



Transportation Construction Inspector Availability Questionnaire

1. Name _____

2. Are you available for an inspector position in the 2024 construction season? (Current Year)

Yes [] No []

3. For what period? From _____ to _____ (Give specific dates)

4. Do you have reliable transportation to job sites? Yes [] No []

If no, please explain: _____

5. List the DOT Region(s) you are interested in working, in priority order:

- a. _____ c. _____
b. _____ d. _____

6. Do you have a relative(s), or other close relationship, working for the Department of Transportation, Department Consultant or Contractor? Yes [] No []

If yes, list names(s), relationship(s) and their work location(s):

7. Total number of College Credits earned: _____

Please Note: If you believe you qualify based on education, please submit an unofficial transcript stating your degree program and the school's web address listed on the bottom of the page with your application.

8. If currently a college/university student, where do you attend: _____

Scheduled graduation date: _____

9. Your current Address: _____ Email Address: _____

10. Primary Telephone Number: _____ Other: _____

11. How did you hear about the TCI positions with the NYSDOT?

Signature: _____

Date: _____