

WE'RE HIRING!

OFFICER (CEO)



CHIEF EXECUTIVE OFFICER (CEO)

The Board of Directors of the Madera Fair (21-A DAA) is seeking an administrator to continue its strong traditions and to identify opportunities to expand its annual fair and year-round operations.

This is a confidential recruitment process and will be handled accordingly throughout the various stages.

THE IDEAL CANDIDATE

*The Chief Executive Officer is an "at will" employee who sits at the pleasure of the Board of Directors. He/she is responsible for the overall administration and management of the 21-A District Agricultural Association Madera District Fair. The CEO reports directly to the Board of Directors of the Association. The CEO manages the staff, organizes, implements, and administers the development and utilization of the fairgrounds, and implements the board's policy decisions. The fairgrounds provide the general public with various entertainment and agricultural, educational, and cultural activities.

The CEO oversees the following:

- Staff and its performance
- Finance and Accounting of the organization
- Events held on the site
- Maintenance of the Facilities and Grounds
- The Annual Fair
- Promotion of the Organization

COMPENSATION

A competitive monthly salary, starting at \$8,379 to \$10,259, is offered for the position. The benefit package offered by the 21-A District Agricultural Association includes:

- Health, Dental, and Vision Plan Employee plus family coverage
- ❖ Annual Leave Vacation and Sick Leave
- Life Insurance
- California Public Employee Retirement System (CalPERS)



ABOUT US

The 21-A District Agricultural Association is an agency of the State of California. The district is located within the County of Madera and the City of Madera. The Madera District Fair is also home to The Commons at Madera Fair. This retail development wraps around the fairgrounds.

It is governed by the limitations of its by-laws and the statutes of the State of California, including the approval of the Department of Food and Agriculture and General Services, as required by law. All powers are exercised by or under the authority and control of the Board of Directors.

The Board of Directors consists of nine members who are appointed by the Governor to serve terms. The Board equally establishes the policies and procedures of the Association. The Board empowers the CEO to implement and oversee the organization.

The Association actively promotes the area's interest, supporting its communities by improving the quality of the Fair and the facilities to create important venues for education, recreation and entertainment.

THE MADERA DISTRICT FAIR ASSOCIATION HISTORY

The Madera District Fair was first established in 1937; at that time, the grounds bordered Gateway Drive, then Highway 99. It wasn't until the early 1950s that the 99 Freeway route was established, and the fairgrounds were cut into two parcels. The property on the east side of the newly established freeway was sold. In contrast, the property located just west of the highway and adjacent to the existing grounds was donated to the Madera District Fair. This acquisition resulted in solidifying the fair's existing 115-acre property.

Madera County is the geographical center of California with the City of Fresno to the South and the City of Merced to the North.

Madera County is rich in agriculture and serves as the South Gate to Yosemite National Park.

Madera County is home to the City of Madera and the City of Chowchilla, with several other unincorporated areas. Oakhurst, Bass Lake, North Fork, and Coarsegold lie in Eastern Madera County and the Madera Ranchos and Rolling Hills on the southeastern side of the county.

The Madera District Fair strives to meet the community's needs by providing a fun, safe, and family-oriented venue, all the while promoting agriculture and community involvement. The Madera District is also home to The Commons at the Madera Fair. This retail development wraps around the fairgrounds.

We are home to several community events, including the annual four-day Madera Fair held in September every year. We also host several interim events and full-time rentals, including the Madera Speedway and Flea Market.



Lumber Town at Madera Fair

DESIRABLE QUALIFICATIONS

We desire professional experience and personal characteristics which include, but are not limited to:

- Knowledge and experience in purchasing, marketing, contracting, technology, facility maintenance, Public Relations, Risk Management, Crisis Management, Asset Management, Human Resources, ADA Compliance, admissions, Ticket Sales, and Technology, and holds responsibility for the operational efficiencies of the organization.
- Maintains an exceptional consistent accounting of all records and reporting and provides necessary information and financial data to enable the Board to make good decisions in the best interest of the organization.
- Participates in leadership and/or community stewardship programs.
- Ability to plan and organize restructuring of business and fairgrounds development, including fundraising, grants, and sponsorships.
- Demonstrates the ability to develop and foster a cross-functional work relationship between direct-report departments, other departments, and sub-contractors within the organization.
- Sustain relationships and enhance current additional revenue sources that have been developed, such as the adjacent shopping center and full-time rentals.

