

STATE OF NEW JERSEY

In the Matter of Lisa Clark, Senior Biologist, Wildlife Management (PS5940G), Department of	: FINAL ADMINISTRATIVE ACTION OF THE CIVIL SERVICE COMMISSION
Environmental Protection	:
CSC Docket No. 2022-489	Examination Appeal

ISSUED: DECEMBER 6, 2021 (SLK)

Lisa Clark requests to file a late application for the promotional examination for Senior Biologist, Wildlife Management (PS5940G), Department of Environmental Protection.

The examination at issue was announced with requirements that had to be met as of the July 21, 2021 closing date. A total of three employees applied and two were determined ineligible. No certifications have yet to be issued. The list expires on September 29, 2024.

On appeal, the petitioner states that on August 17, 2021, an Executive Assistant 3 asked her why she did not apply for the subject examination. The petitioner, who is provisionally serving in the subject title, asserts that this is the first time she became aware of the subject examination. She indicates that she immediately responded to the Executive Assistant 3 and human resources advising that she never received notice for the subject examination. It is noted that the appointing authority provided this agency a letter that was sent to the petitioner's home address. She submits a notarized sworn statement indicating that she did not receive notice of the subject announcement and stating that if she had, she would have applied.

CONCLUSION

N.J.A.C. 4A:4-2.1(e) provides that applications must be filed no later than the announced filing deadline. N.J.A.C. 4A:1-1.2(c) states that the Civil Service

Commission (Commission) may relax a rule for good cause in order to effectuate the purposes of Title 11A, New Jersey Statutes.

In this matter, personnel records indicate that the petitioner has been serving provisionally in the subject title since April 10, 2021. Further, although the appointing authority indicates that it did mail the petitioner the subject announcement to her home address, she submits a notarized sworn statement indicating that she never received it. Moreover, the list is incomplete as there are only two eligibles on the list. The Commission notes that the dual purpose of the Civil Service system is to ensure efficient public service for State and local governments and to provide appointment and advancement opportunities to Civil Service employees based on their merit and abilities. These interests are best served when more, rather than fewer, individuals are presented with employment opportunities. See Communications Workers of America v. New Jersey Department of Personnel, 154 N.J. 121 (1998). Therefore, the Commission finds that under these circumstances, there is good cause to relax N.J.A.C. 4A:4-2.1(e) and to allow the petitioner to submit her application and application fee after the closing deadline for prospective appointment opportunities only.

This determination is limited to the instant matter and does not provide precedent in any other matter.

ORDER

Therefore, it is ordered that this request be granted and the petitioner be permitted to submit an application for the Senior Biologist, Wildlife Management (PS5940G), Department of Environmental Protection, examination. It is further ordered that the petitioner submit a promotional examination application and the \$25.00 application processing fee to the Division of Agency Services. The application and processing fee must be postmarked no later than 15 days from the issuance date of this decision. Upon receipt of the application and processing fee, it is ordered that her application be processed. If the petitioner's application and the required payment are not postmarked on or before the 15th day after the issuance date of this decision, she will not be entitled to have her application reviewed. Should she subsequently be placed on the eligible list, it will be for prospective employment opportunities only.

This is the final administrative determination in this matter. Any further review should be pursued in a judicial forum.

DECISION RENDERED BY THE CIVIL SERVICE COMMISSION ON THE 1ST DAY OF DECEMBER 2021

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Deirdré L. Webster Cobb Chairperson Civil Service Commission

Inquiries and Correspondence Allison Chris Myers Director Division of Appeals and Regulatory Affairs Civil Service Commission Written Record Appeals Unit P.O. Box 312 Trenton, New Jersey 08625-0312

c: Lisa Clark (with blank application enclosure) Phiroza Stoneback Division of Agency Services Records Center

