



**STATE OF NEW JERSEY**

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

In the Matter of George Hesse,  
Deputy Fire Chief (PM5172C), West  
Orange

Examination Appeal

CSC Docket No. 2022-1732

**ISSUED: FEBRUARY 18, 2022 (RE)**

George Hesse appeals the denial of his request to file a late application for the Deputy Fire Chief (PM5172C) West Orange promotional examination.

The subject examination was announced on December 1, 2021, with an application deadline date of December 21, 2021, and a closing date of February 28, 2022. Only on-line applications were accepted, and the appellant did not submit one. Nine candidates were admitted to the examination which has not been administered.

By way of background, at the end of December 2021, the appellant sent an email to the Division of Agency Services (Agency Services), stating that "I have been out for a surgery since November 8<sup>th</sup> and was not notified that my employer filed for the test on December 1, 2021 and it has since been closed/removed." Agency Services responded by requesting documentation of an approved medical leave, which the appellant sent. Agency Services denied the request, stating that all members received an email sent by Power DMS<sup>1</sup> that required a signature to acknowledge receipt, and that the appellant did not view or sign the notification. Agency Services stated that it understands that employees have access to their Power DMS accounts at home.

<sup>1</sup> A cloud-based compliance management platform used in public safety agencies to communicate with and train employees, and which has electronic signature capture and tracking.

On appeal, the appellant argues that he found out about the announcement on Christmas 2021, four days after the closing date, and was told by his Deputy Fire Chief that the announcement was sent by Power DMS with no other means of communication. He indicates that he did not have access to that account from his personal device. He argues that there is no policy that requires employees to access their mail, Power DMS, or other work sites while off-duty or sick. He provides a memorandum from the Deputy Fire Chief to Agency Services which indicates that the appellant was out on a scheduled sick leave for medical purposes during the announcement time frame and did not receive the information regarding the examination from Power DMS while he was off-duty and recovering at home. The Deputy Fire Chief also supplied an Employee Scheduled Absence Report for the appellant which indicated that he was out of work for 12 weeks from before the announcement date to January 31, 2022, due to a surgery.

### CONCLUSION

*N.J.A.C.* 4A:4-2.1(e) provides, in pertinent part, that applications for open competitive and promotional examinations should be filed no later than the announced filing date for filing applications. *N.J.A.C.* 4A:1-1.2(c) provides that the Civil Service Commission (Commission) may relax a rule for good cause to effectuate the purpose of Title 11A, New Jersey Statutes.

The appellant was not admitted to the subject examination since he did not file an application by 4:00 p.m. on the December 21, 2021, application deadline date. However, the appellant was not at work during the 21 day filing period, and claims he does not have access to Power DMS on his personal device. The Deputy Fire Chief confirmed that the appellant did not access that account during the filing period, and that he was out on scheduled leave. 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. 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. Finally, as this remedy is limited to the unique circumstances of this matter, it does not provide a precedent in any other matter.

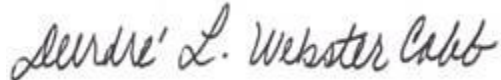
### ORDER

Therefore, it is ordered that this appeal be granted, and the appellant be permitted to submit an application for the Deputy Fire Chief (PM5172C) West Orange promotional examination. It is further ordered that appellant submit the promotional application and the \$100.00 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 his application be processed. Finally, if the

appellant's application and the required payment are not postmarked on or before the 15<sup>th</sup> day after the issuance date of this decision, he 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 16<sup>TH</sup> DAY OF FEBRUARY, 2022



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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: George Hesse (with blank application enclosure)  
Robert D. Parisi  
Division of Test Development and Analytics  
Division of Agency Services  
Records Center

# APPLICATION FOR PROMOTIONAL EXAMINATION

NEW JERSEY CIVIL SERVICE COMMISSION —County and Municipal Government

**\$ 100.00 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 11. **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 no later than the last date for filing listed on the announcement to: NJ CSC, 44 S. Clinton Ave. PO Box 322, Trenton, N.J. 08625-0322**

FOR COMMISSION USE ONLY		
STATUS: <input type="checkbox"/>		
SEN: <input type="checkbox"/>	UE: <input type="checkbox"/>	REV <b>NO REV</b>

2. Social Security Number:  * (see block 10 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):  
 High School Diploma or GED     (A) Associate's Degree     (M) Master's Degree  
 (S) Some College but No Degree     (B) Bachelor's Degree     (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)  
 (1) Camden     (2) Mercer     (3) Essex  
 (4) Monmouth     (6) Atlantic     (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](http://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. For more information, visit their web site at [www.state.nj.us/military](http://www.state.nj.us/military) or contact them at 1-888-865-8387.

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. Present Permanent Title & Appointment Date:

\_\_\_\_\_  
**Name & Title of Immediate Supervisor:**

\_\_\_\_\_  
**Telephone Number & Email Address of Immediate Supervisor:**

\* 10. 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.

11. 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)

**FORCSCONLY**

NOTE: Your application may be released to the Appointing Authority for the purpose of verifying information with regard to your qualifications.

Signature..... Date.....

**Title of Promotion:** \_\_\_\_\_ **Symbol:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**12. 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	

**13. 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

**14. 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><b>A. What type of license(s), certification(s), and/or registration(s) do you hold?</b></p> <p>In which state(s) do you hold the license(s), certification(s), and/or registration(s)? _____</p> <p><b>B. What was the original issue date of the license(s), certification(s), and/or registration(s)?</b></p> <p>What is the date of your current license(s), certification(s), and/or registration(s)? _____</p>	<p><b>C. What type of internship(s) have you completed?</b></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><b>D. Certified Public Manager's Program</b></p> <p>Level 1 - 3 Completed ▶ _____ Month/Year</p> <p>Level 4 - 6 Completed ▶ _____ Month/Year</p>
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**15. 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><b>A What is the name and address of your current employer?</b></p> <p>What dates have you been employed in this position? From _____ To _____ Month/Year Month/Year</p>	<p><b>What is your title in this position?</b></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>B What was the name and address of your previous employer?</b></p> <p>What dates were you employed in this position? From _____ To _____ Month/Year Month/Year</p>	<p><b>What was your title in this position?</b></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><b>C What was the name and address of your previous employer?</b></p> <p>What dates were you employed in this position? From _____ To _____ Month/Year Month/Year</p>	<p><b>What was your title in this position?</b></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>