CONT DESIRABLE QUALIFICATIONS

- Expand and preserve a strategic plan along with the master plan of development for the Madera District Fairgrounds.
- Experience working in agricultural and livestock industries.
- Ability to do presentations and promote our organization in its efforts to interested parties. To be passionate about the organization and its accomplishments.
- Candidate must be willing to work extended hours or weekends when necessary to perform optimal level of success for the organization.



Madera District Fair Operations: The Madera

District Fair has an operating budget of approximately \$2.8 million annually. The Fair does not receive any tax money and must generate its own revenue. The annual four-day fair compensates expenses, rental agreements with year-round tenants, and renting out the buildings for private functions.

MANAGERIAL SKILLS

- Provide good personnel management of all employees and volunteers.
- Successfully oversee all budget management.
- Ability to preserve assets and increase revenue potential.
- Lead by example in carrying out the direction of the Board of Directors.

EFFECTIVE LEADER

- Be the face of the Fair in representing the organization within public interests, media relations, and local, regional, or state matters, along with communications of governmental authorities.
- Open, forthright, and trustworthy in communication.
- Be innovative and motivational.
- Promote the highest customer satisfaction and safety for any venues provided on our site.

EDUCATION AND EXPERIENCE

The Board of Directors desires an executive who can meet the many qualities and diverse interests that our community demands in excellence. We are looking for a candidate with the right combination of leadership skills and experience who will sustain the success of the Madera District Fair while leading us to superior performance in future development projects.

Education: Prefer an Associate or Bachelor's degree in Business Administration, Accounting, Marketing, or Communications, but not necessarily with related experience.

Experience:

- Administrative experience with a successful proven record of accomplishment in the public or private business sectors.
- Experience in fair or event planning-related work is preferred.
- Demonstrated leadership with a similar size and complexity of a business, including working with a Board of Directors structure.

DISQUALIFICATIONS

Any applicant who attempts to contact individual board members directly with the intent of influencing the decision of the Board or Committee will be disqualified as a candidate for the position at the discretion of the Board of Directors.

TO APPLY

This is a confidential recruitment process and will be handled accordingly throughout the various stages of the process.

Interested candidates should apply by submitting a cover letter, comprehensive resume, State Application (STD 678), and five (5) professional references via email to Lois Leonard, Selection Chair, at ceomaderadistrictfair@gmail.com

The first review of resumes will begin shortly after the closing date of June 30, 2024.

Candidates should be aware that the Board reserves the right to determine the best combination of education, professional development, and experience required for this position.

APPLICATION PROCEDURE

All application materials must be received by U.S. Mail or email, postmarked by 5:00 p.m. on June 30, 2024, and sent to the contact information listed below.

Madera District Fair
ATTN: CEO Selection Committee
1850 West Cleveland
Madera, CA 93637
Or email to:

Lois Leonard, Selection Committee Chair ceomaderadistrictfair@gmail.com

- A screening committee will evaluate each applicant's application and submission.
- Applicants considered best qualified to fulfill the desires of the Board's search will be referred to the Board of Directors for further consideration.
- Personal interviews may be scheduled with a selected number of qualified candidates at a determined date. If necessary, additional interviews will be held for qualifying finalists.
- The Selection Committee reserves the right to contact the applicant's personal references for review of the applicant.

- The Board of Directors may choose to visit the home community of the final applicant(s).
- Upon the selection and final determination of the new CEO, a mutually agreeable date will be determined for the transition of the role of Chief Executive Officer for the Madera District Fair.

Each applicant shall complete the employment application, resume and references in order to be considered for this position. References will only be contacted once mutual interest has been established. In-depth background checks and verifications may be conducted on final candidates. This is a confidential recruitment process.

