



# THE NEW JERSEY

State

As A

Model

Employer of Individuals  
with Disabilities



## PROGRAM



# WHAT IS THE SAME PROGRAM?

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- P.L. 2021, Chapter 465 and P.L. 2021, Chapter 466 require the Division of EEO/AA to develop and implement a State as a Model Employer of People with Disabilities (SAME) program (effective May 1, 2022)
- Goal is to increase the representation of persons with self-identified disabilities in the State workforce.
- The EEO/AA officer of each State agency shall oversee the SAME program for that State agency

# SAME PROGRAM



# SAME PROGRAM FAST TRACKING

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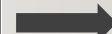
This program uses a fast-tracking process to ensure that people who are eligible for the program are offered an opportunity to participate in interviews when applying for non-competitive and unclassified permanent and temporary positions with NJ state government.

# FAST TRACKING PROCESS OVERVIEW

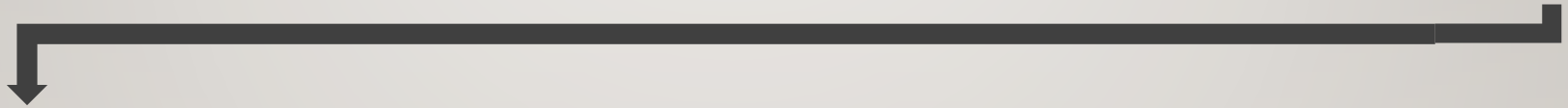
Applicant reviews criteria to determine eligibility for the program



Applicant obtains proof of disability documentation (i.e. Schedule A Letter, Schedule B State Agency or Medical Provider Letter; SSA Letter; or Veteran Affairs Service Connected Letter)



Applicant applies for state agency job and includes approved documentation



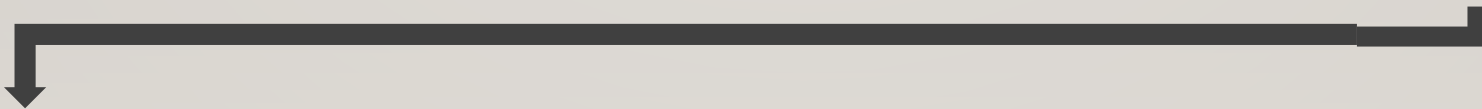
State Agency HR Offices receive applications and notes those who applied who have SAME Program disability documentation



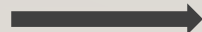
State Agency HR Offices contact hiring managers to note applicant SAME Program status and determine if ADA accommodations are needed for the interview



State Agency Hiring Managers offer interviews to SAME applicant and provides SAME Program follow up information to designated HR EEO/AA Officers



HR submits data (e.g. number of SAME Program applicants, interviews, and hires) to CSC quarterly



CSC provides statewide data and reports bi-annually (e.g. front office)



# PROGRAM ELIGIBILITY

**TO APPLY FOR STATE EMPLOYMENT UNDER THE SAME PROGRAM FAST TRACK PROCESS YOU MUST MEET ONE OF THE FOLLOWING CRITERIA LISTED BELOW**



**Eligible for Federal Schedule  
A program under the US  
Office of Personnel  
Management**



**Eligible for services by a NJ  
State Agency Serving People  
with Disabilities**



**Eligible for services and  
supports by a NJ state child  
study team at a NJ high school  
or by an office rendering  
disability services at a NJ public  
college or university**



**Have a significant disability  
that is or can be affirmed by  
a NJ licensed medical  
provider**



**Eligible for benefits by Social  
Security Administration**



**Eligible for services for  
disabled veterans  
administered by the US  
Department of Veteran  
Affairs**

# **ACCEPTED DOCUMENTS OF ELIGIBILITY**

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## **Schedule A Federal Hiring Letter**

Who Can Sign Off on this type of Proof of Eligibility?

Federal and state vocational  
rehabilitation counselors and medical  
providers.



# SCHEDULE A LETTER TEMPLATE

## *Sample Schedule A Letter for Licensed Medical Practitioners*

*The letter must be printed on "medical professional's" letterhead and must include a signature or it is invalid.*

Date

To Whom It May Concern:

This letter serves as certification that (name of patient/applicant) is an individual with an intellectual disability, severe physical disability or psychiatric disability, and can be considered for employment under the Schedule A hiring authority 5 CFR 213.3102(u). Thank you for your interest in considering this individual for employment. You may contact me at (phone number).

Sincerely,

(Medical professional's signature)

(Medical professional's title)

## *Sample Schedule A Letter for Vocational Rehabilitation Professionals*

*State*

Name of Counselor, M.S.,  
Position Title

*Department of Rehabilitative Services*  
Street Address – Suite Number  
City, State Zip Code  
website

Main Line: xxx-xxx-xxxx  
TTY: xxx-xxx-xxx  
Fax: xxx-xxx-xxxx  
Email:

Direct Line: xxx-xxx-xxxx

Date

To Whom It May Concern:

This letter serves as certification that (name) is an individual with a documented disability, identified by the (vocational rehabilitation services agency name) policy and can be considered for employment under the Schedule A hiring authority 5 CFR 213.3102 (u) for people with intellectual disabilities, severe physical disabilities or psychiatric disabilities. Thank you for your interest in considering this individual for employment. You may contact me at (contact information).

