



# SUPPLEMENTAL APPLICATION

## SUPERVISING SANITARY ENGINEER

IDENTIFICATION NUMBER

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
MI

The Supervising Sanitary Engineer examination consists solely of this Supplemental Application, which will be used to evaluate your knowledge and abilities in areas that are specific to this classification. The supplemental application items give all candidates an equal opportunity to demonstrate possession of experience and significant accomplishments relative to the critical job elements of a Supervising Sanitary Engineer in the Department of Public Health. A panel of raters using a previously defined rating criterion will evaluate the responses to these items. This is a scored document and will account for 100% of your final score. A total minimum rating of 70% must be attained in order to obtain a position on the eligible list.

Answer questions completely; **incomplete responses and omitted information cannot be considered or assumed.** Resumes, letters of reference, and other materials will not be evaluated or considered as responses to items in the supplemental application. **YOUR RESPONSES ARE SUBJECT TO VERIFICATION** and should be an accurate reflection of your personal experience.

I hereby certify and understand that the information provided by me in this supplemental application is true and complete to the best of my knowledge and contains no willful misrepresentation or falsification. I further understand that this information may be verified and that, if it is discovered that I have made any false representations, I will be removed from the eligibility list resulting from this examination, and possibly dismissed from civil service.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Completed supplemental applications must be postmarked no later than **April 2, 2013**. Supplemental applications postmarked, personally delivered, or received via interoffice mail after this date will not be accepted and will result in elimination from the examination.

Return your completed application to: Department of Public Health  
Selection & Certification Unit  
MS 1700-1702  
P.O. Box 997378  
Sacramento, CA 95899-7378  
Attn: Shani Stevens

Please ensure that your return envelope has adequate postage. Facsimiles (FAX) or electronic versions (email) will not be accepted, under any circumstance.

## **GENERAL INFORMATION:**

The examination package must include responses to the supplemental items, signed affidavit (first page of supplemental application), and completed Conditions of Employment.

Before you return the examination materials, you are advised to keep a copy of your responses.

It is your responsibility to notify the Department of Public Health, Selection & Certification Unit, in writing, of any changes in your address during the examination process to avoid any delay in providing examination information. All correspondence must include your name and the examination title.

Send correspondence to:

Department of Public Health  
Selection & Certification Unit  
MS 1700-1702  
P.O. Box 997378  
Sacramento, CA 95899-7378  
Attn: Shani Stevens

## **EXAMINATION INFORMATION:**

The examination for Supervising Sanitary Engineer consists of a Supplemental Application that is weighted 100 %. Applicants are required to respond to the following seven supplemental items. These supplemental items are designed to identify job achievement in specific areas that demonstrates ability to successfully perform at the Supervising Sanitary Engineer level.

## **INSTRUCTIONS:**

When responding to the supplemental items, please follow these guidelines:

- Responses must be typewritten or generated by word processing on 8½" X 11" paper.
- Responses must be limited to two (2) pages per question.
- Responses must be typed in 12 pt., Arial font.
- Make sure your responses are complete, specific, clear, and concise.
- Answer each numbered item separately, indicating the corresponding item number for each response. You may include multiple responses on a single page.
- Include place of employment, pertinent dates, duties performed, etc., when responding to items.

## **SUPPLEMENTAL ITEMS:**

Recognizing that candidates have had different experience related to critical job elements, these supplemental items are intended to give you an opportunity to discuss a broad range of experience that demonstrates your possession of the qualifications and readiness for a Supervising Sanitary Engineer position in the Department of Public Health. Answer all questions for which you possess experience. Provide specific information and relevant examples from your background. Please keep in mind that omitted information cannot be assumed by the panel of raters.

Responses to the supplemental items will be assessed based on predetermined job-related rating criteria. In appraising the relative qualifications of candidates, consideration will be given to the extent and type of pertinent experience and education over and above that required under the minimum qualifications.

## SUPPLEMENTAL APPLICATION EXAMINATION QUESTIONS:

1. Describe your ability and experience in assisting your first level supervisor to resolve staffing performance concerns, in the following areas:
  - Arriving late to work.
  - Willingness to follow assigned projects
  - Inability to accept constructive feedback.
2. As a Supervising Sanitary Engineer you are responsible for multiple districts. Each district has its own first level supervisor.

There is currently a district with a vacant first level supervisor position that is not located in the same office as you, which leaves staff with no direct supervision.

Describe how you would supervise staff at this location.

