



# ALAMEDA COUNTY OFFICE OF EDUCATION

*Position Announcement* SHEILA JORDAN, SUPERINTENDENT

**NOTICE OF OPEN COMPETITIVE EXAMINATION FOR:**

**NUTRITION EDUCATION SITE SUPERVISOR (.70 FTE)**

**MONTHLY SALARY RANGE: \$2,688.89 – \$3,048.58\*** (4 Steps/Range 10, MGMTCL)

\*Salary is pro-rated for less than full-time employment.

***In Addition to Salary:** Undesignated fringe benefit allotment of \$567/month (will be pro-rated for less than full-time employment; plus dental coverage, life insurance, and membership in the Public Employees' Retirement System*

*The Nutritional Education Site Supervisor is a specially funded classified position pursuant to Ed. Code 45117. The displacement rights for layoff are limited to this classification. Displaced incumbents will be individually assessed for related skills in like positions within the occupational group. Recommendations for qualifying any incumbent in an alternate classified position will be made to the Personnel Commission for approval.*

**THE POSITION:** Under the direction of the Project Coordinator and the Program Manager, organize the day-to-day operations of Project E.A.T. Program. (Educate, Act, Thrive)

**TYPICAL DUTIES:** Supervises, trains, and evaluates Nutrition Education Assistants. Supports site staff with site visits, lesson observation, and professional development/coaching sessions. Participates in recruitment, interviews, and site placement of new site staff. Acts as liaison between ACOE, community members, and the school site staff, school district administrators and personnel. Communicates relevant protocols, procedures, and project goals to staff from ACOE. In collaboration with facilities and other district staff, ensures that school site project activities comply with established laws, codes, rules and regulations. Assists in the preparation, facilitation, and assessment of monthly staff meetings and staff development. Coordinates and modifies nutrition education lessons for the Nutrition Connection in the Garden program. Integrates grade level standards with nutrition education lessons. Oversees and supports Nutrition Education Assistants as they conduct a variety of during and after-school functions including but not limited to parent nutrition at Back to School Nights, Open Houses and Family Garden Days. Establishes and maintains contact with community organizations, parents, and the public to promote nutrition based involvement in school gardens and other activities. Maintains and submits all grant required documentation. Reviews all documentation from staff for accuracy. Monitors and participates in program evaluation activities. Perform related duties as required.

**QUALIFICATIONS:** Bachelor's degree in a related field. Three (3) years increasing responsibility in an outdoor educational or garden based program providing direct service to youth and or equivalent combination of education and experience including a minimum of six (6) months of supervisory experience is required. Valid California driver's license.

**LOCATION:** Alameda County Office of Education, 313 West Winton, Hayward, CA

**APPLICATION DEADLINE: Wednesday, February 17, 2010**

**APPLICATION SCREENING & EXAMINATION PROCESS:** All applicants must attend and pass the written examination (details shown below). Applications will then be screened, based on established minimum qualifications. The top applicants, depending on the level and depth of experience, will be notified of the date, time, and place of the oral examination.

- Application and Résumé Appraisal.....PASS/FAIL**
- Technical Oral Interview.....Weighted 100% (Week of February 22, 2010)**

**TO OBTAIN AN APPLICATION FORM, ACCESS ALAMEDA COUNTY OFFICE OF EDUCATION JOB OPPORTUNITY WEBSITE:**  
[www.acoe.org/jobs](http://www.acoe.org/jobs)

**Contact Human Resources for additional information:**  
 Alameda County Office of Education, 313 West Winton Avenue, Room 173, Hayward, CA 94544-1136  
 Phone Number: (510) 670-4267 • Fax: (510) 670-4103

## ADDITIONAL INFORMATION FOR APPLICANTS

**HOW TO APPLY:** Applicants who possess the minimum qualifications listed in this bulletin must complete and submit an official application form by the application deadline. Applications may be submitted by mail if they are in the Human Resources Office by 5:00 p.m. on the final filing date. All required documents must be submitted with the application.

**MERIT SYSTEM:** The Merit System Law as prescribed by the California Education Code governs all classified (non-teaching) employees. This means that employees are selected on the basis of merit and fitness and that there is no discrimination because of race, color, national origin, sex, sexual orientation, religious or political affiliations, marital status, age, or disability.