The Madera District Fair is an equal opportunity employer-equal opportunity to all regardless of race, color, creed, national origin, ancestry, sex, marital status, disability, religious or political affiliation, age, or sexual orientation.

Any questions regarding the application or the selection process may be directed to:

CEO Search
Email: ceomaderadistrictfair@gmail.com

(Please leave your name and contact information along with your questions.)



Camper making lemonade with fair-time concessionaire Log Cabin Concessions.

State of California Application Instructions



Read the following instructions carefully before completing this application. Please complete the application on a computer or print in ink. All questions **must** be answered completely and accurately, except as noted. You may be disqualified for any false or misleading statements or for omitting information. The information you furnish will be used to apply for a job, determine your eligibility and/or may be the basis for arriving at your final rating in an examination. During the course of an examination, you may be requested to provide additional information regarding your qualifications, your preference regarding work location, shifts, etc.

Social Security Number (SSN) – Providing this is voluntary in accordance with the Privacy Act of 1974 (PL 93-579). However, a SSN may be needed to process your application when granting items such as Veterans' Preference, Limited Examination and Appointment Program (LEAP), Career Credits, and/or confirming list eligibility.

Examination(s) or Job Title(s) – Provide the title of the position listed on the announcement.

Question 2 – Must be answered by all applicants. You must answer "Yes" if you have ever, because of poor performance or misconduct, been fired, dismissed, or terminated from a job, or had an employment contract terminated. Applicants who have been rejected during a probationary period, or whose dismissals or terminations have been overturned, withdrawn (unilaterally or as part of a settlement agreement) or revoked need not answer "Yes." Explain any "Yes" answers in the Explanations section. Briefly describe the facts, findings, any action taken against you, and the circumstances under which you left the position.

In completing this application, you do not need to answer "Yes" to Question 2 if:

you have been rejected during a probationary period; your employer withdrew the firing, dismissal, termination, or contract termination (either voluntarily or as part of a settlement); or

a court or administrative agency overturned or revoked the firing, dismissal, termination, or contract termination.

If asked about past employment history by a prospective employer during the hiring process or probationary period, applicants are required to tell the truth regarding any firing, dismissal, termination, contract termination or rejection during probationary period, whether or not the action was overturned, revoked, or withdrawn (either voluntarily by the employer or, as part of a settlement agreement). Applicants are also required to provide factually correct information in the Employment History section of the application.

Question 3 – Must be answered by all applicants. Government Code section 18720.45 requires applicants for state employment to disclose on their application form whether they have entered into any agreement(s) with the state in which the applicant agreed to refrain from seeking or accepting any subsequent employment with the state. You must answer "Yes" to this question if you have ever entered into a written agreement with any department, agency, commission, board,

state employer, or other governmental unit within California state civil service, where one of the terms of the agreement provided that you agreed not to seek or accept subsequent employment with the state or any state agency. A state agency includes any department, agency, commission, board, state employer, or other governmental unit within the California state civil service, but does not include the California State University.

Question 4 – Must be answered by all applicants. Government Code section 18720.45 requires applicants for state employment to disclose on their application form whether they have entered into any agreement(s) with the state in which the applicant agreed to refrain from seeking or accepting any subsequent employment with the state. You must answer "yes" to this question if you have ever entered into a written agreement with any department, agency, commission, board, state employer, or other governmental unit within the California state civil service, involving an adverse action, rejection on probation, or AWOL termination where one of the terms of the agreement provided that you agreed not to seek or accept subsequent employment with a particular state agency. A state agency includes any department, agency, commission, board, state employer, or other governmental unit within the California state civil service, but does not include the California State University. If you answer "Yes" to this question, please provide the name of the particular agency and the details in the Explanations section.

Question 10 – If you checked "Yes" and you are not able to attach the Accommodation Request form, you will be contacted via telephone or mail to make specific arrangements.

Explanations – Use this section to explain the details of any response that requires additional information. Be thorough, and attach additional sheet(s) if needed.

Applicant's Signature – Your signature and the date signed is required. If the hard copy application is not signed, it may be rejected. Electronic submission of your application through a CalCareer Account certifies your application in place of a signature and date signed.

