education. You must have one of these services submit its evaluation of your foreign education directly to the Department of Citywide Administrative Services no later than eight weeks from the last date for applying for this examination.

**THE TEST:** The multiple-choice test may be given at a computer terminal or in paper and pencil format. You will be informed of the format on your Admission Notice. Your score on this test will be used to determine your place on an eligible list. You must achieve a score of at least 70% to pass the test.

The multiple-choice test is designed to assess the extent to which candidates have certain abilities determined to be important to the performance of the tasks of an Assistant Public Health Adviser (Communicable Disease Control). Task areas to be tested are as follows: data entry/filing, record searching, communicating information, case management and collecting information.

The test may include questions requiring the use of any of the following abilities:

**Deductive Reasoning** - the ability to apply general rules to specific problems to come up with logical answers. Example: An Assistant Public Health Adviser (Communicable Disease Control) may use this ability when applying the windows period to a specific patient based on the communicable disease.

**Inductive Reasoning** - the ability to combine separate pieces of information or specific answers to problems to form general rules or conclusions; to think of possible reasons for why things go together. Example: An Assistant Public Health Adviser (Communicable Disease Control) may use this ability when acquiring two separate lists of contacts and determining a common source.

**Judgement & Decision Making** - the ability to review information to develop and evaluate the relative pros and cons of potential solutions to problems and choosing the most appropriate one. Example: An Assistant Public Health Adviser (Communicable Disease Control) may use this ability when screening clients to determine the best way to obtain accurate information.

**Number Facility** - involves the degree to which adding, subtracting, multiplying and dividing can be done quickly and correctly. This can be steps in other operations like finding percentages and taking square roots. Example: An Assistant Public Health Adviser (Communicable Disease Control) may use this ability when calculating the amount of days to take a medicine based on the dosage.

**Written Comprehension** - the ability to understand written sentences and paragraphs. Example: An Assistant Public Health Adviser (Communicable Disease Control) may use this ability when reading and understanding medical records.

**Written Expression** - the ability to use English words or sentences in writing so that others will understand. Example: An Assistant Public Health Adviser (Communicable Disease Control) may use this ability when sending an email to a medical facility.

Certain questions may need to be answered on the basis of documents or other information supplied to the candidates on the date of the multiple-choice exam.

**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, they must be hand-held, battery or solar powered, numeric only. Calculators with functions **other than** addition, subtraction, multiplication and division **are prohibited**. 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 may not have any other person, including children, present with you while you are being processed for or taking the test, and no one may wait for you inside of the test site while you are taking the test.

**Required Identification:** You are required to bring one (1) form of valid (non-expired) signature and photo bearing identification to the test site. The name that was used to apply for the exam must match the first and last name on the photo ID. A list of acceptable identification documents is provided below. **If you do not have an acceptable ID, you may be denied testing.** Acceptable forms of identification (bring one) are as follows: State issued driver's license, State issued identification card, US Government issued Passport, US Government issued Military Identification Card, US Government issued Alien Registration Card, Employer ID with photo, or Student ID with photo.

**Leaving:** 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.

**ADMISSION NOTICE:** You should receive an Admission Notice in the mail about 10 days before the date of the test. If you do not receive an Admission Notice at least 4 days before the test date, you must go to the Administration, Customer and Exam Support Group, 1 Centre Street, 14<sup>th</sup> Floor, Manhattan, to obtain a duplicate notice. Test site assignments will take your address into consideration, but proximity cannot be guaranteed.

**THE TEST RESULTS:** If you meet the education and experience requirements and pass the multiple-choice 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.

**CHANGE OF MAILING AND/OR EMAIL ADDRESS:** It is critical that you promptly notify DCAS of any change to your mailing address and/or email address. You may miss important information about your exam(s) or consideration for appointment, including important information that may require a response by a specified deadline, if we do not have your correct mailing and/or email address. Change of mailing and/or email address requests submitted to any place other than DCAS, such as your Agency or to the United States Postal Service will NOT update your records with DCAS. To update your mailing and/or email address with DCAS, you must submit a change request by mail or in person. Your request must include your full name, social security number, exam title(s), exam number(s), old mailing and/or email address, and your new mailing and/or email address. Your request can be mailed to DCAS Records Room, 1 Centre Street, 14<sup>th</sup> Floor, New York, NY 10007 or brought in person to the same address Monday through Friday from 9AM to 5PM.

**ADDITIONAL INFORMATION:**

**Selective Certification for Driver License:** If you have a motor vehicle Driver License that is valid in the State of New York, you may be considered for appointment to positions requiring this license through a process called Selective Certification. If you qualify for Selective Certification, you may be given preferred consideration for positions requiring this license. Follow the instructions given to you on the day of the multiple-choice test to indicate your interest in such Selective Certification. Your Driver License will be checked by the appointing agency at the time of appointment. **If you are appointed through Selective Certification, you must maintain your motor vehicle Driver License for the duration of your employment.**

**Selective Certification for Foreign Language:** If you can speak Albanian, Arabic, Bengali, Bosnian/Serbo-Croatian, Chinese (Cantonese), Chinese (Mandarin), French, Greek, Haitian/Creole, Hindi, Italian, Japanese, Korean, Portuguese, Polish, Russian, Spanish, Tibetan, Urdu, Vietnamese, West African Languages (e.g., Ibo, Swahili, Yoruba, Mandingo), Yiddish and/or you know American Sign Language, you may be considered for appointment to positions requiring this ability through a process called Selective Certification. If you pass a qualifying test, you may be given preferred consideration for positions requiring this ability. Follow the instructions given to you on the day of the multiple-choice test to indicate your interest in such Selective Certification.

**The above Selective Certification requirements may be met at anytime during the duration of the list.** If you meet this requirement at some future date, please submit a request by mail to: DCAS Bureau of Examinations - Exam Development Group, 1 Centre Street, 14<sup>th</sup> Floor, New York, NY 10007. Please include the examination title and number and your social security number on your correspondence.

**SPECIAL ARRANGEMENTS:**

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

- (1) compulsory attendance before a public body;
- (2) on-the-job injury or illness caused by municipal employment where you are an officer or employee of the City;
- (3) absence from the test within one week after the death of a spouse, domestic partner, parent, sibling, child or child of a domestic partner where you are an officer or employee of the City;
- (4) absence due to ordered military duty;
- (5) a clear error for which the Department of Citywide Administrative Services or the examining agency is responsible; or
- (6) a temporary disability, pregnancy-related, or child-birth-related condition preventing you from taking the test.

To request a make-up test, contact the Administration, Customer and Exam Support Group in person or by mail at 1 Centre Street, 14<sup>th</sup> Floor, New York, NY 10007, as soon as possible and provide documentation of the special circumstances that caused you to miss your test.

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

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**The General Examination Regulations of the Department of Citywide Administrative Services apply to this examination and are part of this Notice of Examination. They are posted and copies are available at [nyc.gov/dcas](http://nyc.gov/dcas) and at the DCAS Computer-based Testing & Applications Centers.**

The City of New York is an Equal Opportunity Employer.  
Title Code No. 51190; Public Health Adviser Occupational Group

**For information about other exams, and your exam or list status, call 212-669-1357.  
Internet: [nyc.gov/dcas](http://nyc.gov/dcas)**