**EXAMINATION PROCEDURES:** The examination will consist of test parts that relate to job performance. These may include a written examination, a skills performance test, a comparative evaluation of education and experience, and/or an oral examination before a Qualifications Appraisal Board. All oral examinations are electronically recorded. An overall passing score of 70 is required for placement on the eligibility list.

**ELIGIBILITY AND APPOINTMENTS:** Names of successful applicants are placed on an eligibility list in order of their final scores. The persons with the three highest ranks are certified to each vacancy. The department with the current vacancy may appoint one of these eligibles. Those not selected will have their names returned to the eligibility list, and may be certified to the next vacancy. Eligibility lists are in effect for one year unless otherwise stated.

**HEALTH AND CHARACTER INVESTIGATION:** Candidates selected for appointment will be required to file evidence of having had a tuberculosis examination with a negative result preceding the starting date of employment. A list of local facilities offering tuberculosis examinations is available from the Human Resources Office. California law also requires public educational employees to be fingerprinted for the purpose of a confidential background investigation. The Alameda County Office of Education also may obtain confidential references from former employers.

**VETERAN'S PREFERENCE:** Veterans of military service, who have been discharged or released under conditions other than dishonorable and who have 30 days or more of service, may obtain an additional five points (disabled veterans an additional ten points), added to their composite qualifying score by submitting proof of service (DD-214) to the Human Resources Office at the time of application. Disabled veterans must submit proof of current compensable disability.

**SALARIES:** All salaries as stated are based on present information and are subject to change. Appointments are made at the minimum salary shown and increases are granted at intervals based on satisfactory service.

**RETIREMENT PLAN:** Employees contribute to the California Public Employees' Retirement System and to Social Security. The Alameda County Office of Education matches each contribution. The employee may withdraw his/her CalPERS contributions in full with interest upon leaving the job if he/she does not retire.

**UNION DUES:** Persons appointed to positions other than Management, Supervisory, or Confidential are represented by California School Employees Association (CSEA), Chapter 615 and must have union dues or service fee deducted from their wages accordingly.

**IMMIGRATION AND REFORM ACT:** In compliance with the Immigration and Reform Act of 1986, the Alameda County Office of Education will only hire those individuals who are legally authorized to work in the United States.

**AMERICANS WITH DISABILITIES ACT:** Auxiliary aids and services include a wide range of services and devices that promote effective communication for individuals with disabilities. If you require such assistance, please notify this office as soon as possible. We will make every effort to give primary consideration to expressed preferences, or provide equally effective means of communication to ensure equal access to Alameda County Office of Education programs and events.



# Application for Employment — Classified Personnel

POSITION APPLYING FOR: \_\_\_\_\_

DATE: \_\_\_\_\_

**IMPORTANT INSTRUCTIONS:** Please TYPE or PRINT in INK. Answer all questions completely. Incomplete applications will not be considered.

NAME (Last)		(First)	(Middle)
ADDRESS		PHONE(S)	
CITY, STATE, and ZIP CODE		Home _____	
E-MAIL ADDRESS		Business _____	
		Other _____	

## EDUCATION AND OCCUPATIONAL TRAINING

	Name of Institution	City and State	Graduated Degree/Certificate* (indicate type degree)
Senior High			
College			
Graduate Work			
Extension Courses			
Special Training			

\*Qualifications will be verified. **Attach photocopy of degrees/certificates.**

Have you ever been dismissed or asked to resign from any position? . . . . .  Yes  No

Typing Speed: \_\_\_\_\_ w.p.m.

May we contact your present employer as to your qualifications? . . . . .  Yes  No

MS Word: \_\_\_\_\_

Have you ever been convicted of any offense in any jurisdiction other than a traffic infraction? . . . . .  Yes  No

<b>CERTIFICATION</b> <b>VERIFIED – For HR Use Only</b>
Typing: _____
Word: _____

Will you accept temporary work? . . . . .  Yes  No

**Which business machines can you operate? Please check :**

- Calculator  Fax Machine
- Photocopier  Scanner
- Computer/PC Hardware (describe): \_\_\_\_\_
- Computer/PC Software (describe): \_\_\_\_\_
- Other (describe): \_\_\_\_\_