Staple Payment Here APPLICATION FOR PROMOTIONAL E		S 25.00 FEE REQUIRED Make Check/Money Order Payable to NJCSC FOR COMMISSION USE ONLY						
INSTRUCTIONS: Please print or type. Answer all pertinent question mation is accurate and complete. Sign your name in Block 12. NOTE: may be accepted after the last date for filing applications has passed. If you must notify the Civil Service Commission immediately in writi Return your completed application to your Personnel Office note filing listed on the announcement. $SvSan Mann. x NTCSC, p. 0. Treaten, Nix Terry 2000$: No additional informa 'you change your addr ng. iter-than the last date	ntion ress,						
FOR COMMISSION USE ONLY	2. Social Security Nur	mber: 3. Symbol ;						
STATUS: PAR:	* (see block 11 for additional inte 4. Name & Address:	formabon)						
SEN: UE: REV	Last:	First ML						
	Street							
1. Title of Promotion:	City: State: Zip Cede:							
	E-mail address							
Note Applications must be postmarked by	County: Devitine County: Telephone: MassCodd - Subder							
	GROUND DATA							
5a. Education (Indicate the highest level Diploma or Degree you have earned) High School Diploma or GED (A) Associate's Degree (S) Some College but No Degree (B) Bachelor's Degree								
5b. Completion of this part is VOLUNTARY and is to be used only for complyin	Committee and the second se	nd the New Jersey State Affirmative Action Program.						
Gender: (1) Male (2) Female (1) Black	ou are a member of:	American Indian spanic (4) Asian (5) or Alaskan Native						
6. Check the county in which you prefer to take the examination.	7. Are you claiming ve							
(Check one box only)		claiming veterans preference for this examination. If you have efference since April 1, 1980, no further action is needed						
(1) Camden (2) Mercer (3) Essex (4) Monmouth (6) Atlantic (7) Bergen	mouth (2) Mercer (3) Essex Otherwise, complete a vertice (6) Atlantic (7) Bergen documents. Claim forms							
 8. ADA Assistance: Check the box if you would like to be contacted regarding auxiliary aid or reasonable accommodation in taking this examination in accordance with the Americans with Disabilities Act. 	our office at 44 S. Clinton Avenue, Trenton, NJ, Completed forms should be mailed to the Department of Military and Veterans' Afflairs (DMAVA). For more information, visit their web site at www state.nj us/military or contact them at 1-888-865-8387. Note: In accordance with Public Law 2010 c.26, Veterans pay a reduced application fee of \$15.00 if they have previously established Veterans Preference with the DMAVA (as defined by N.J.S.A. 11A:5-1 et seq.), or your claim is approved by DMAVA at least 8 days prior to the issuance of this eligibility list.							
9. Check the county(s) in which you will accept employment. Please no have any questions regarding this, contact your Personnel Office.	ote: Not all promotional	lists can be used in all geographic locations. If you						
(A) Atlantic (C) Burlington (B) Bergen	D (D) Camden	(E) Cape May (F) Cumberland (G) Essex						
(H) Gloucester (J) Hudson (K) Hunterdon	(M) Middlesex	(N) Monmouth (L) Mercer (P) Morris						
ALL (Q) Ocean (R) Passaic (S) Salem	(T) Somerset	U) Sussex 🔲 (V) Union 🔲 (W) Warren						
10. Present Permanent Title & Appointment Date:		Your Social Security number will be kept confidential and (your applicant LD, number to identify and track all of you						
Name & Title of Immediate Supervisor:		and transactions associated with the application and testing s. Collecting this data is permissible under NJSA 11A:4-1.						
	submission is voluntary. If you do not provide the number.							
Telephone Number & Email Address of Immediate Supervisor:	you wil	te number will be assigned to you. However, once assigned Il be responsible for remembering it for any inquiries you we concerning your application or testing process.						
12. Signature: I CERTIFY that the statements made by me in this application are true, in good faith. I understand that if my application is incomplete, it may be rejected. (WAF	complete, and correct to the RNING: The Civil Service Cor	a best of my knowledge and belief, and are made						
examination, any applicant who makes a false statement of any material fact per NJAC 4A:4-6.2) NOTE: Your application may be released to the Appointing Authority for the purpose of verifying information with regard to your qualifications.								