Education – You must include a complete record of your training and educational background. Please read the requirements of the examination bulletin for any specific educational requirements. If more space is needed, you may attach additional documentation.

Licenses – If the examination bulletin requires a specific license, professional certificate, or membership in a professional organization, list the full name of the license, certificate or organization, the license number, and the official expiration date of the document or membership.

Employment History and Experience – You must include a complete list of your paid and/or volunteer work experience that relates to the qualification requirements specified on the examination bulletin. List all relevant jobs during the past 10 years, regardless of duration, including part-time and military service. You should also list volunteer experience and jobs if they directly relate to the job for which you are applying. State employees must list the specific departments for which they worked and indicate the specific civil service class title(s) held.

Requesting Veterans' Preference – If you have not previously applied and been approved for Veterans' Preference, you must complete and submit the Veterans'

Preference Form, CALHR-1093 to the California Department of Human Resources.

Equal Employment Opportunity Page – Providing this information is voluntary. This data is only to be used for statistical purposes in evaluating the extent to which the state is complying with state and federal equal employment opportunity and non-discrimination requirements.

NOTE: Your completed application and other examination related information submitted to the department administering this examination becomes confidential information and the property of the State of California as provided by Government Code section 18934. This application and other confidential information **will not be returned**; therefore, it is recommended that you keep a copy of your completed application for your records. Your rights to inspect your examination papers are set forth in Title 2, section 186 -189 of the California Code of Regulations, which can be accessed at Office of Administrative Law website at: **oal.ca.gov**.

Information About Disability

Physical disability includes but is not limited to having any physiological disease, disorder, condition, cosmetic disfigurement, or anatomical loss that affects one or more of several body systems and limits a major life activity. The body systems listed include the neurological, immunological, musculoskeletal, special sense organs, respiratory, including speech organs, cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine systems. A physiological disease, disorder, condition, cosmetic disfigurement, or anatomical loss limits a major life activity, such as working, if it makes the achievement of the major life activity difficult.

Mental disability includes but is not limited to having any mental or psychological disorder or condition, such as intellectual or cognitive disability, organic brain syndrome, emotional or mental illness, or specific learning disabilities, that limits a major life activity, or having any other mental or psychological disorder or condition that requires special education or related services.

Major life activities are defined broadly and include physical, mental, and social activities, including but not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, interacting with others, and working. Major life activities include the operation of major bodily functions, including functions of the immune system, special sense organs and skin, normal cell growth, digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive functions.

Major bodily functions include the operation of an individual organ within a body system.

An impairment "limits" a major life activity if it makes the achievement of the major life activity difficult.

Medical condition is defined as any health impairment related to or associated with a diagnosis of cancer or a record or history of cancer, or a genetic characteristic.

Genetic characteristic is defined as any scientifically or medically identifiable gene or chromosome or an inherited characteristic that could statistically lead to increased development of a disease or disorder.

California Code of Regulations, Title 2, section 11065.

Applications will ONLY be processed for active recruitment efforts - see exam bulletin or job posting.

