In the Matter of Patricia Ruberti, Technical Assistant (PS3734K), Department of Human Services	STATE OF NEW JERSEY : : FINAL ADMINISTRATIVE ACTION
	: OF THE : CIVIL SERVICE COMMISSION :
CSC Docket No. 2022-61	Examination Appeal
	· : :

ISSUED: DECEMBER 6, 2021 (RAM)

Patricia Ruberti requests to be permitted to submit a late application for the Technical Assistant (PS3734K), Department of Human Services, examination.

By way of background, the announcement for the subject examination was issued on August 1, 2020 and was open to employees in the competitive division who had an aggregate of one year of continuous permanent service and possessed two years of experience in reviewing, verifying, authorizing and/or providing information and assistance of a technical or fiscal nature in a public or private organization as of the August 21, 2020 closing date. Applicants who did not possess the required experience could substitute semester hour credits from an accredited college or university on a year for year basis with 30 semester hour credits being equal to one year of experience. It is noted that agency records indicate that 10 applicants were found eligible for the subject examination, and as a result, an eligible list promulgated on June 24, 2021 and expires on June 23, 2024. It is noted that a certification (PS210669) was issued with 10 eligibles on June 25, 2021. In disposing of the certification, nine of the individuals on the certification were provisional in the subject title. Eight of the nine provisional employees were appointed, effective July 17, 2021, and the remaining provisional employee was removed from the eligible list due to failure to respond to the notice of certification. Moreover, one individual on the eligible list, who was not provisional in the subject title, was appointed on October 9, 2021.

On appeal to the Civil Service Commission (Commission), the appellant,¹ states that she was deemed an essential employee during the COVID-19 pandemic, and as a result of working long hours, she mistakenly applied for the Technical Assistant (PS3736K), Department of Human Services, examination, when she should have applied for the (PS3734K) subject examination.²

CONCLUSION

N.J.A.C. 4A:4-2.1(e) provides that unless otherwise provided for by the Chairperson of the Commission or designee, applications for promotional examinations shall be submitted to the Commission no later than 4:00 p.m. on the announced application filing date. N.J.A.C. 4A:1-1.2(c) provides that a rule may be relaxed for good cause in a particular circumstance in order to effectuate the purposes of Title 11A, New Jersey Statutes.

In the instant matter, the appellant did not submit an application by the August 21, 2020, closing date for the subject examination because she incorrectly filed for the wrong examination. Agency records indicate that the appellant continues to serve provisionally in the subject title, the eligible list has been exhausted, and the appellant has presented an explanation as to why she mistakenly selected the wrong examination. The Commission generally denies requests to accept late examination applications, as N.J.A.C. 4A:4-2.1(e) requires applicants to file their applications by the closing date. In that regard, in In the Matters of Supervising Family Service Specialist 2 (PS1035K), Supervising Family Service Specialist 2 (Bilingual in Spanish and English) (PS1036K), Supervising Family Service Specialist 1 (PS1032K), Supervising Family Service Specialist 1 (PS1015K), and Family Service Specialist 1 (PS2267K), Department of Children and Families, (CSC, decided October 19, 2016), the Commission determined that it would not permit applicants who file for an incorrect examination symbol to file a late application for the correct symbol given that there are numerous warnings provided to ensure the proper symbol is used when initially applying for the test. However, under the circumstances presented, the Commission finds that there is good cause to relax N.J.A.C. 4A:4-2.1(e) and allow the appellant to submit a late application for the subject examination.

The Commission emphasizes 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*

¹ Agency records indicate that the appellant has been serving as a Technical Assistant, pending promotional examination procedures, since September 28, 2019.

² The appellant was found to be ineligible for the (PS3736K) examination as she was not serving in the announced unit scope.

Communications Workers of America v. New Jersey Department of Personnel, 154 N.J. 121 (1998).

Finally, the Commission notes that the appellant's remedy is based on the particular circumstances of this matter, and for future examination announcements, she must timely file an application. As this remedy is limited to the unique circumstances of this matter, it does not provide a precedent in any other matter.

ORDER

Therefore, it is ordered that this request be granted, and the appellant be permitted to submit a promotional application for the Technical Assistant (PS3734K), Department of Human Services, examination. It is further ordered that the appellant submit a promotional application and the \$25.00 application processing fee to the Division of Agency Services within 15 days of the issuance date of this decision. Upon receipt of the application and processing fee, it is ordered that her application be processed for prospective appointment consideration. Finally, if the appellant's application and the required payment are not postmarked within 15 days of the issuance date of this decision, she will not be entitled to have an application for the subject examination processed.

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: Patricia Ruberti (with blank application attached) Lois Robinson 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 ;					
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1. Title of Promotion:	City: Shate: Zip Code:						
	E-mail address						
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	GROUND DATA						
5a. Education (Indicate the highest level Diploma or Degree you have High School Diploma or GED (A) Associate (S) Some College but No Degree (B) Bachelo	te's Degree	(M) Master's Degree (D) Doctorate					
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	Otherwise, complete a documents. Claim form	veterans preference claim form and include the required as are available on our web site at www state.oj us/ese and at ton Avenue, Trenton, NJ. Completed forms should be mailed to					
 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. 	the Department of Military and Veterans' Affairs (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 NOTE: Your application may be released to the Appointing Authority for the purpose of	,	gard 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 per w you attended? did you attend?			Did you complete the program?			
				Month M. TO I	/onth/Vr			□ y □ n	
				Month/Yr TO	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:							L	
What dates have you been employed in this position? How many staff members do you supervise?									
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							
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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?	e?						
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	