

# EQUIPMENT MAINTENANCE SUPERVISOR, CORRECTIONAL FACILITY (CF) Qualifications Assessment

Department of Corrections and Rehabilitation

Departmental Open Examination Final Filing Date: Continuous

# **EXAMINATION INFORMATION**

This examination will provide you with an opportunity to demonstrate significant aspects of your qualifications for the **Equipment Maintenance Supervisor**, **CF** classification with the California Department of Corrections and Rehabilitation (CDCR). The information you provide will be rated based on objective criteria created by Subject Matter Experts. The rating will be used to determine your final score in this examination. If successful, your name will be placed on an eligible list for the classification listed above. The list will be used to fill positions statewide with CDCR. A "Conditions of Employment" section is included in this examination which will allow you to select the time bases and location(s) you are interested in working. Please print out, **personally complete**, and sign this examination form.

Read the instructions below carefully before completing the assessment. Failure to do so may result in an inability to process your assessment and disqualification from this examination.

# AFFIRMATION STATEMENT

I hereby certify that the information provided on this Qualifications Assessment is true and correct to the best of my knowledge and contains no willful misrepresentations or falsifications. I also understand that if it is later discovered that I have made any false representations, I may be removed from the examination and/or the eligible list resulting from this examination, have adverse action taken against me which could result in loss of state employment, and/or suffer loss of right to compete in any future state examinations.

| ame (Printed):        |
|-----------------------|
| ddress:               |
| ity/State/Zip Code:   |
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#### **FILING INSTRUCTIONS**

All applicants must complete and submit the following examination materials:

- Examination Application (STD. 678)
- Qualifications Assessment

By mail to:

Department of Corrections and Rehabilitation Talent Acquisition and Career Services P.O. Box 942883 Sacramento, CA 94283-0001

Or in person at:

Department of Corrections and Rehabilitation 1515 S Street Sacramento, CA 95811-7243

Attn: Talent Acquisition and Career Services, 101N

If you are personally delivering your application and Qualifications Assessment, you must do so between the hours of **8:00 a.m.** and **5:00 p.m.**, Monday through Friday, excluding holidays, on or before the cut-off date to the street address listed above.

#### NOTE:

- All examination materials must have original signatures.
- Be sure your envelope has adequate postage if submitting via mail.
- Faxed or emailed copies will **NOT** be accepted under any circumstances.
- Make and keep a photocopy of the completed Qualifications Assessment for your records.

# **GENERAL INSTRUCTIONS**

This Qualifications Assessment is the sole component of the examination. To obtain a position on the eligible list, a minimum score of 70% must be achieved. Therefore, please be sure to review and follow all instructions carefully as missing or incomplete information may result in disqualification or a lower score.

This examination is comprised of the following areas:

- Affirmation Statement (page 1)
- Filing Instructions / General Instructions (page 2)
- Prior State Employment / Conditions of Employment (pages 3 4)
- Rating Instructions (page 5)
- Knowledge & Experience Assessment (pages 6 10)

# YOUR RESPONSES ARE SUBJECT TO VERIFICATION

Please keep in mind that all information provided on this Qualifications Assessment will be subject to verification at any time during the examination process, hiring process, and even after gaining employment. Anyone who misrepresents his/her experience will be subject to adverse consequences, which could include the following action(s):

- Removal from the examination process
- · Removal from the eligible list / certification list
- Loss of State employment
- Loss of rights to compete in any future state examinations

# PRIOR STATE EMPLOYMENT INFORMATION

Complete this next section ONLY if you have been previously dismissed from California State Civil Service employment by punitive action or as a result of disciplinary proceedings. IF THIS DOES NOT APPLY TO

