### EXAMINATION TYPE

This is an **OPEN** examination for the Department of Developmental Services. The examination is a **TRAINING AND EXPERIENCE (T & E)** and consists of a **SUPPLEMENTAL APPLICATION** (Included below).

### WHO SHOULD APPLY?

Persons that meet the minimum qualifications (MQ's) of the classification by the final file date or cut-off date of the examination.

### WHERE TO APPLY

MAIL EXAMINATION DOCUMENTS TO:

**DEPARTMENT OF DEVELOPMENTAL SERVICES (DDS)**

1600 9th Street, MS-Q
Sacramento, CA 95814
Attention: PEGGIE MCQUILLAN

**Faxed or emailed applications will not be accepted.** Do not submit applications to the California Department of Human Resources or the State Personnel Board.

### POSITION LOCATION(S)

Department of Developmental Services which includes, Canyon Springs Community Facility, Fairview Developmental Center, Porterville Developmental Center and Sonoma Developmental Center.

### FINAL FILE DATE

**Continuous Filing**

### SALARY RANGE

$4,600.00 - $5,758.00 per month

### TESTING INFORMATION

The examination is a **Training and Experience weighted - 100%**

The examination will consist solely of a **SUPPLEMENTAL APPLICATION**. In order to obtain a position on the eligible list, a minimum rating of 70.00% must be attained. Applications will be accepted on a continuous basis and cut-offs twice annually or as conditions warrant.

Veterans’ preference will be granted in this examination.

### ELIGIBLE LIST INFORMATION

A departmental open eligible list will be established and used to fill vacancies at DDS. Candidates may apply for the exam once within a 12-month period. The names of persons successful in this exam will be merged onto an eligible list in the order of final score.
## REQUIREMENTS FOR ADMITTANCE TO THE EXAMINATION

All applicants must meet the education and/or experience requirements listed below under “MINIMUM QUALIFICATIONS” for the classification by the final file date of the examination. It is your responsibility to make sure you meet the education and/or experience requirements stated on this announcement on the date you submit your application.

Requirements stated below include more than one pattern and are distinguished as “Either I,” “Or II,” “Or III,” etc.

## MINIMUM QUALIFICATIONS

The following education requirement applies only to the non-California state service experience patterns of all four levels.

**Education:** Equivalent to graduation from college. (Supervisory or administrative experience in the field of developmental disabilities may be substituted for the required education on a year-for-year basis.)

**Experience:**

<table>
<thead>
<tr>
<th>Pattern</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PATTERN I:</strong></td>
<td>One year of experience in the California state service performing the duties of the class of Community Program Specialist I. <strong>OR</strong></td>
</tr>
<tr>
<td><strong>PATTERN II:</strong></td>
<td>One year of experience in the California state service performing budget, personnel, or administrative analysis duties in a class with a level of responsibility equivalent to that of Staff Services Analyst, Range C. <strong>OR</strong></td>
</tr>
<tr>
<td><strong>PATTERN III:</strong></td>
<td>Two years of experience performing analytical staff work in the field of developmental/mental disabilities including such areas as direct client care programming, program planning, budget analysis, personnel management, or administrative analysis. All of this experience must have included responsibility for defining problems, analyzing facts, and preparing recommendations for action with supporting material. Possession of a Master's Degree in Public Administration, or a closely related field, may be substituted for one year of the required experience under Pattern</td>
</tr>
</tbody>
</table>
**GENERAL INFORMATION**

It is the CANDIDATE’S RESPONSIBILITY to contact the Department of Developmental Services’ Testing Office four weeks after the final filing date if he/she has not received a progress notice. Applications are available at the California Department of Human Resources’ website: [www.calhr.ca.gov](http://www.calhr.ca.gov). If you meet the requirements stated on the reverse side, you may take this examination, which is competitive. Possession of the entrance requirement does not guarantee a place on the eligible list. All candidates who pass will be ranked according to their scores.

THE STATE PERSONNEL BOARD reserves the right to revise the examination plan to better meet the needs of the service if the circumstances under which this examination was planned change. Such revision will be in accordance with civil service laws and rules and all competitors will be notified.

ELIGIBLE LISTS: Eligible lists established by competitive examination, regardless of date, must be used in the following order: 1) sub-divisional promotional, 2) departmental promotional, 3) multi-departmental promotional, 4) service-wide promotional, 5) departmental open, 6) open. When there are two lists of the same kind, the older must be used first. Eligible lists will expire in from one to four years unless otherwise stated on this bulletin.