**Driver's License:**  Yes  No If YES:  
State \_\_\_\_\_ Number \_\_\_\_\_

**Bilingual:**  Yes  No If YES:  
Language \_\_\_\_\_

**War Veteran:**  Yes  No If YES:  
Dates: From \_\_\_\_\_ To \_\_\_\_\_  
(If yes, be sure to attach DD-214)

**Do you have relatives who work for the Alameda County Office of Education?**

Yes  No If YES:  
Name \_\_\_\_\_  
Location \_\_\_\_\_  
Relationship \_\_\_\_\_

**Alameda County Office of Education employee?**  
 Yes  No If YES:  Present  Former  
Dates: From \_\_\_\_\_ To \_\_\_\_\_

**EMPLOYMENT HISTORY** — List all employment (full- and part-time). List your most recent employment first. If additional space is needed, you may attach additional sheets. *This section MUST BE COMPLETED IN FULL even if you attach a résumé or other employment history information.*

FROM \_\_\_\_\_ TO \_\_\_\_\_ TITLE OF YOUR POSITION \_\_\_\_\_  
MONTH YEAR MONTH YEAR DUTIES

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

NAME & TITLE OF YOUR SUPERVISOR \_\_\_\_\_

PHONE NUMBER OF YOUR SUPERVISOR \_\_\_\_\_

NUMBER SUPERVISED \_\_\_\_\_ SALARY PER MONTH \$ \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_ TITLE OF YOUR POSITION \_\_\_\_\_  
MONTH YEAR MONTH YEAR DUTIES

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

NAME & TITLE OF YOUR SUPERVISOR \_\_\_\_\_

PHONE NUMBER OF YOUR SUPERVISOR \_\_\_\_\_

NUMBER SUPERVISED \_\_\_\_\_ SALARY PER MONTH \$ \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_ TITLE OF YOUR POSITION \_\_\_\_\_  
MONTH YEAR MONTH YEAR DUTIES

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

NAME & TITLE OF YOUR SUPERVISOR \_\_\_\_\_

PHONE NUMBER OF YOUR SUPERVISOR \_\_\_\_\_

NUMBER SUPERVISED \_\_\_\_\_ SALARY PER MONTH \$ \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_ TITLE OF YOUR POSITION \_\_\_\_\_  
MONTH YEAR MONTH YEAR DUTIES

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

NAME & TITLE OF YOUR SUPERVISOR \_\_\_\_\_

PHONE NUMBER OF YOUR SUPERVISOR \_\_\_\_\_

NUMBER SUPERVISED \_\_\_\_\_ SALARY PER MONTH \$ \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

**YOUR NAME:** \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_  
MONTH YEAR MONTH YEAR

TITLE OF YOUR POSITION \_\_\_\_\_  
DUTIES \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

NAME & TITLE OF YOUR SUPERVISOR \_\_\_\_\_

NUMBER SUPERVISED \_\_\_\_\_ SALARY PER MONTH \$ \_\_\_\_\_

PHONE NUMBER OF YOUR SUPERVISOR \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

**PERSONAL REFERENCES** — List three people who can vouch for your character and ability.  
***Do not list relatives or former employers.***

- 1. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_
- 2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_
- 3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Can you, after employment, submit verification of your legal right to work in the United States?  Yes  No

***READ CAREFULLY BEFORE SIGNING***

I HEREBY CERTIFY UNDER PENALTY OF PERJURY that all statements made hereon are true and correct and authorize investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application.

My signature below authorizes the Alameda County Office of Education to conduct a background investigation and authorizes release of information in connection with my application for employment. Further, I hold harmless any individual or firm for any information that it may provide in this investigation which may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release Alameda County Office of Education and the reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: law enforcement agencies and information for any locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

— THE ALAMEDA COUNTY OFFICE OF EDUCATION IS AN EQUAL OPPORTUNITY EMPLOYER —



**ALAMEDA COUNTY OFFICE OF EDUCATION**  
**SHEILA JORDAN, SUPERINTENDENT**  
 313 WEST WINTON AVE. • HAYWARD, CA 94544-1136 • (510) 887-0152  
 www.acoe.org

TO THE APPLICANT:

On the Application for Employment is the question: *“Have you ever been convicted of any offense in any jurisdiction other than a traffic infraction?”* If you have been convicted of a criminal offense other than a traffic infraction, you must provide the information requested below. However, due to State laws, we cannot employ, or retain in employment, any person convicted of any sex offense as defined in Section 45304 and 44010 of the Education Code or any narcotics offense as defined in Section 44011 of the Education Code (this includes marijuana).

