

# STATE OF NEW JERSEY

FINAL ADMINISTRATIVE ACTION OF THE

CIVIL SERVICE COMMISSION

In the Matter of Kymea Harden Senior Cottage Training Technician (PS7333K), Woodbine Developmental Center

Examination Appeal

CSC Docket No. 2022-2114

:

**ISSUED:** May 2, 2022 (SLD)

Kymea Harden requests to file a late application for the promotional examination for Senior Cottage Training Technician (PS7333K), Woodbine Developmental Center.

Agency records indicate that the appellant was appointed to the title of Cottage Training Technician, effective August 17, 2019. The examination for Senior Cottage Training Technician (PS7333K), Woodbine Developmental Center was announced with a closing date of December 21, 2021, and was open to employees who were currently serving in and possessed one year of continuous permanent service in the title of Cottage Training Technician. It is noted that 69 eligibles applied for the subject examination, however, the eligible list has not yet promulgated.

On appeal to the Civil Service Commission (Commission), the appellant asserts that she was on medical leave at the time the examination was announced and she did not receive any notice. In support, she submits documentation which indicates that she was on leave from October 17, 2021, through the closing date of the subject examination.

In response, the appointing authority indicates that although it did mail the announcement to the appellant's home address, it supports the appellant's request to file a late application.

#### CONCLUSION

*N.J.A.C.* 4A:4-2.1(e) provides, in pertinent part, that unless otherwise provided for by this agency, applications for promotional examinations shall be submitted no later than 4:00 P.M. on the announced application filing date. *N.J.A.C.* 4A:1-1.2(c) provides that the Civil Service Commission (Commission) may relax a rule for good cause, in a particular circumstance, in order to effectuate the purposes of Title 11A of the New Jersey Statutes Annotated.

In this matter, the appellant did not submit an application by the closing date for the subject examination. However, in this specific instance, the Commission finds that there is good cause to allow the appellant to submit a late application for the subject examination. Specifically, the record reflects that the appellant had been on a leave of absence during the announcement period. Moreover, the appointing authority supports the appellant's request and the resulting eligible list has not yet promulgated. 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 Communications Workers of America v. New Jersey Department of Personnel, 154 N.J. 121 (1998). Finally, the Commission notes that this remedy is based on the particular circumstances of this matter.

### **ORDER**

Therefore, it is ordered that Kymea Harden be permitted to file an application for Senior Cottage Training Technician (PS7333K), Woodbine Developmental Center. It is further ordered that the appellant submit the attached 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 applications be processed. Finally, if the appellant's application and the required payment are not postmarked on or before the 15th day after the issuance date of this decision, that appellant 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  $27^{\text{TH}}$  DAY OF APRIL 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

## Attachment

c: Kymea Harden Angela Santandrea Division of Agency Services Records Center

# Staple Payment Here 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 that

filing listed on the announcement.	iater than the ia	st date for							
FOR COMMISSION USE ONLY	2. Social Secu	ity Number:	3. Symbo	l:					
STATUS: PAR:	* (see block 11 for a	dditional information)							
	4. Name & Add		<u> </u>						
SEN: UE: REV	Last: First: M.I.								
0 NO REV	Street:	Street							
	Cin		g						
1. Title of Promotion:	City:		State:Zi,	o Code: 					
	E-mail address:								
	County:	Daytime ty: Telephone:							
Note: Applications must be postmarked by			(Are	a Code) - Number					
	KGROUND D	AIA							
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									
(N) Nasier's Degree (M) Master's Degree (M) Master's Degree									
5b. Completion of this part is <i>VOLUNTARY</i> and is to be used only for comply	ring with EEOC Guid	elines and the New Jersey Sta	ite Affirmative Action Pr	ogram.					
Gender:   I(1) Male   I(2) Female	you are a membe		Ameri	can Indian					
(1) Male (2) Perhale (1) Black (2) White (3) Hispanic (4) Asian (5) 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) Bergen (2) Mercer (4) Monmouth (6) Atlantic (7) Bergen (7) Bergen (8) Assistance (8) Check the box if you would like to the Department of Military and Veterans' Affairs (DMAVA). For more info									
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.	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 <b>application fee of \$15.00</b> 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.								
<b>9.</b> Check the county(s) in which you will accept employment. Please have any questions regarding this, contact your Personnel Office.	note: Not all pron	notional lists can be used in	n all geographic loca	tions. If you					
(A) Atlantic (C) Burlington (B) Bergen	☐ (D) Camde	n	☐ (F) Cumberlan	d 🛘 (G) Essex					
☐ (H) Gloucester ☐ (J) Hudson ☐ (K) Hunterdo	n 🔲 (M) Middle	sex	☐ (L) Mercer	☐ (P) Morris					
ALL ☐ (Q) Ocean ☐ (R) Passaic ☐ (S) Salem	☐ (T) Somers	et 🔲 (U) Sussex	☐ (V) Union	☐ (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,							
12. Signature: I CERTIFY that the statements made by me in this application are tri	you will be responsible for remembering it for any inquiries you may have concerning your application or testing process.								
in good faith. I understand that if my application is incomplete, it may be rejected. (Vexamination, any applicant who makes a false statement of any material fact per NJ	/ARNING: The Civil S								
NOTE: Your application may be released to the Appointing Authority for the purpose of verifying information with regard to your qualifications.									

