



STATE OF NEW JERSEY

In the Matter of Emily DeMaio,
Environmental Specialist 2
(PS7817G), Department of
Environmental Protection

**FINAL ADMINISTRATIVE ACTION
OF THE
CIVIL SERVICE COMMISSION**

CSC Docket Nos. 2022-1761

Examination Appeal

ISSUED: JULY 5, 2022 (RAM)

Emily DeMaio requests to be permitted to submit a late application for the Environmental Specialist 2 (PS7817G), Department of Environmental Protection (DEP), examination.

By way of background, the announcement for the subject examination was issued on January 1, 2022 and was open to employees in the competitive division who were currently serving in the title of Environmental Specialist 1 and possessed an aggregate of one year of continuous permanent service as of the January 21, 2022 closing date. It is noted that three candidates filed for the subject examination and are awaiting eligibility determinations. Thus, the examination has not yet been scheduled. The appellant did not file for the subject examination, but rather, she filed for the Environmental Specialist 2 (PS7593G), DEP, examination which was open to employees in unit scope G770 - Division of Air Quality, and had the same issuance and closing date as the Environmental Specialist 2 (PS7817G), DEP, examination which was open to the appellant's unit scope, G777 - Division of Energy, Security and Sustainability. The Division of Agency Services' review of the appellant's application found the appellant to be ineligible for the (PS7593G) examination, as she was not employed in the announced unit scope.

On appeal to the Civil Service Commission (Commission), the appellant asserts that she mistakenly applied for the Environmental Specialist 2 (PS7593G), DEP, examination when she should have applied for the Environmental Specialist 2 (PS7817G), DEP, examination. Thus, she is requesting to submit a late application

for the subject examination. Moreover, agency records indicate that the appellant has been serving as an Environmental Specialist 2, provisionally pending promotional examination procedures, since July 31, 2021.

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 January 21, 2022, closing date for the subject examination because she incorrectly filed for 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.

Nonetheless, the record indicates that the appellant continues to serve provisionally in the subject title, and that she timely filed an application for the subject title albeit to the wrong unit scope. Allowing the appellant to submit an application for the subject examination after the closing date minimally increases the candidate pool. Further, as noted previously, the current examination for the subject title has not yet been scheduled. Therefore, based on all of the foregoing, 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 after the closing date. In this regard, the purpose of the Civil Service system is 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).

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 appeal be granted, and that Emily DeMaio be permitted to submit a promotional application for the Environmental Specialist 2 (PS7817G), DEP, 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 her 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 is 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 29TH DAY OF JUNE 2022

Deirdre' L. Webster Cobb

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: Emily DeMaio (with blank application enclosed)
Phiroza Stoneback
Division of Agency Services
Records Center

APPLICATION FOR PROMOTIONAL EXAMINATION

NEW JERSEY CIVIL SERVICE COMMISSION — STATE SERVICE

\$ 25.00 FEE REQUIRED
Make Check/Money Order Payable to NJCSC
FOR COMMISSION USE ONLY

INSTRUCTIONS: Please print or type. Answer all pertinent questions and ensure that all information is accurate and complete. Sign your name in Block 12. **NOTE:** No additional information may be accepted after the last date for filing applications has passed. **If you change your address, you must notify the Civil Service Commission immediately in writing.**
Return your completed application to your Personnel Office no later than the last date for filing listed on the announcement.

| FOR COMMISSION USE ONLY | | |
|--|-------------------------------------|---------------------------------|
| STATUS: <input type="text"/> | PAR: <input type="text"/> | |
| SEN: <input type="text"/> | UE: <input type="text"/> | REV NO REV |

| | |
|---|--------------------|
| 2. Social Security Number: * (see block 11 for additional information) | 3. Symbol : |
| 4. Name & Address: Last: _____ First: _____ M.I. _____ Street: _____ City: _____ State: _____ Zip Code: _____ E-mail address: _____ County: _____ Daytime Telephone: _____ (Area Code) - Number | |

1. Title of Promotion:

Note: Applications must be postmarked by

5. BACKGROUND DATA

5a. Education (Indicate the highest level Diploma or Degree you have earned):

| | | |
|---|---|--|
| <input type="checkbox"/> High School Diploma or GED | <input type="checkbox"/> (A) Associate's Degree | <input type="checkbox"/> (M) Master's Degree |
| <input type="checkbox"/> (S) Some College but No Degree | <input type="checkbox"/> (B) Bachelor's Degree | <input type="checkbox"/> (D) Doctorate |

5b. Completion of this part is VOLUNTARY and is to be used only for complying with EEOC Guidelines and the New Jersey State Affirmative Action Program.

Gender: (1) Male (2) Female

Check the group you are a member of:

(1) Black (2) White (3) Hispanic (4) Asian (5) American Indian or Alaskan Native

6. Check the county in which you prefer to take the examination.
 (Check one box only)

| | | |
|---------------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> (1) Camden | <input type="checkbox"/> (2) Mercer | <input type="checkbox"/> (3) Essex |
| <input type="checkbox"/> (4) Monmouth | <input type="checkbox"/> (6) Atlantic | <input type="checkbox"/> (7) Bergen |

7. Are you claiming veterans preference? YES NO

Check **YES** if you are claiming veterans preference for this examination. If you have established veterans preference since April 1, 1980, no further action is needed. Otherwise, complete a veterans preference claim form and include the required documents. Claim forms are available on our web site at www.state.nj.us/csc and at our office at 44 S. Clinton Avenue, Trenton, NJ. Completed forms should be mailed to 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.