You are required to certify under penalty of perjury that all statements made in your application are true. By signing the application form, you are certifying that all statements are true and complete and acknowledging that you understand that any misstatement will subject you to disqualification or dismissal. Applicants selected for employment will be fingerprinted and a criminal record check will be made. Convictions not declared will result in your dismissal.

**If you have answered “yes” to the question, “Have you ever been convicted of any offense in any jurisdiction other than a traffic infraction?” on the application form, please provide the information requested below:**

<b>NAME</b>	<b>PHONE</b>	<b>POSITION APPLYING FOR</b>

<b>DATE</b>	<b>CODE No.</b> P = Penal Code HW = Health & Safety Code VC = Vehicle Code	<b>CHARGE</b> <i>( DESCRIBE COMPLETELY )</i>	<b>CITY &amp; COURT</b>	<b>DISPOSITION</b>

If you have NOT ever been convicted of any offense in any jurisdiction other than a traffic infraction, check here:  
 Not Applicable

***Failure to provide complete information by the final filing date will be considered as a withdrawal of your application.***

I CERTIFY, UNDER PENALTY OF PERJURY, that all statements are true and I understand and agree that any misstatement or omission will result in my immediate dismissal.	
_____ <b>SIGNATURE (in full)</b>	_____ <b>DATE</b>



## VOLUNTARY EMPLOYEE/APPLICANT IDENTIFICATION

Section 1233 of the California Government Code permits public employers to solicit from employees and applicants a voluntary description of their sex and racial/ethnic group membership. Additional voluntary information provided will assist the Office in accurately compiling required statistical reports for federal and state agencies. None of the information will be used to discriminate against or give preference to any individual in any personnel transaction.

**Position applying for:** \_\_\_\_\_

NAME \_\_\_\_\_  MALE  FEMALE

DRIVER'S LICENSE No. \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

**RACIAL/ETHNIC GROUP** — Check only ONE applicable category below. If more than one applies, choose the one category which best identifies your racial/ethnic background. (A married woman should indicate her own ancestry rather than that of her husband.)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> African-American           | <input type="checkbox"/> Guamanian              | <input type="checkbox"/> Samoan                  |
| <input type="checkbox"/> American Indian or Alaskan | <input type="checkbox"/> Hawaiian               | <input type="checkbox"/> Tahitian                |
| <input type="checkbox"/> Asian                      | <input type="checkbox"/> Hispanic/Latino        | <input type="checkbox"/> Vietnamese              |
| <input type="checkbox"/> Asian Indian               | <input type="checkbox"/> Japanese               | <input type="checkbox"/> White                   |
| <input type="checkbox"/> Other Asian                | <input type="checkbox"/> Korean                 | <input type="checkbox"/> Multiple or No Response |
| <input type="checkbox"/> Cambodian                  | <input type="checkbox"/> Laotian                | <input type="checkbox"/> Other: _____            |
| <input type="checkbox"/> Chinese                    | <input type="checkbox"/> Pacific Islander       |  |
| <input type="checkbox"/> Filipino                   | <input type="checkbox"/> Other Pacific Islander |  |

**RECRUITMENT** — As an evaluation of this Office's recruitment sources, indicate below how this position was communicated to you:

- |   |   |
|---|---|
| <input type="checkbox"/> NEWSPAPER — Name _____     | <input type="checkbox"/> COMMUNITY GROUP — Name _____ |
| <input type="checkbox"/> RADIO — Name _____         | <input type="checkbox"/> GOV'T AGENCY — Name _____    |
| <input type="checkbox"/> OUR HUMAN RESOURCES OFFICE | <input type="checkbox"/> FRIEND, RELATIVE             |
| <input type="checkbox"/> AN EMPLOYEE OF THIS OFFICE | <input type="checkbox"/> INTERNET                     |
| <input type="checkbox"/> OTHER — Specify _____      |   |



The Alameda County Office of Education (ACOE) is committed to providing reasonable accommodations to individuals with disabilities who may wish to use its facilities. If you have a disability and need assistance in using ACOE's facilities, please contact the Director of Human Resources, (510) 670-7703. Your inquiry will remain confidential.