Sincerely,

(Vocational rehabilitation professional's signature)





# ACCEPTED DOCUMENTS OF ELIGIBILITY

## Schedule B NJ Letter for Designated NJ State Agencies, Schools, and Colleges

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Who Can Sign Off on this type of Proof of Eligibility?

A designated representative from a:

- Child study team affiliated with a NJ high school; or
- Office of Disability Services at a public college or university
- Designated state agency. These include New Jersey:
  - Division of Vocational Rehabilitation Services (DVRS); or
  - Division of Developmental Disabilities (DDD); or
  - Commission for the Blind and Visually Impaired (CBVI); or
  - Division of Disability Services (DDS); or
  - Division of the Deaf and Hard of Hearing (DDHH); or
  - Division of Mental Health and Addiction Services (DMHAS)

# **ACCEPTED DOCUMENTS OF ELIGIBILITY**

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## **Schedule B NJ Letter for Licensed Medical Providers**

Who Can Sign Off on this type of Proof of Eligibility?

NJ Licensed Medical Providers

# SCHEDULE B LETTER TEMPLATES

NJ State as a Model Employer Program  
Schedule B- NJ Letter  
NJ State Agency Attestation of Eligibility

Letterhead of the Designated Agency

Date \_\_\_\_\_

NJ Civil Service Commission  
44 South Clinton Avenue  
Trenton, NJ 08609

To Whom It May Concern:

This letter serves as certification that \_\_\_\_\_  
First Name Last Name  
is an individual with a documented disability confirmed by the  
\_\_\_\_\_  
Name of NJ designated state agency

and can be considered for employment opportunities under the Schedule B-NJ fast track hiring authority N.J.S.A. 11A:7-13, et seq. for people with intellectual disabilities, severe physical disabilities, or psychiatric disabilities.

If you have any questions, please contact me at \_\_\_\_\_ and/or by  
Phone number

E-mail \_\_\_\_\_

Sincerely,

\_\_\_\_\_  
Designated Agency Professional's Signature

\_\_\_\_\_  
Designated Agency Professional's Printed Name

\_\_\_\_\_  
Designated Agency Professional's Title and Affiliated Organization

Note: (Designated Agency Professional's signature and completion of each field above are required)

NJ State as a Model Employer Program  
Schedule B Letter  
NJ Licensed Medical Provider Attestation of Eligibility

Letterhead of the NJ Licensed Medical Provider

Date \_\_\_\_\_

NJ Civil Service Commission  
44 South Clinton Avenue  
Trenton, NJ 08609

To Whom It May Concern:

By signing this form, I attest that \_\_\_\_\_ is an individual with an  
First Name Last Name  
intellectual disability, severe physical disability, or psychiatric disability, and, based on this eligibility can be considered for employment opportunities under the Schedule B-NJ fast track hiring authority N.J.S.A. 11A:7-13, et seq. for people with intellectual disabilities, severe physical disabilities, or psychiatric disabilities.

If you have any questions, please contact me at \_\_\_\_\_ and/or by  
Telephone #

\_\_\_\_\_  
E-mail

Sincerely,

\_\_\_\_\_  
Medical Professional Signature

\_\_\_\_\_  
Medical Professional's Printed Name

\_\_\_\_\_  
Medical Professional Title and Affiliated Organization

\_\_\_\_\_  
NJ Medical License Number  
Note: (Medical Professional's signature and completion of each field above are required)

# ACCEPTED DOCUMENTS OF ELIGIBILITY

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## **SSA ELIGIBILITY LETTER**

Who Can Sign Off on this type of Proof of Eligibility?

The United States Social Security Administration provides this letter as a part of the process for applying for benefits

The applicant does not need to seek additional approval but must submit a copy of the SSA eligibility letter.



## **DEPARTMENT OF VETERAN AFFAIRS CONNECTED APPROVED ELIGIBILITY LETTER**

Who Can Sign off on this type of Proof of Eligibility?

The United States Department of Veteran Affairs provides this letter as a part of the process for applying for benefits.

The applicant does not need to seek additional approval but must submit a copy of the Veteran Affairs Connect Approval eligibility letter.

# APPLYING TO SAME PROGRAM ELIGIBLE STATE JOBS

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- The SAME Program fast tracking process can be used to apply to non-competitive and unclassified job postings. Visit the Civil Service Commission (CSC) website to find eligible job openings and application instructions.
- Applicants still need to apply for the job using the direction provided on the job announcement.
- Applying for eligible state jobs using the SAME Program fast track process, requires one additional step for the applicants **When applicants submit a resume, they must include the signed copy of their approved SAME Program eligibility documentation.**





# YOUR ROLE

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- Be aware of SAME
- Guide people to SAME
- Sign letters for SAME eligibility
  - Refer to medical provider, SS, VA for signatures if not yet part of services with your agency
- Identify & report any challenges