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.

9. Check the county(s) in which you will accept employment. Please note: Not all promotional lists can be used in all geographic locations. If you have any questions regarding this, contact your Personnel Office.

| | | | | | | |
|---|---|--|--|---------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> (A) Atlantic | <input type="checkbox"/> (C) Burlington | <input type="checkbox"/> (B) Bergen | <input type="checkbox"/> (D) Camden | <input type="checkbox"/> (E) Cape May | <input type="checkbox"/> (F) Cumberland | <input type="checkbox"/> (G) Essex |
| <input type="checkbox"/> (H) Gloucester | <input type="checkbox"/> (J) Hudson | <input type="checkbox"/> (K) Hunterdon | <input type="checkbox"/> (M) Middlesex | <input type="checkbox"/> (N) Monmouth | <input type="checkbox"/> (L) Mercer | <input type="checkbox"/> (P) Morris |
| <input type="checkbox"/> (Q) Ocean | <input type="checkbox"/> (R) Passaic | <input type="checkbox"/> (S) Salem | <input type="checkbox"/> (T) Somerset | <input type="checkbox"/> (U) Sussex | <input type="checkbox"/> (V) Union | <input type="checkbox"/> (W) Warren |

10. Present Permanent Title & Appointment Date:

Name & Title of Immediate Supervisor:

Telephone Number & Email Address of Immediate Supervisor:

*** 11. Your Social Security number will be kept confidential and used as your applicant I.D. number to identify and track all of your records and transactions associated with the application and testing process. Collecting this data is permissible under NJSA 11A:4-1, but its submission is voluntary. If you do not provide the number, a unique number will be assigned to you. However, once assigned, you will be responsible for remembering it for any inquiries you may have concerning your application or testing process.**

12. Signature: I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I understand that if my application is incomplete, it may be rejected. (WARNING: The Civil Service Commission may refuse to examine, or certify after examination, any applicant who makes a false statement of any material fact per NJAC 4A:4-6.2)

FOR CSC ONLY

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 earn? | Did you graduate? | If NO, when will you graduate? | Number of credits earned |
|---|---------------------------|--------------------------------------|-----------------------------------|---|--------------------------------|--------------------------|
| | From: _____ To: _____ | | | <input type="checkbox"/> Y <input type="checkbox"/> N | _____ Month / Year | |
| | From: _____ To: _____ | | | <input type="checkbox"/> Y <input type="checkbox"/> N | _____ Month / Year | |

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 you attended? | How many hours per week did you attend? | Did you complete the program? |
|---|----------------------------|--|---|---|
| | | _____ Month/Yr. TO _____ Month/Yr. | | <input type="checkbox"/> Y <input type="checkbox"/> N |
| | | _____ Month/Yr. TO _____ Month/Yr. | | <input type="checkbox"/> Y <input type="checkbox"/> N |

15. Use this space to describe any internships, licenses, certifications or registrations that you possess which are related to the position for which you are applying.

| | |
|---|--|
| <p>A. What type of license(s), certification(s), and/or registration(s) do you hold?</p> <p>In which state(s) do you hold the license(s), certification(s), and/or registration(s)? _____</p> <p>B. What was the original issue date of the license(s), certification(s), and/or registration(s)?</p> <p>What is the date of your current license(s), certification(s), and/or registration(s)? _____</p> | <p>C. What type of internship(s) have you completed?</p> <p>Where was the internship(s) completed? _____</p> <p>What were the dates of the internship(s)? _____</p> <p>How many hours per week did you take part in the internship? _____</p> <p>Was it part of a college curriculum? <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>D. Certified Public Manager's Program</p> <p>Level 1 - 3 Completed ▶ _____ Month/Year</p> <p>Level 4 - 6 Completed ▶ _____ Month/Year</p> |
|---|--|

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.

| | | |
|---|--|---|
| <p>A What is the name and address of your current employer?</p> <p>What dates have you been employed in this position? From _____ To _____ Month/Year Month/Year</p> | <p>What is your title in this position?</p> <p>Is this position: <input type="checkbox"/> FULL TIME? <input type="checkbox"/> PART TIME? (Average No. hrs. per wk.) _____</p> <p>How many staff members do you supervise? Professional Staff _____ Support Staff _____</p> | <p>List the major duties you perform in this position in order of importance.</p> |
| <p>B What was the name and address of your previous employer?</p> <p>What dates were you employed in this position? From _____ To _____ Month/Year Month/Year</p> | <p>What was your title in this position?</p> <p>Was this position: <input type="checkbox"/> FULL TIME? <input type="checkbox"/> PART TIME? (Average No. hrs. per wk.) _____</p> <p>How many staff members did you supervise? Professional Staff _____ Support Staff _____</p> | <p>List the major duties you perform in this position in order of importance.</p> |
| <p>C What was the name and address of your previous employer?</p> <p>What dates were you employed in this position? From _____ To _____ Month/Year Month/Year</p> | <p>What was your title in this position?</p> <p>Was this position: <input type="checkbox"/> FULL TIME? <input type="checkbox"/> PART TIME? (Average No. hrs. per wk.) _____</p> <p>How many staff members did you supervise? Professional Staff _____ Support Staff _____</p> | <p>List the major duties you perform in this position in order of importance.</p> |