Signature	Date
	IMPORTANT - please complete page 2 of this application and keep a copy for your records.

Title of Promotion:		Symbo	d:		SS#						
13. Educational Section - College And Graduate School - List any colleges, universities, and graduate schools you have attended. If it is required in the job announcement, be sure to attach a copy of your transcript or a list of courses, course descriptions, and credits completed. Foreign degrees/transcripts must be evaluated by a recognized evaluation service.											
What is the name and location of the college(s) you attended?	What yrs. did you attend?	What was your major course of study?	What type of degree did you eam?		Did you graduat		If NO, when will you graduate?	Number of credits earned			
	From To					ΠN	Month / Year				
	From To				ΠΥ[ΠN	Month / Yoar				
14. Other Schools or Training Courses - Include business, vocational, technical, or military schools you have attended, as well as any training courses that are related to the title for which you are applying. If it is not a full-time curriculum, be specific as to the number of hours attended.											
What is the name & location of school/facility where course(s)/training was held? What classes did you take?			What were the dates How many hours p you attended? did you attend?		iny hours per week attend?	Did you complete the program?					
				Month M. TO I	onth/Yr TO Month/Yr			□ y □ n			
				Month/Yr TQ Month/Yr				□ y □ N			
15. Use this space to describe any internships,	licenses, certi	ifications or registrations that you posse	iss wi	·	1	ion for v	which you are apply	/ing.			
A. What type of license(s), certification				1			(s) have you con				
	(o), dita/or re	gionalion(o) do you noto:		Where	was the in	iternsh	ip(s) completed?				
In which state(s) do you hold the lice	nse(s), certi	fication(s) and/or registration(s)?		What w	ere the da	ates of	the internship(s)?	2			
					any hours e part in th						
B. What was the original issue date of	the license(s	s), certification(s), and/or registration	n(s)?				curriculum?	Y 🗌 N			
				Level 1	- 3 Compl	eted	Month	Year			
What is the date of your current licen	ose(s), certifi	cation(s), and/or registration(s)?		Level 4	- 6 Compi	eted	•				
		<u> </u>			0.001110	0,00	Month	Year			
16. Employment Record - If you do not properly complete your application you may be declared ineligible or you may not receive proper credit for scoring purposes. If you held different positions with the same employer, list each position separately. Make sure you give full dates of employment (month/year), indicate whether the job was full or part time, and the number of hours worked per week. Since your application may be your only "test paper," be sure it is complete and accurate. Failure to complete your application properly may cause you to be declared ineligible, lower your score, or possibly cause you to fail. If more space is needed, attach separate sheets											
A What is the name and address of y current employer?	our	What is your title in this position?	List the major duties you perform in this position in order of importance.				in				
	Is this position:										
What dates have you been employed in this position?											
From To	Prof	essional Staff									
Month/Year Month/Year	and a second	port Staff									
B What was the name and address of previous employer?	your \	Mhat was your title in this position?	List the major duties you perform in this position in order of importance.					n			
		s this position: FULL TIME?									
		PART TIME?									
What dates were you employed in this position		(Average No. hrs. per wk.) many staff members did you supervise?									
From To		essional Stall									
Monthelicar Menthelicar		port Stalf		A 46			The state of second states of				
C What was the name and address of previous employer?	·	Mhat was your title in this position?	List the major duties you perform in this position in order of importance.				FI .				
		s this position: FULL TIME?									
		PART TIME?									
What dates were you employed in this position		(Average No. hrs. per wk.) many staff members did you supervise?									
From To		essional Staff									
Month/Year Month/Year	Sup	Support Staff									
DPF-1a \$25 (page 2 of 2 Revised 10-13-11)		DID YOU INCLUD	E AN	Y ATTACHMENT	IS TO THIS	APPLI	CATION?	YES NO			