

HAZARDOUS MATERIALS SPECIALIST Qualifications Assessment

Department of Corrections and Rehabilitation

Servicewide 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 **Hazardous Materials Specialist** classification with the California Department of Corrections and Rehabilitation (CDCR) and other Departments that use the classification. 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.

me (Printed):
dress:
y/State/Zip Code:
me Telephone Number:
ork Telephone Number:
nature:
te:

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 Office of Workforce Planning 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: Office of Workforce Planning, 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, 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 9)
- Recruitment Questionnaire (pages 11 12)

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? 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 ☐ (R) Permanent Part-Time ☐ (K) Limited-Term Full-Time ☐ (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 ☐ 4100 – San Mateo County · CSP, San Quentin □ 0200 – Alpine County ☐ 4500 – Shasta County ☐ 2300 – Mendocino County □ 0300 – Amador County ☐ 4600 – Sierra County ☐ 2500 – Modoc County Mule Creek State Prison ☐ 4700 – Siskiyou County • Pine Grove Youth Conservation ☐ 2800 – Napa County ☐ 4800 – Solano County Camp ☐ 2900 - Nevada County · California Medical Facility ☐ 0400 – **Butte County** · CSP, Solano ☐ 3100 – Placer County □ 0500 – Calaveras County ☐ 4900 – Sonoma County ☐ 3200 – Plumas County □ 0600 – Colusa County ☐ 5100 – Sutter County ☐ 3400 – Sacramento County ☐ 0700 – Contra Costa County ☐ 5200 – Tehama County · CSP, Sacramento □ 0800 – **Del Norte County** • Folsom State Prison ☐ 5300 – Trinity County · Pelican Bay State Prison • Richard A. McGee Correctional ☐ 5500 – Tuolumne County **Training Center** □ 0900 – El Dorado County Sierra Conservation Center ☐ 3800 – San Francisco County ☐ 1100 – Glenn County ☐ 5700 – **Yolo County** ☐ 3900 – San Joaquin County □ 1200 – Humboldt County ☐ 5800 – Yuba County • Deuel Vocational Institute ☐ 1700 – **Lake County** California Health Care Facility • O.H. Close YCF

N.A. Chaderjian YCF

Northern California YCC

CENTRAL REGION

☐ 1800 – Lassen County

• High Desert State Prison

California Correctional Center

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

ADDRESS OR EMPLOYMENT CHANGES

After list release, successful candidates may update any address and/or availability for employment preference information by accessing their CalCareer Account (www.jobs.ca.gov) on the California Department of Human Resources (CalHR) website or by notifying CDCR at the following address:

California Department of Corrections and Rehabilitation Office of Workforce Planning P.O. Box 942883 Sacramento, CA 94283-0001 Attn: Certification Unit

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 Office of Workforce Planning. 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 4 years of experience in regularly performing this action **and** I have instructed others on this specific action.

Moderate Experience

I have more than 3 years, but less than 4 years of experience performing this action **and** I can perform it independently.

Basic Experience

I have more than 2 years, but less than 3 years of experience performing this action **and** I have performed it regularly with minimal or no assistance.

Limited Experience

I have less than 2 years of experience in performing this action **and** I may require assistance for successful performance.

No Experience

I have never performed this action.

Identification of hazardous materials and waste waste minimization.	associated with training, labeling, inventory control, and
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
Identification/classification of hazardous materials	s and waste.
2. Identification statement of flazar dead flaterials	o una macco.
Knowledge related to performing this action ☐ Extensive Knowledge	Experience related to performing this action Extensive Experience
☐ Moderate Knowledge	☐ Moderate Experience
☐ Basic Knowledge	☐ Basic Experience
☐ Limited Knowledge	☐ Limited Experience
☐ No Knowledge	☐ No Experience
3. Interaction with emergency responders related to	hazardous substances released.
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
4. Classification of hazardous materials and waste in	n support of emergency response.
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
Following workplace guidelines for hazardous ma	terials and waste
o. I ollowing workplace galacimies for hazarasas ma	iterials and waste.
Knowledge related to performing this action ☐ Extensive Knowledge	Experience related to performing this action ☐ Extensive Experience
☐ Moderate Knowledge	☐ Moderate Experience
☐ Basic Knowledge	☐ Basic Experience
☐ Limited Knowledge	☐ Limited Experience
☐ No Knowledge	☐ No Experience
3	'