EXAMINATION / EMPLOYMENT APPLICATION STD. 678 (REV. 10/2023) Page 3

State of	California	Application
----------	------------	--------------------

PRINT OR T	YPE					<i>3</i> 10	110	Oi.	Oa		ш	7 P	γPi	ICat	.1011				
APPLICANT'S I	NAME (La	ıst)					(First)							(M.I.)		CALCAREER II)	
MAILING ADDR	ESS (Nui	mber)				(Stre	eet)							(4	Apt #)		SOCIAL SECU	RITY NUMI	BER (Exams Only)
(City)										(County)						(Sta	re)	(Zip Code	a)
(0.0)										(0009)						(0.0	,	(2,5 0000	-,
E-MAIL ADDRE	SS										1:	st TELEPH	IONE N	UMBER		Work Home Other	2nd TELEPHO	NE NUMBI	ER Work Home Other
EXAMINATION	(S) OR JO	OB TITL	E(S) FC	OR WH	ICH YO	U ARE /	APPLYIN	IG								Other			PERSONNEL
																			USE ONLY
STANDARD E	MPLOY	MENT	QUES	TIONS	s														
Are you i	now em	plove	d bv th	ne Sta	ate of	Califo	rnia? If	"Yes."	fill in th	ne informati	ion b	elow.					Y	es	No
•		. ,	•					•		_ Subdi									
Have you performa	u ever b ince or	een fi for dis	red, d	ismis ary re	sed, te	ermina s? If "Y	ated, oi ⁄es," gi	r had a ve deta	n empl ails in th		ntractation'	t termina ' section	ated fr	om any w and re	position fer to the	for	Y	es	No
3. Have you																	٧	es	No
4. Have you	ı ever e	entered	d into	any v	vritten	agree	ement v	with a s	tate ag	ency involv	ving a	an adver	rse ac	ction, reje	ection on	probati	on,	es	No
5. In addition										·		•		·					
a. Ve	rbal flu	ency i	n _										_						
		-																	
ANSWER THE														HE INFOR	RMATION				
6. For typir	ıg appli	cants	only:	certi	fy I ca	n type	at a s	peed o	f		word	s per mii	nute.						
7. Do you i	neet the	e mini	mum :	and/o	or max	imum	age re	auirem	ents?								Y	es	No
8. Do you p							-											es	No
										Re									
ANSWER THE											311101						_		
9. Enter yo											ountv	of reside	ence:						
10. Do you r			-							-	-				modation	form	`	es	No.
																			No
rega	ding Ve	eteran	s' Pre	feren	ce see	e www	v.calca	reers.	ca.gov	or www.ca	alvet	.ca.gov	•	n, you ma	ay qualify	for Vet	erans' Prefere	ence. Foi	rinformation
EXPLANATI	ONS: P	rovid	e deta	ails o	f any	respo	onse tr	nat req	uires a	idditional i	infor	mation.							
CERTIFICAT	ION –	IMPO	RTAN	T – R	₹EAD	BEFO	RE SI	GNING	- YOL	JR SIGNAT	TURE	IS REC	QUIRE	D FOR	HARD C	OPY S	JBMISSION		
I further ι dismissa	indersta from e	and the	at any ment	false with t	e, inco the Sta	mplete ate of	e, or in Califor	correct nia. I a	staten uthoriz	nents may i	resul: oyers	t in my d and edu	disqua ucatio	alification onal instit	from the tutions ic	e examii	of my knowled nation process on this applic	sor	
APPLICANT'S	SIGNATUI	RE															DATE SIGNE	ED	
						4PPLIC	CANTS	— DO I	VOT US	E THE SPA	CE BI	ELOW—	FOR	PERSON	NEL USE	ONLY	FC2 5	ON:	105 01/11
Classes	01	02	03	04	05	06				Flags _						- S	FOR PERS	ONNEL U	JOE UNLY
WC for Series/Levels	s									wc _						F	Accepted		REJECTED WC
RC/Flag for Series/Levels	,																		
CODES] [ıL	DUCATION	OTHER DATE P	ROCESSED
																		1	

APPLICANT'S NAME (l ast)	(First)			(M.I.)		CALCAREER ID	
ALL EIGHT O NAME (Lust)	(1 1131)			(Wi.i.)		OALOAKLEKID	
EDUCATION DID YOU GRADUATE F	ROM HIGH SCHOOL?	IF NOT, DO YOU P	OSSESS A GED OR EQUIVALENT	T? IF N	NOT, ENTER THE HIG	GHEST GRA	ADE YOU COMPLETED?	
Yes	No	Yes	No					
	OLLEGE — BUSINESS, C RVICE SCHOOL, NAME A		COURSE OF STUDY	UNITS COMPLETED SEMESTER	UNITS COMPLETED QUARTER		LOMA, DEGREE OR ETIFICATE OBTAINED	DATE COMPLETED
			IFICATES INDICATED IN ere admitted to the Bar u				on the examination	bulletin.)
LICENSE / CERT	FICATION NUMBER	ISSUE DATE	EXPIRATION DATE	IN THE SP			FIC COURSE REQUIREME S FOR THIS EXAMINATION	
EMPI OYMENT H	IISTORY – I ist rele	vant naid military :	and/or volunteer experie	nce that relate	to the qualifica	tion rea	uirements I ist each	ioh senarately
FROM (MM/DD/YY)			N (Include Range or Level, if applic		to the qualified		SUPERVISOR NAME	, job copulatoly.
HOURS PER WEEK	COMPANY/STATE AGEN	ICY NAME					SUPERVISOR PHONE NU	MBER
TOTAL WORKED	ADDRESS							
DUTIES PERFORMED								
DO NES PERFORMED								
REASON FOR LEAVIN	G							