3. As a Supervising Sanitary Engineer, you receive a request from a staff engineer to review their probation report. The report was prepared by one of your first level supervisors. The report documents inadequate work, attendance problems, and negative attitude. The staff engineer feels the appraisal is not justified.

Describe your responsibilities as a second level supervisor and what specific actions you would take in this situation.

4. As a Supervising Sanitary Engineer, you receive a call from the Department's Emergency Response Duty Officer in response to an incident called in that reportedly impacts a drinking water supply. The Emergency Response Duty Officer has been unable to contact your first level supervisor that oversees the water system involved. The following details are provided to you:

- A raw sewage line in the Community of Happy Town has ruptured and the estimated release is 2,500 gpm of raw sewage directly into the Lazy River which is 30 feet away from the location of the ruptured line. The release has been occurring for 10 hours and crews on-site have been unable to make the necessary repairs due to muddy conditions at the location of the break.
- The Lazy River is the major source of domestic supply for the City of Pretendville. There is no information available regarding the treatment facilities used by Pretendville.
- There are no other reported users of the Lazy River below Pretendville.

Describe your responsibilities as a second level supervisor and what specific actions you would take in this situation.

5. One of your first level supervisors is reviewing a proposal by a water district to implement a recycled water project for non-potable reuse, including dual plumbed use sites.

Please describe the guidance you would give to a first level supervisor in evaluating and determining the appropriate conditions on this proposal.

6. A water system has been invited to submit a funding application for a contamination problem. A source for the system exceeds a primary drinking water standard. The system proposes to construct a treatment facility to address the problem.

Please describe how you would determine if the proposed solution is appropriate.

7. As a Supervising Sanitary Engineer, you are responsible for providing equal employment opportunities for all, and ensuring the work environment is free from discrimination and harassment of any kind.

Describe how you would ensure equal employment opportunities and a discrimination and harassment free work environment.

**CONDITIONS OF EMPLOYMENT (631)**

**Examination Title:     Supervising Sanitary Engineer**

**Name:** \_\_\_\_\_  
(Print: First, Middle initial, Last)

**FFD:**   April 2, 2013

**Identification Number:** \_\_\_\_\_

If you are successful in your examination your name will be placed on the active employment list and certified to fill vacancies according to the conditions you specify on this form. If you are unwilling to accept work or do not reply promptly to communications your name will be placed on the inactive list.

---

**Locations in which you are willing to work:**

Please check your choices - you will not be offered a job in locations not checked...if more than 15 checks made, you may be considered available for work anywhere in the state.

\_\_\_\_\_ (5) **ANYWHERE IN THE STATE (IF CHECKED, NO FURTHER SELECTION NECESSARY.)**

\_\_\_\_\_ 8004 **ANYWHERE IN THE NORTHERN REGION OR**  
**MARK NORTHERN REGION COUNTY CHOICES:**  
\_\_\_\_\_ 4500 Shasta

\_\_\_\_\_ 8001 **ANYWHERE IN THE CENTRAL REGION OR**  
**MARK CENTRAL REGION COUNTY CHOICES:**  
\_\_\_\_\_ 2700 Monterey                    \_\_\_\_\_ 4900 Sonoma  
\_\_\_\_\_ 0700 Contra Costa            \_\_\_\_\_ 3400 Sacramento  
\_\_\_\_\_ 1000 Fresno                    \_\_\_\_\_ 3900 San Joaquin

\_\_\_\_\_ 8011 **ANYWHERE IN THE SOUTHERN REGION OR**  
**MARK SOUTHERN REGION COUNTY CHOICES:**  
\_\_\_\_\_ 3000 Orange                    \_\_\_\_\_ 4200 Santa Barbara  
\_\_\_\_\_ 1500 Kern                        \_\_\_\_\_ 3700 San Diego  
\_\_\_\_\_ 3600 San Bernardino        \_\_\_\_\_ 1900 Los Angeles

**TYPE OF EMPLOYMENT DESIRED:**

\_\_\_\_\_ Permanent                    \_\_\_\_\_ Limited Term                    \_\_\_\_\_ Full Time  
\_\_\_\_\_ Part Time (regular hours less than 40)                    \_\_\_\_\_ Intermittent (on call)

It is your responsibility to notify the Department of Public Health, Examination Unit, of any changes in your address or availability for employment. All correspondence must include your name and examination title.

**DISCLOSURE OF INTERVIEW QUESTIONS TO OTHER COMPETITORS IS PROHIBITED AND MAY LEAD TO DISQUALIFICATION IF DISCOVERED.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

---