GENERAL QUALIFICATIONS: Candidates must possess essential personal qualifications including integrity, initiative, dependability, good judgment, and ability to work cooperatively with others; and a state of health consistent with the ability to perform the assigned duties of the class. A medical examination may be required. In open examinations, investigation may be made of employment records and personal history and fingerprinting may be required.

### FAIRVIEW DEVELOPMENTAL CENTER
2501 Harbor Boulevard
Costa Mesa, CA 92626
Public: (714) 957-5121
TDD: (714) 957-5246

### PORTERVILLE DEVELOPMENTAL CENTER
26501 Avenue 140
Porterville, CA 93258
Public: (559) 782-2087
TDD: (559) 781-7822

### SONOMA DEVELOPMENTAL CENTER
15000 Arnold Drive
Eldridge, CA 95431
Public: (707) 938-6692
TDD: (707) 938-6200

### CANYON SPRINGS COMMUNITY FACILITY
69-696 Ramon Rd.
Cathedral City, CA 92334
Public: (760) 770-6260
TDD: (760) 770-2590
The **COMMUNITY PROGRAM SPECIALIST II (CPS II)** examination is being administered as *Departmental OPEN, Continuous file examination for the Department of Developmental Services*. This is a *Training and Experience (T&E) examination* and consist solely of a *Supplemental Application* and accounts for 100% of the examination. **Applicants successful in the examination will be placed on an eligible list, which will be used to fill vacancies at DDS, headquarters and Developmental Centers.**

The examination is designed to elicit a range of specific information regarding each candidate’s knowledge, skills and abilities to successfully perform the duties of the CPS II classification. The score a candidate receives is based upon an evaluation of the responses provided in the Supplemental Application. The examination utilizes a predetermined rating criteria and an established rating scale.

Applicants **MUST read and follow the directions on the following pages and complete and submit the required documents for acceptance into the examination.** The information you provide on the Supplemental Application may be used for any portion of the selection and/or recruitment process.

**WHO SHOULD APPLY?**

Applicants meeting the **minimum qualifications** of the classification (located on the examination bulletin),

**HOW TO APPLY?**

1. **Complete and Print**
   - Supplemental Application - located on the following pages
   - Standard State Application (STD. 678) – located at [https://www.jobs.ca.gov/Public/StateForms.aspx](https://www.jobs.ca.gov/Public/StateForms.aspx)

2. **Submit to:**
   Department of Developmental Services  
   1600 Ninth Street, MS-Q  
   Sacramento, CA 95814  
   Attention: Peggie McQuillan

**Contact Information:** After reading the entire *Examination Bulletin* and *Supplemental Application*, if you have questions contact Peggie McQuillan at 916-322-7790 or peggie.mcquillan@dds.ca.gov.
Please read the instructions prior to proceeding to the "Supplemental Application" examination. This Supplemental Application consists of three "SCALES". Utilizing the THREE SCALES (A-C) below, rate each job-related task statement utilizing SCALES A & B and assign one reference code from SCALE C. You will assign only one rating/code from each of the three scales for every task statement.

The three scales include; two Rating Scales (Scale A & B) and one Reference Code (Scale C). If any of the scales are left blank your supplemental application will not be accepted and you will be disqualified from the exam.

SCALE A - LEVEL of Experience/Training/Education)

Instructions: In Scale A – (Rating 1-5), assign one rating for the LEVEL of Experience (Training and/or Education) you have performing a specific job-related task. You may also refer to formal education, training and/or on the job experience (paid and/or volunteer).

Scale A: (Ratings 1-5)
1 = NO work experience, training and formal education
2 = Have acquired training and/or formal education ONLY
3 = Have work experience and/or on the job training ONLY
4 = Have work experience, training and/or formal education
5 = Have work experience in a supervisory capacity and training and/or formal education

SCALE B – LENGTH of Time

Instructions: In Scale B – (Rating 1-5), assign one rating for the Length of time you have performed and/or received training in a specific job-related task on the following pages.

Scale B: (Ratings 1-5)
1 = NO work experience, training and formal education
2 = Less than 1 year work experience, training and/or formal education
3 = 1 to 3 years work experience, training and/or formal education
4 = 3 to 5 years work experience, training and/or formal education
5 = More than 5 years work experience, training and/or formal education
SCALE C – Reference Code (A-E)

Instructions: In Scale C (reference code A-E), List reference verification information of persons that can verify your experience, training and/or education. A reference (code A-E) can include previous/current Employers, Trainers and/or Teachers/Instructors. DO NOT list personal references (friends or family members).