APPLICANT 5 NAME	(Last)		(FI/St)	(M.I.)	CALCAREER ID
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIF	FICATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE A	OFNOV NAME			SUPERVISOR PHONE NUMBER
HOURS PER WEEK	COMPANY/STATE A	GENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS				
DUTIES PERFORMED)				
REASON FOR LEAVI	√G				
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIF	ICATION (Include Range or Level, if applicable)	-	SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE A	OFNOV NAME			SUPERVISOR PHONE NUMBER
HOURS FLIX VYLLIX	CONFANT/STATE A	GENCT NAME			SUPERVISOR FROME NOWBER
TOTAL WORKED	ADDRESS				
SUTTIES REDECORME					
DUTIES PERFORMED)				
REASON FOR LEAVIN	1G				

APPLICANT'S NAME	(I ast)		(First)		(M.I.)	CALCAREER ID	
/ I LIO/III O IV IIIL	(Luot)		("St)		(141.11.)	ONEON WEEK ID	
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFI	CATION (Include Range or Level, if applied	cable)		SUPERVISOR NAME	
HOURS PER WEEK	COMPANY/STATE AG	ENCY NAME				SUPERVISOR PHONE NUMBER	
TOTAL WORKED	ADDRESS						
DUTIES PERFORMED)						
REASON FOR LEAVIN	NG						
REASON FOR LEAVIN	NG						
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFI	ICATION (Include Range or Level, if appli	cable)		SUPERVISOR NAME	
FROM (MM/DD/YY)	TO (MM/DD/YY)		ICATION (Include Range or Level, if appli	cable)			
			ICATION (Include Range or Level, if appli	cable)		SUPERVISOR NAME SUPERVISOR PHONE NUMBER	
FROM (MM/DD/YY)	TO (MM/DD/YY)		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY)	TO (MM/DD/YY)		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK	TO (MM/DD/YY) COMPANY/STATE AG		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
FROM (MM/DD/YY) HOURS PER WEEK TOTAL WORKED DUTIES PERFORMED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			
HOURS PER WEEK TOTAL WORKED	TO (MM/DD/YY) COMPANY/STATE AG ADDRESS		ICATION (Include Range or Level, if appli	cable)			

STATE OF CALIFORNIA - CALIFORNIA DEPARTMENT OF HUMAN RESOURCES

EXAMINATION / EMPLOYMENT APPLICATION

STD. 678 (REV. 10/2023) Page 7

APPLICANT 5 NAME ((Last)		(FIIST)	(M.I.)	CALCAREER ID
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIF	CATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AG	GENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS				
DUTIES PERFORMED)				
REASON FOR LEAVIN	NG				
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIF	CATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AC	JENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL MODIFER	100000				
TOTAL WORKED	ADDRESS				
DUTIES PERFORMED)				
REASON FOR LEAVIN	NG				

APPLICANT'S NAME (Last)		(First)	(M.I.)	CALCAREER ID
				•	
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFI	CATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGE	ENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS				
REASON FOR LEAVIN	IG				
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFI	CATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGE	ENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS				
DUTIES PERFORMED					

CalHR Privacy Notice on Information Collection

The California Department of Human Resources (CalHR) is committed to the privacy of your personal information. The information requested on this form may include personal information. Under the Information Practice Act of 1977, California Civil Code section 1798.17, agencies/departments that use this form to collect personal information from individuals are required to provide a privacy notice with this form. For more information, you may wish to contact the appointing authority at which you are applying to receive information regarding that appointing authority's privacy policy, and privacy notice on information collection.

