CONTRA COSTA COUNTY
ANIMAL CENTER TECHNICIAN BJWC-2014A
SUPPLEMENTAL QUESTIONNAIRE

A completed supplemental questionnaire is required for this position. An application submitted without the supplemental questionnaire is considered incomplete and will therefore be disqualified.

Your responses to the questions below will be used to determine your eligibility to participate in the Animal Center Technician written examination. Please respond to all questions based on what is indicated in the minimum qualifications.

Resumes may be attached, but not submitted in lieu of completing the supplemental questionnaire. Do not answer any of the questions by indicating "**see attached resume**."

A completed supplemental questionnaire and other supportive documentation can be faxed to (925) 335-1797; or scanned and attached to your electronic "online" application prior to submission deadline. All documents must be received or postmarked by the final filing date, **April 4, 2014.** **Reference Animal Center Technician (BJWC-2014A) and include your name on all submitted documents.**

PRINT NAME:_____SSN(last4digits):_____

1. Per Personnel Management Regulation (PMR) rule 718, this eligible list may be used for alternative certification purposes to fill other vacancies such as **Animal Services Utility Worker**. If you are hired permanently on an alternate certification, your name will be removed from the Animal Center Technician list. Would you like to be referred on alternate certifications?

   ☐ YES
   ☐ NO – **If responded no, your name will be referred ONLY for Animal Center Technician positions.**

2. For information and details on the Animal Services Utility Worker job description, click on the job title link below.

   Animal Services Utility Worker

3. Do you possess a valid California driver's license or an out-of-state valid motor vehicle operator's license?

   ☐ Yes
   ☐ No

4. Do you possess a high school diploma, G.E.D equivalency, or high school proficiency certificate?

   ☐ Yes
   ☐ No

_____
Printed Name

_____
Signature

_____
Date