



**CITY OF CHILICOTHE**  
LUKE M. FEENEY, MAYOR

**TAMRA J. LOWE**  
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## *Firefighter Exam Fee Waiver Request*

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A \$25 Civil Service examination/application fee is required and must be submitted with the completed employment application but may be waived upon completion of this form if your income is very low or you can demonstrate a financial hardship. The Application Fee Waiver must be completed, signed and submitted with the employment application in lieu of the \$25 check or money order.

Applicant's Name \_\_\_\_\_

(Please Print – Last First Middle Initial)

Last four (4) digits of applicant's Social Security Number \_\_\_\_\_

Please briefly outline your financial situation or financial hardship below (please print)

I request a waiver of the application fee for the City of Chillicothe Civil Service Firefighter Exam. I certify that to the best of my knowledge, the information furnished above is true and complete. I further understand that submitting false information on this waiver form or any other part of the employment application is grounds for disqualification from the Civil Service/Chillicothe Firefighter selection process.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date