YOU, please skip this question. Do you have written permission from the California Department of Human Resources (CalHR) to take this examination? YES NO State Personnel Board, Rule 211 provides that a dismissed state employee may only participate in State Civil Service examinations if he/she has obtained prior consent from the State Personnel Board. CONDITIONS OF EMPLOYMENT PLEASE MARK THE APPROPRIATE BOX(ES) OF YOUR CHOICE. If you are successful in this examination, your name will be placed on an active employment list and referred to fill vacancies Statewide according to the conditions you specify on this form. TYPE OF APPOINTMENT YOU WILL ACCEPT Please mark the appropriate box(es) - you may check "(A) Any" if you are willing to accept any type of employment. ☐ (D) Permanent Full-Time  $\square$  (R) Permanent Part-Time  $\square$  (K) Limited-Term Full-Time  $\square$  (A) Any If all are marked and you receive an appointment other than permanent full-time, your name will continue to be considered for permanent full-time positions. LOCATION(S) YOU ARE WILLING TO WORK ☐ **5 ANYWHERE IN THE STATE** – If this box is marked, no further selection is necessary **NORTHERN REGION** □ 0100 – Alameda County ☐ 2100 – **Marin County** ☐ 4500 – Shasta County • CSP, San Quentin ☐ 4600 – Sierra County □ 0200 – Alpine County ☐ 2300 – Mendocino County □ 0300 – Amador County ☐ 4700 – Siskiyou County • Mule Creek State Prison ☐ 2500 – Modoc County ☐ 4800 – Solano County ☐ 0400 – **Butte County** ☐ 2800 – **Napa County** · California Medical Facility · CSP, Solano □ 0500 - Calaveras County □ 2900 – Nevada County ☐ 4900 – Sonoma County ☐ 0600 - Colusa County ☐ 3100 – Placer County ☐ 5100 – Sutter County □ 0700 – Contra Costa County ☐ 3200 – Plumas County

☐ 0800 – **Del Norte County** ☐ 3400 – Sacramento County · Pelican Bay State Prison CSP, Sacramento Folsom State Prison □ 0900 – El Dorado County • Richard A. McGee Correctional ☐ 1100 – Glenn County **Training Center** ☐ 1200 – Humboldt County

☐ 1700 – **Lake County** 

☐ 1800 – Lassen County · High Desert State Prison ☐ 3800 – San Francisco County ☐ 3900 – San Joaquin County

• California Health Care Facility ☐ 4100 – San Mateo County

☐ 5200 – Tehama County ☐ 5300 – Trinity County ☐ 5500 – Tuolumne County • Sierra Conservation Center ☐ 5700 – **Yolo County** ☐ 5800 – Yuba County

#### ☐ 1000 – Fresno County ☐ 1600 – **Kings County** ☐ 2700 – Monterey County • Pleasant Valley State Prison Avenal State Prison · Correctional Training Facility • CSP, Corcoran • Salinas Valley State Prison ☐ 1400 – **Inyo County** CA Substance Abuse Treatment ☐ 3500 – San Benito County ☐ 1500 – **Kern County** Facility California City Correctional ☐ 4000 – San Luis Obispo ☐ 2000 – Madera County Facility County • Central California Women's California Correctional Institution · California Men's Colony Facility Kern Valley State Prison · Valley State Prison ☐ 4300 – Santa Clara County North Kern State Prison ☐ 2200 – Mariposa County Wasco State Prison ☐ 4400 – Santa Cruz County ☐ 2400 – Merced County ☐ 5000 – Stanislaus County ☐ 2600 – **Mono County** ☐ 5400 – Tulare County **SOUTHERN REGION** ☐ 1300 – Imperial County ☐ 3300 – Riverside County ☐ 3700 – San Diego County Calipatria State Prison California Rehabilitation Center RJ Donovan Correctional Facility Chuckawalla Valley State Prison · CSP, Centinela ☐ 4200 – Santa Barbara County • Ironwood State Prison ☐ 1900 – Los Angeles County ☐ 5600 – Ventura County CSP, Los Angeles County ☐ 3600 – San Bernardino County ☐ 3000 – Orange County • California Institution for Men

# ADDRESS OR EMPLOYMENT CHANGES

CENTRAL REGION

After list release, successful candidates may update any address and/or availability for employment preference information by accessing their <u>CalCareer Account</u> (www.calcareers.ca.gov) on the California Department of Human Resources (CalHR) website.

