RJA

MANAGEMENT SERVICES, INC.

Supplemental Questionnaire

Supplemental Questionnaire Instructions

For your convenience the Supplemental Questionnaire can be completed online but must be **hand signed** and **mailed directly** to RJA Management Services, Inc. to complete your application package.

An application package consists of two (2) copies of your resume with a signed cover letter outlining your qualifications, an RJA supplemental questionnaire, and a list of five (5) professional references.

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Management Services, Inc.

Supplemental Questionnaire

ALL MATERIALS MUST BE RECEIVED NO LATER THAN BY DATE ON OUR WEBSITE FOR CONSIDERATION.

TO APPLY: *Submit a complete application package consisting of this completed questionnaire, 2 copies of a current resume with cover letter, and a list of 5 professional references. Please notify RJA at (626) 447-3318 if you are unable to meet the deadline.*
SEND TO: *Dr. Richard Garcia, President, RJA Management Services, Inc., 550 W. Duarte Rd., Ste. 6, Arcadia, CA 91007.*

Position Applying For: MONTEREY COUNTY **EQUAL OPPORTUNITY OFFICER**

Name	Current Title
Home Address	Home Phone ( ) Business Phone ( ) Email
Degree(s) and Related Certificates / Dates Received	Have you ever been convicted of a felony or misdemeanor? (Pursuant to Ordinance 5356, the Criminal Records Ordinance. Convictions are not an automatic disqualification to employment.) If yes, please explain. ___Yes ___ No
Are you bilingual? ___Yes ___ No If yes, what language(s)?	Do you have any objections to RJA conducting background checks? If yes, please explain. ___Yes ___ No

RJA would like for you to honestly evaluate your experience in/with the following job related activities.

Key: E = Extensive Experience; L = Limited Experience; C = Considerable Experience; N = No Experience

General Management	___	Position Classification	___	Contract Administration	___
Human Resources Management	___	Affirmative Action Programs/Plans	___	Negotiations	___
Budgeting	___	Personnel Policies & Procedures	___	Consensus Building	___
Information Technology	___	EOO Laws & Regulations	___	Dispute Resolution	___
Goal Setting	___	EOO Guidelines	___	Community Relations	___
Statistical Analysis	___	Workforce Diversity	___	Intergovernmental Relations	___
Performance Appraisal	___	Investigatory Procedures	___	Media Relations	___
Org. Development/Training	___	Employment Counseling	___	Written Communication	___
Team Building	___	Employee Relations	___	Oral Communication	___
Recruitment/Selection	___	Program Monitoring	___	Other _____	___

*Please answer the following essay question. Be Concise. Use additional paper, but **no more** than one page.*

What can RJA say to the Board of Supervisors about you that would convince them that you should be invited to Monterey County for an interview?

In accordance with State Law, the information requested below shall be used for statistical purposes only. This information will be kept confidential and separate from the application form. Refusing to provide this information will have no impact on the evaluation process. Thank you for your assistance.

How did you hear about this position?

___ RJA Letter ___ I.P.M.A. Newsletter
___ RJA Call ___ Western City
___ Jobs Available ___ Monterey County Herald
___ J.O.B. ___ Other _____

Race/Ethnic Group

___ African American ___ Hispanic
___ Asian ___ Filipino
___ American Indian ___ Other _____
___ Caucasian

Sex

___ Female ___ Male

Do you need reasonable accommodations to perform this function?

___ Yes ___ No

EMPLOYMENT HISTORY:
Please note that your resume should reflect entire employment history.

Dates of Employment to	Job Title	Largest annual budget administered
Annual Salary $	Organization:	
	Address:	
Reason for Leaving	Supervisor's Job Title	Total population served by organization
	Total number of your staff: Direct Supv. _____ Indirect Supv. _____	Total number of employees in: Organization _____ Department _____
Dates of Employment to	Job Title	Largest annual budget administered
Annual Salary $	Organization:	
	Address:	
Reason for Leaving	Supervisor's Job Title	Total population served by organization
	Total number of your staff: Direct Supv. _____ Indirect Supv. _____	Total number of employees in: Organization _____ Department _____
Dates of Employment to	Job Title	Largest annual budget administered
Annual Salary $	Organization:	
	Address:	
Reason for Leaving	Supervisor's Job Title	Total population served by organization
	Total number of your staff: Direct Supv. _____ Indirect Supv. _____	Total number of employees in: Organization _____ Department _____
Dates of Employment to	Job Title	Largest annual budget administered
Annual Salary $	Organization:	
	Address:	
Reason for Leaving	Supervisor's Job Title	Total population served by organization
	Total number of your staff: Direct Supv. _____ Indirect Supv. _____	Total number of employees in: Organization _____ Department _____

I certify that the information on this supplemental questionnaire is true to the best of my knowledge and belief.

*DATE*_____*APPLICANT'S SIGNATURE*_____