DPF-1A \$25 (Page 1 of 2 REVISED 07-01-10) IMPORTANT - please complete page 2 of this application and keep a copy for your records.

Title of Promotion:		Symbol: SS#:							
13. Educational Section - College And Graduate announcement, be sure to attach a copy of be evaluated by a recognized evaluation s	f your trans								
What is the name and location of the college(s) you attended?	What yrs. did you attend?	What was your major course of study?		nt type of degree you earn?	Did you graduate	∍?	If NO, when will you graduate?	Number of credits earned	
	From: To:				□ Y [	$\square$ N	Month / Year		
	From: To:				□ Y [	$\square$ N	Month / Year		
14. Other Schools or Training Courses - Include related to the title for which you are applying								ses that are	
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 M	Month/Yr.			$\square$ Y $\square$ N	
				Month/Yr. TO	Month/Vr			$\square$ Y $\square$ N	
15. Use this space to describe any internships,	licenses certi	ifications or registrations that you posses	ss wh			on for	which you are annly	vina .	
			33 WII				(s) have you com	-	
A. What type of license(s), certification(	s), and/or re	egistration(s) do you hold?					. ,	ipicica:	
			Where was the internship(s) completed?  What were the dates of the internship(s)?						
In which state(s) do you hold the license(s), certification(s), and/or registration(s)?				How many hours per week did you take part in the internship?					
B. What was the original issue date of the license(s), certification(s), and/or registration(s)?					Was it part of a college curriculum? Y N				
D. Certified Public Manager's Program  Level 1 - 3 Completed									
What is the date of your current license(s), certification(s), and/or registration(s)?				Level 4 - 6 Completed Month/Year					
				20701	o oompi	otou	Month	/Year	
<b>16. Employment Record -</b> If you do not proheld different positions with the same employed part time, and the number of hours worked per application properly may cause you to be declared.	er, list each po week. Since	osition separately. Make sure you give fe your application may be your only "tes	full da t pap	ates of employr er," be sure it is	nent (month s complete a	h/year) and acc	, indicate whether to curate. Failure to c	he job was full or omplete your	
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.						
		his position: FULL TIME?							
		PART TIME? (Average No. hrs. per wk.)							
What dates have you been employed in this p	OSILIOIT!	w many staff members do you supervise?							
From To	_								
Month/Year Month/Year  What was the name and address of previous employer?		Support Staff  T					in		
	Wa	s this position: FULL TIME?							
		PART TIME?							
What dates were you employed in this position	a How	(Average No. hrs. per wk.)  many staff members did you supervise?							
What dates were you employed in this position From To		fessional Staff							
Month/Year Month/Year	Sup	port Staff							
<b>C</b> What was the name and address of previous employer?		What was your title in this position?		the major du er of importar		erform	n in this position	in	
	Wa	s this position: FULL TIME?							
		PART TIME?							
What dates were you employed in this and its	2	(Average No. hrs. per wk.)							
What dates were you employed in this position From To		fessional Staff							
Month/Year Month/Year	-	port Staff							