· California Institution for Women

Once logged into your CalCareer Account, from the My Account page:

- Update your personal information (name, address, phone number) by selecting "Contact Information" under Account Management.
- Update your employment preference information (tenure, time base, location preferences) by selecting "Exam / Assessment Records" under Exams / Assessments, then selecting the list you have eligibility on, then selecting "Change Conditions of Employment" under Eligibility Record Actions.

#### RATING INSTRUCTIONS

Rate your knowledge and experience performing specific job-related actions, using the rating scale(s) below.

Respond to each statement, beginning on the following page, by indicating how the statement applies to you. You are required to respond to every statement by marking one option for each of the two scales provided. Responses may not be changed or added once submitted to the Talent Acquisition and Career Services. Missing responses will result in a lower score.

In responding to each statement, you may refer to your FORMAL EDUCATION, FORMAL TRAINING COURSES, and/or WORK EXPERIENCE whether paid or not paid.

#### SCALE #1 - KNOWLEDGE RELATED TO PERFORMING THIS ACTION

## **Extensive Knowledge**

I possess an expert knowledge level to the extent that I have effectively performed tasks related to this knowledge in the most difficult and complex situations **and** I have instructed others on specific aspects of this knowledge.

# Moderate Knowledge

I possess an advanced knowledge level to the extent that I could effectively perform this task under the majority of circumstances or situations encountered.

# **Basic Knowledge**

I possess a sufficient knowledge level that would allow me to perform this task successfully in routine situations.

# Limited Knowledge

I have some knowledge of how to perform this task, but I may require additional instruction to apply my knowledge effectively.

### No Knowledge

I have no knowledge of how to perform this task or what it may entail.

#### SCALE #2 - EXPERIENCE RELATED TO PERFORMING THIS ACTION

#### **Extensive Experience**

I have more than 7 years of experience in regularly performing this action **and** I have instructed others on this specific action.

#### **Moderate Experience**

I have more than 6 years, but less than 7 years of experience performing this action **and** I can perform it independently.

# **Basic Experience**

I have more than 5 years, but less than 6 years of experience performing this action **and** I have performed it regularly with minimal or no assistance.

#### **Limited Experience**

I have less than 5 years of experience in performing this action **and** I may require assistance for successful performance.

# No Experience

I have never performed this action.