Legal Authority for Collection and Use of Information

CalHR is requesting the information specified on this form pursuant to Government Code sections 8310.5, 11019.11, 12946, 18720, 18720.1, 19233, 19234, 19705, 19790, 19792(h) and the California Code of Regulations, Title 2, sections 599.980, 11013(b).

The information collected will be used for scheduling examinations, determining your eligibility for state civil service, and contacting you. Information will also be used for statistical and analytic purposes, audit purposes and may be disclosed to the appointing authority to which you apply.

Individuals should not provide personal information that is not requested or required.

The submission of all information requested is mandatory unless otherwise noted. If you fail to provide the information requested, CalHR will not be able to determine your eligibility for state civil service employment.

Disclosure and Sharing

CalHR does not, under any circumstance, sell your electronically collected personal information. In addition, Government Code section 11015.5 (6) prohibits CalHR and all state agencies from distributing or selling any electronically collected personal information, as defined above, about users to any third party without the written permission of the user. Any distribution of electronically collected personal information will be used solely for its intended use. However, we may share your personal information under the following circumstances:

- 1. To other state departments and third party vendors for administering our human resource responsibilities as required by law:
- 2. You give us permission and we have your consent; and/or
- 3. We may release information to a party with a legal authority, such as a subpoena.

Department Privacy Policy

The information collected by CalHR is subject to the limitations in the Information Practices Act of 1977 and state policy. For more information on how we care for your personal information, please read our Privacy Policy at http://calhr.ca.gov/pages/privacy-policy.aspx.

Access to Your Information

You can view your personal information through your CalCareer account. If you have questions regarding your CalCareer account, you may contact the CalHR Selection Division.

CalHR Selection Division 1515 S Street, Room, 500N Sacramento, CA 95811 866-844-8671 STD. 678 (REV. 10/2023) Page 10

EQUAL EMPLOYMENT OPPORTUNITY

APPLICANT: This data assists the State of California in its commitment to equal employment opportunity. Applicants are asked to voluntarily provide the information below. This questionnaire will be separated from the application and will not be used in any employment decisions. This data will be used for statistical data gathering and reporting purposes in evaluating the extent to which the state is complying with state and federal equal employment opportunity and non-discrimination requirements.

SOCIAL SECURITY NUMBER	AGE		GENDER		SEXUAL OF	RIENTATION
	Under 21 (1)	21-39 (3)	Male	Female	Do you iden	tify as LGBTQ+?
	40-69 (6)	70 and Over (7)	Non-bina	ry	Yes	No

ASIAN

RACE AND ETHNICITY

Check one or more boxes that best describe your race or ethnicity.

	AOIAN	I AOII IO IOLANDER
BLACK or AFRICAN AMERICAN (F)	Indian (M)	Guamanian (R)
A descendant of a person or persons	Cambodian (U)	Hawaiian (P)
who were enslaved in the United States.	Chinese (J)	Samoan (Q)
Not a descendent of a person or persons who were enslaved in the United States,	Filipino (G)	Other Pacific Islander (T)
including, but not limited to, African	Japanese (I)	
Black, Caribbean Black, or other Black.	Korean (K)	
Unknown	Laotian (V)	
AMERICAN INDIAN or ALASKA	Vietnamese (L)	
NATIVE (H)	Other Asian (S)	

I choose not to identify.

PACIFIC ISLANDER

DISABILITY

WHITE (E)

A person with a disability is an individual who:

- has a physical or mental impairment or medical condition that limits one or more life activities, such as walking, speaking, breathing, performing manual tasks, seeing, hearing, learning, caring for oneself or working;
- · has a record or history of such impairment or medical condition; or
- · is regarded as having such an impairment or medical condition.

Please refer to the instructions for more information regarding how disability is defined under the law.

Yes, I have a disability

HISPANIC or LATINO (D)

No, I do not have a disability

MILITARY

Have you ever served in the United States military? Please check the appropriate box below.

Yes, I have served in the military

No, I have not served in the military

AUTHORITIES

Government Code sections 8310.5, 11019.11, 12946, 19233, 19234, 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.