**Code A**
Name of Reference: 
Phone Number: __________________ E-mail: __________________
Employer Name: __________________ Employment Title: __________________

**Code B**
Name of Reference: 
Phone Number: __________________ E-mail: __________________
Employer Name: __________________ Employment Title: __________________

**Code C**
Name of Reference: 
Phone Number: __________________ E-mail: __________________
Employer Name: __________________ Employment Title: __________________

**Code D**
Name of Reference: 
Phone Number: __________________ E-mail: __________________
Employer Name: __________________ Employment Title: __________________

**Code E**
Name of Reference: 
Phone Number: __________________ E-mail: __________________
Employer Name: __________________ Employment Title: __________________
## COMMUNITY PROGRAM SPECIALIST II

### EXAMINATION

### SUPPLEMENTAL APPLICATION

<table>
<thead>
<tr>
<th>SCALES</th>
<th>SCALE A - Assign one rating</th>
<th>SCALE B - Assign one rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NO work experience, training and formal education</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Have acquired training and/or formal education ONLY</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Have work experience and/or on the job training ONLY</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Have work experience, training and formal education</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Have work experience in a supervisory capacity and training and/or formal education</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SCALE C</th>
<th>Assign one code (A-E)</th>
</tr>
</thead>
</table>

### TASK STATEMENTS

1. Experience/training/education working in a one on one setting with persons with developmental and/or mental disabilities.

2. Experience/training/education interpreting policies, standards State statutes, and/or regulations (i.e. Lanterman Act).

3. Experience/training/education in the field of developmental disabilities and the service delivery system in California.

4. Experience/training/education providing technical assistance or training to stakeholders (e.g., consumers, parents, representatives of agencies, regional centers, community service providers).

5. Experience/training/education collaborating with various stakeholders (e.g., consumers, parents, representatives of agencies, regional centers, community service providers).

6. Experience/training/education communicating verbally and in writing with various stakeholders (e.g., consumers, parents, representatives of agencies, regional centers, community service providers).

7. Experience/training/education utilizing Microsoft Office applications to create basic documents, spreadsheets and presentations.

8. Experience/training/education analyzing written policies and procedures to ensure compliance with current statutes and regulations.

9. Experience/training/education analyzing large quantities of information and/or data from a variety of sources (e.g., files, correspondence, computer databases) to ensure the accuracy of the information.

10. Experience/training/education organizing and maintaining large quantities of information and/or data from a variety of sources (e.g., files, correspondence, computer databases).

11. Experience/training/education acting as a lead over a group project.

12. Experience/training/education assisting with problem solving and determining the most effective course of action.
<table>
<thead>
<tr>
<th>SCALE A</th>
<th>Assign one rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 NO work experience, training and formal education</td>
<td></td>
</tr>
<tr>
<td>2 Have acquired training and/or formal education ONLY</td>
<td></td>
</tr>
<tr>
<td>3 Have work experience and/or on the job training ONLY</td>
<td></td>
</tr>
<tr>
<td>4 Have work experience, training and formal education</td>
<td></td>
</tr>
<tr>
<td>5 Have work experience in a supervisory capacity and training and/or formal education</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>SCALE B</th>
<th>Assign one rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 NO work experience, training and formal education</td>
<td></td>
</tr>
<tr>
<td>2 Less than 1 yr. of work experience, training and/or formal education</td>
<td></td>
</tr>
<tr>
<td>3 1-3 yrs. of work experience, training and/or formal education</td>
<td></td>
</tr>
<tr>
<td>4 3 to 5 yrs. of work experience, training and/or formal education</td>
<td></td>
</tr>
<tr>
<td>5 5+ yrs. of work experience, training and/or formal education</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SCALE C</th>
<th>Assign one code (A-E)</th>
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</thead>
</table>

**TASK STATEMENTS**

13. Experience/training/education performing work duties independently and ensuring work is completed in an accurate and timely manner.

14. Experience/training/education prioritizing workload and ensuring timelines are met.

15. Experience/training/education cooperatively performing work tasks in a team environment for the benefit of the unit.

This is the end of the Supplemental Application and concludes the examination. Please complete the following personal information and select the Developmental Center/Location(s) that you are willing to accept employment (below).

**Candidate Name:** ____________________________________________

**Phone Number:** ____________________(Home) ____________________(Work) ____________

**E-mail Address:** __________________________

Check ✓ as many Developmental Centers/Locations that you’re willing to accept employment.

- [ ] (3308) Canyon Springs, Cathedral City
- [ ] (3004) Fairview Developmental Center, Costa Mesa
- [ ] (5403) Porterville Developmental Center, Porterville
- [ ] (4907) Sonoma Developmental Center, Eldridge
- [ ] (0000) All locations within California

I certify and understand that my original signature certifies that all statements made in this Supplemental Application is true to the best of my knowledge.

______________________________
Signature

______________________________
Date