



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.



Management Services, Inc.
Supplemental Questionnaire

ALL MATERIALS MUST BE RECEIVED BY
THE DATE ON OUR WEBSITE
www.rjamanagement.com
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 call 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: **CITY OF PASADENA - PLANNING MANAGER (CITY PLANNER)**

First Name	MI	Last Name	Current Title
Home Address			Business Phone ()
			Home Phone ()
			Cell Phone ()
Degree(s) and Related Certificates			Email
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 on an additional sheet of paper.
Are you bilingual? ____ Yes ____ No			____ Yes ____ No
If yes, what language(s)?			Do you have any objections to RJA conducting background checks? If yes, please explain on an additional sheet of paper.
			____ Yes ____ No

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

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

General Management	_____	Housing Preservation	_____	Contract Negotiations	_____
Strategic Planning	_____	Urban Planning	_____	Consensus Building	_____
Employee Relations	_____	Zoning	_____	Staff Development	_____
Project Management	_____	Intergovernmental Relations	_____	Environmental Impact Reports	_____
Community Development	_____	Council Relations	_____	New Urbanism	_____
Redevelopment	_____	Community Relations	_____	Smart Growth	_____
Real Estate	_____	Budgeting	_____	Public Presentations	_____
Housing Development	_____	Development Financing	_____	General Plan Management	_____
Neighborhood Revitalization	_____	Dispute Resolution	_____	Historic Designations	_____

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?	Race/Ethnic Group	Sex
____ RJA Letter	____ African American	____ Female
____ RJA Call	____ Hispanic	____ Male
____ Western City	____ Asian	Can you perform this function with reasonable accommodations? ____ Yes ____ No
____ Jobs Available	____ Filipino	
____ PLANetizen.com	____ American Indian	
____ APA	____ Pacific Islander	
____ CALED	____ Caucasian	
____ CNU	____ Other	
____ Internet		
____ Other		

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:	Total number of employees in:
	Direct Supv. _____ Indirect Supv. _____	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:	Total number of employees in:
	Direct Supv. _____ Indirect Supv. _____	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:	Total number of employees in:
	Direct Supv. _____ Indirect Supv. _____	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:	Total number of employees in:
	Direct Supv. _____ Indirect Supv. _____	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 _____