6. Conduct hazardous material and waste audits/inspections to ensure compliance.			
Knowledge related to performing this action ☐ Extensive Knowledge	Experience related to performing this action Extensive Experience		
☐ Moderate Knowledge	☐ Moderate Experience		
☐ Basic Knowledge	☐ Basic Experience		
☐ Limited Knowledge	☐ Limited Experience		
☐ No Knowledge	☐ No Experience		
□ No Miowieuge	□ No Experience		
7. Review surveys/audits in maintaining compliance w	vith hazardous materials and waste requirements.		
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		
8. Implement hazardous materials business plan requ	irements		
c. Important nazarada materiale sucindos plan requ	in official control of the control o		
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		
0 Workplace policies precedures and practices re	plated to bezordous materials and wests management		
 Workplace policies, procedures, and practices re aimed at improving workplace safety. 	elated to hazardous materials and waste management		
annoa at improving workplace carety.			
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		
10 Effective communication with many contractors to			
10. Effective communication with peers, contractors, lo	cai, and other governmental agencies.		
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 Kilowieuge	□ INO Experience		

11. Effective record keeping related to hazardous was	ste disposal and associated fees.	
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	
12. Collect hazardous wastes from point of generation	n to the designated 90-Day storage area.	
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	
13. Coordinate required hazardous waste removal fro	om the workplace.	
Knowledge related to norferming this cotion	Experience related to newforming this action	
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	
14. Undata programs associated with hazardays mat	orials and wests	
14. Update programs associated with hazardous mate	eriais ariu waste.	
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 Khowleage	□ No Experience	
15. Facility environmental quality permit compliance n	nonitoring.	
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	
· · - · · · · - · · · - · · · · · · · ·	— · · · - · · · · · · · · · · · · · · ·	

Experience related to performing this action □ Extensive Experience □ Moderate Experience □ Basic Experience
☐ Limited Experience
☐ No Experience
ontracts to conduct repairs, or obtain contractor and/or
Experience related to performing this action Extensive Experience Moderate Experience Basic Experience Limited Experience No Experience
eded to maintain the hazardous materials program.
Experience related to performing this action Extensive Experience Moderate Experience Basic Experience Limited Experience No Experience
gs to maintain current certifications and knowledge of
Experience related to performing this action Extensive Experience Moderate Experience Basic Experience Limited Experience No Experience
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THIS CONCLUDES THE EXAMINATION

REVISION DATE: 5/4/2021 - AL

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Applicants are asked to voluntarily provide the information below. The following data will be used for statistical data gathering and reporting purposes. This questionnaire will be separated from the examination and this information will not be used in any employment decisions. GENDER Male Female Non-binary RACE AND ETHNICITY Check one box that best describes your race or ethnicity. ASIAN PACIFIC ISLANDER Multiple Pacific Islander*** Merican Indian or Alaska

□ Black or African American	☐ Multiple Asian**	☐ Multiple Pacific Islander***
□ American Indian or Alaska	□ Indian	☐ Guamanian
Native	☐ Cambodian	☐ Hawaiian
☐ Hispanic or Latino (alone or	☐ Chinese	□ Samoan
in combination with any other race)	☐ Filipino	☐ Other Pacific Islander
□ White	☐ Japanese	
☐ Multiple Races*	☐ Korean	
	□ Laotian	
	☐ Vietnamese	
	☐ Other Asian	

AUTHORITIES

Government Code sections 8310.5, 19705, 19790, 19792(h) and California Code of Regulations, Title 2, sections 599.980, 11013(b) authorize the State of California to collect demographic information on job applicants and exam participants for analysis and statistical purposes.

CONTINUE TO NEXT PAGE TO COMPLETE RECRUITMENT QUESTIONNAIRE

^{*}If you identify with more than one race that is Non-Hispanic or Latino, select Multiple Races.

^{**}If you identify with more than one Asian ethnicity, select Multiple Asian.

^{***}If you identify with more than one Pacific Islander ethnicity, select Multiple Pacific Islander.

RECRUITMENT QUESTIONNAIRE

On behalf of the California Department of Corrections and Rehabilitation, we thank you for participating in this examination. To assist us in our recruitment efforts, please tell us how you heard about this examination.

Please check the appropriate box and, where relevant, specify your answer:
☐ Internet (www.cdcr.ca.gov, www.jobs.ca.gov)
☐ Job Fair
☐ Friend/Family Member
☐ Staffing Agency (Spearhead, Manpower)
☐ Career Assistance Centers (e.g., Employment Development Department Career Network, Workforce Center)
☐ State Agency (please specify):
☐ Military Base (please specify):
□ Local Union (please specify):
□ Other (please specify):
California Department of Corrections and Rehabilitation
□ Flyer
□ Banner
□ Employee
□ Exam Bulletin E-Blast
☐ Institution Bulletin Board
Social Media
□ Facebook
□ Indeed
□ Monster
Educational Facility
□ College
☐ Trade School
☐ School Association
☐ Specialized Training/Certification Program (e.g., Job Corps, Skill Centers, Regional Occupational Programs)
☐ Local Apprenticeship Program
Public Advertisements
□ Bus
☐ Truck
□ Billboard
☐ Mobile Ad
Out of State Resource
□ Arizona
☐ Oregon
□ Nevada