| 1.         | 1. Inspect motor vehicles and mobile heavy equipment (e.g., passenger buses, tractors) to determine condition safety, repairs and/or replacement. |  |  |
|------------|---|--|--|
| <b>K</b> r | nowledge related to performing this action  | Experience related to performing this action             |  |
| 171        | ☐ Extensive Knowledge   | Experience Telated to performing this detion  Experience |  |
|            | ☐ Moderate Knowledge  | ☐ Moderate Experience                                    |  |
|            | ☐ Basic Knowledge   | ☐ Basic Experience                                       |  |
|            | ☐ Limited Knowledge   | ☐ Limited Experience                                     |  |
|            | ☐ No Knowledge  | ☐ No Experience  |  |
|            | 5   | ·  |  |
| 2.         | Determine appropriate service, repairs and/or repl  | acement of motor vehicles/mobile heavy equipment.        |  |
| Kr         | nowledge related to performing this action  | Experience related to performing this action             |  |
|            | ☐ Extensive Knowledge   | ☐ Extensive Experience                                   |  |
|            | ☐ Moderate Knowledge  | ☐ Moderate Experience                                    |  |
|            | ☐ Basic Knowledge   | ☐ Basic Experience                                       |  |
|            | ☐ Limited Knowledge   | ☐ Limited Experience                                     |  |
|            | ☐ No Knowledge  | ☐ No Experience  |  |
|            |   |  |  |
| 3.         | Adhere to manufacturer's specifications verifying recommendations.  | motor vehicles/mobile heavy equipment meet standard      |  |
| Kr         | nowledge related to performing this action  | Experience related to performing this action             |  |
|            | ☐ Extensive Knowledge   | ☐ Extensive Experience                                   |  |
|            | ☐ Moderate Knowledge  | ☐ Moderate Experience                                    |  |
|            | ☐ Basic Knowledge   | ☐ Basic Experience                                       |  |
|            | ☐ Limited Knowledge   | ☐ Limited Experience                                     |  |
|            | ☐ No Knowledge  | ☐ No Experience  |  |
|            |   |  |  |
| 4.         | 4. Review retention schedule (e.g., invoices, accident reports) to comply with periodic storage requirements.                                     |  |  |
| Kr         | nowledge related to performing this action  | Experience related to performing this action             |  |
|            | ☐ Extensive Knowledge   | ☐ Extensive Experience                                   |  |
|            | ☐ Moderate Knowledge  | ☐ Moderate Experience                                    |  |
|            | ☐ Basic Knowledge   | ☐ Basic Experience                                       |  |
|            | ☐ Limited Knowledge   | ☐ Limited Experience                                     |  |
|            | ☐ No Knowledge  | ☐ No Experience  |  |
|            | Aggagg mater vahialog/mahila haggy aggipment va   | Nue to anderes reneir cost versus replacement            |  |
| 5.         | Assess motor vehicles/mobile heavy equipment va   | alue to endorse repair cost versus replacement.          |  |
| Kr         | nowledge related to performing this action  | Experience related to performing this action             |  |
|            | ☐ Extensive Knowledge   | ☐ Extensive Experience                                   |  |
|            | ☐ Moderate Knowledge  | ☐ Moderate Experience                                    |  |
|            | ☐ Basic Knowledge   | ☐ Basic Experience                                       |  |
|            | ☐ Limited Knowledge   | ☐ Limited Experience                                     |  |
|            | ☐ No Knowledge  | ☐ No Experience  |  |
|            |   |  |  |

| 6. | Determine when to send a vehicle (e.g., bus, van, truck, etc.) to the approved vendor for the prescribed service/repair.                        |  |
|----|---|--|
| Kr | nowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge     | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |
| 7. | Prepare purchase orders/estimates for motor various.  | vehicles/mobile heavy equipment to facilitate the ordering   |
| Kr | nowledge related to performing this action  ☐ Extensive Knowledge  ☐ Moderate Knowledge  ☐ Basic Knowledge  ☐ Limited Knowledge  ☐ No Knowledge | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |
| 8. | Maintain the motor vehicles/mobile heavy equipn   | nent repair tracking system to facilitate the billing process.   |
| Kr | nowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge     | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |
| 9. | 9. Write justifications for motor vehicles/mobile heavy equipment to confirm the appropriate use.   |  |
| Kr | nowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge     | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |
| 10 | . Review motor vehicles/mobile heavy equipment  | modification requests to determine approval/denial.  |
|    | nowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge     | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |

| 11. Submit quotes (e.g., drawings, pictures) for approval/denial.   |  |  |  |  |
|---|--|--|--|--|
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |  |  |  |
| 12. Inspect American Disability Act (ADA) equipment (e.g., wheelchair, lift, assemblies, etc.) to certify safety, reliability and compliance. |  |  |  |  |
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |  |  |  |
| 13. Confirm motor vehicles/mobile heavy equipment   | has been repaired by approved vendor.  |  |  |  |
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |  |  |  |
| 14. Confirm repair estimates from vendors are neces   | ssarv.   |  |  |  |
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |  |  |  |
| 15. Provide training to staff to be in compliance with  | safety standards   |  |  |  |
| Knowledge related to performing this action  Extensive Knowledge  Moderate Knowledge  Basic Knowledge  Limited Knowledge  No Knowledge        | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience |  |  |  |

| 16. Direct the work of staff to meet job performance e  | expectations.  |  |  |  |
|---|--|--|--|--|
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience       |  |  |  |
| 17. Review travel documentation (e.g., mileage logs, pre and post trip inspections) of staff to verify completion, timeliness and compliance. |  |  |  |  |
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience       |  |  |  |
| 18. Report possible misuse of motor vehicles/mobile   | heavy equipment to management.   |  |  |  |
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience       |  |  |  |
| 19. Report fraudulent repairs of motor vehicles/mobile  | e heavy equipment to management.   |  |  |  |
| Knowledge related to performing this action  ☐ Extensive Knowledge ☐ Moderate Knowledge ☐ Basic Knowledge ☐ Limited Knowledge ☐ No Knowledge  | Experience related to performing this action  Extensive Experience  Moderate Experience  Basic Experience  Limited Experience  No Experience       |  |  |  |
| 20. Supervise the conduct of staff to prevent damage  | to worksite property that may result in injury or death.   |  |  |  |
| Knowledge related to performing this action  Extensive Knowledge  Moderate Knowledge  Basic Knowledge  Limited Knowledge  No Knowledge        | Experience related to performing this action  □ Extensive Experience □ Moderate Experience □ Basic Experience □ Limited Experience □ No Experience |  |  |  |

| 21. Direct staff to enforce the conduct of inmate workers to prevent escapes, damage to property, or physical assaults. |  |  |  |  |
|---|--|--|--|--|
| Knowledge related to performing this action Experience related to performing this action                                |  |  |  |  |
| ☐ Extensive Knowledge   | ☐ Extensive Experience   |  |  |  |
| ☐ Moderate Knowledge  | ☐ Moderate Experience  |  |  |  |
| ☐ Basic Knowledge   | ☐ Basic Experience   |  |  |  |
| ☐ Limited Knowledge   | ☐ Limited Experience   |  |  |  |
| ☐ No Knowledge  | ☐ No Experience  |  |  |  |
| •   | ·  |  |  |  |
|   | onitoring staff in the prevention of accidents and injuries in |  |  |  |
| the garage area (e.g. wet floor signs, verbal warning   | ngs, use of Personal Protective Equipment [PPE], etc.).        |  |  |  |
| Knowledge related to performing this action   | Experience related to performing this action                   |  |  |  |
| ☐ Extensive Knowledge   | ☐ Extensive Experience   |  |  |  |
| ☐ Moderate Knowledge  | ☐ Moderate Experience  |  |  |  |
| ☐ Basic Knowledge   | ☐ Basic Experience   |  |  |  |
| ☐ Limited Knowledge   | ☐ Limited Experience   |  |  |  |
| ☐ No Knowledge  | ☐ No Experience  |  |  |  |
| Č   | ·  |  |  |  |
|   |  |  |  |  |
| 23. Control tools, supplies and equipment to maintain board and chit system).   | security procedures (e.g., color coded, engraved, shadow       |  |  |  |
|   |  |  |  |  |
| Knowledge related to performing this action   | Experience related to performing this action                   |  |  |  |
| ☐ Extensive Knowledge   | ☐ Extensive Experience   |  |  |  |
| ☐ Moderate Knowledge  | ☐ Moderate Experience  |  |  |  |
| ☐ Basic Knowledge   | ☐ Basic Experience   |  |  |  |
| ☐ Limited Knowledge   | ☐ Limited Experience   |  |  |  |
| ☐ No Knowledge  | ☐ No Experience  |  |  |  |
|   |  |  |  |  |
| 24. Enforce security of working areas, office machines  | and supplies to control access.                                |  |  |  |
| Knowledge related to performing this action   | Experience related to performing this action                   |  |  |  |
| ☐ Extensive Knowledge   | ☐ Extensive Experience   |  |  |  |
| ☐ Moderate Knowledge  | ☐ Moderate Experience  |  |  |  |
| ☐ Basic Knowledge   | ☐ Basic Experience   |  |  |  |
| ☐ Limited Knowledge   | ☐ Limited Experience   |  |  |  |
| ☐ No Knowledge  | ☐ No Experience  |  |  |  |
| - No Momeage  | □ No Expenence   |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

THIS CONCLUDES THE EXAMINATION

**REVISION DATE:** 7/28/2023 - PGT