ALAMEDA COUNTY
CONGESTION MANAGEMENT AGENCY

1333 BROADWAY, SUITE 220 • OAKLAND, CA 94612 • PHONE: (510) 836-2560 • FAX: (510) 836-2185
E-MAIL: mail@accma.ca.gov • WEB SITE: accma.ca.gov

Job Announcement

INFORMATION TECHNOLOGY SPECIALIST

The Alameda County Congestion Management Agency (CMA) is seeking a qualified individual for the position of Information Technology Specialist. The CMA is a countywide transportation planning and programming agency responsible for the congestion management program, the long-range county transportation plan, and programming of projects for state and federal funding. The CMA is a transportation agency with a staff of twenty and an annual operating budget of approximately $40 million. Alameda County is the sixth largest county in California with an economically and culturally diverse population of 1.4 million.

SALARY RANGE:	**$84,100.00 to $109,400.00**
APPLICATION DEADLINE:	3:00pm, Friday, March 17, 2006 CMA office (510) 836-2560, and at the CMA website: www.accma.ca.gov. *Only resumes with completed applications will be considered. No faxes.*
SEND APPLICATION TO:	**Christina Muller** **Administrative Manager** **Alameda County CMA** **1333 Broadway, Suite 220** **Oakland, CA 94612**

SUMMARY

Under the general supervision of the Deputy Director of Programming and Projects, the Information Technology Specialist acts as the lead professional staff person responsible for the oversight of on-site and project specific information technology, including equipment, hardware, software and other related services specific to the organization and project needs.

ESSENTIAL DUTIES AND RESPONSIBILITIES

- Assist the Deputy Directors and Administrative Manager in network technology, operations and maintenance.
- Manage operations & maintenance of computers and network equipment
- Provide support for SMART Corridors transportation network
- Manage network design for the CMA and specialized projects
- Manage software design for the CMA and specialized projects

- Financial, budget and contract management
- Project development and processes
- Maintain the CMA network and website
- Assess and troubleshoot problems that arise, including follow up and communicating with consultants/vendors related to computers, network and web system management services
- Monitor project progress and budgets as well as staff and consultant utilization
- Develop data, information, explanations, and other expert advice as needed by agency management, the Board, and its advisory groups
- Represent the A.C.C.M.A. before other agencies at meetings and presentations
- On a project-by-project basis, supervise temporary and provisional employees as well as consultants

SUPERVISORY RESPONSIBILITIES

None

QUALIFICATIONS

To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- Extensive knowledge of information technology, LAN/WAN integrator, network planning web system management
- Knowledge and understanding of the government-funding environment and processes
- Ability to effectively prepare and monitor budgets on a project-by-project basis
- Knowledge and understanding of financial and budgetary analysis
- Knowledge and understanding of local transportation needs and problems
- Analysis and problem solving skills
- Decision making skills
- Leadership skills
- Supervisory skills
- Excellent written and verbal communication skills
- Flexibility

EDUCATION and/or EXPERIENCE

Minimum of a Bachelor of Science degree in Business, Engineering, Computer Science or related field.

Minimum of 6 years full time experience in information technology, network planning and web system management or related field.

California

Application for Employment

Please Print

Alameda County CMA
1333 Broadway, Suite 220
Oakland, CA 94612
(510) 836–2560

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name _____ Social Security # ___ - ___ - ___
Last First Middle

Address _____
Street City State Zip Code

Telephone # ( ) _____ Mobile/Beeper/Other Phone # ( ) _____ E-mail Address _____

Position(s) applied for _____ Date of application ___/___/___

Are you able to perform the essential functions of the position for which you are applying, with or without reasonable accomodations? ☐ Yes ☐ No

Referral Source (Please check the appropriate category and name the source)

- ☐ Walk-in _____
- ☐ Employee _____
- ☐ Advertisement _____
- ☐ Company's Website _____
- ☐ Other Internet _____
- ☐ School _____
- ☐ Job Fair _____
- ☐ Staffing Agency _____
- ☐ Government Employment Agency _____
- ☐ Other _____

If necessary, best time to call you at home is ____ : ____ AM PM

May we contact you at work? ☐ Yes ☐ No

If **yes**, work number and best time to call:
( ) _____ ____ : ____ AM PM

If you are under 18 and it is required, can you furnish a work permit? ☐ Yes ☐ No

If **no**, please explain _____

Have you submitted an application here before? ☐ Yes ☐ No

If **yes**, give date(s) and position(s) _____

Have you ever been employed here before? ☐ Yes ☐ No

If **yes**, give dates From ___/___/___ To ___/___/___

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Date available for work ___/___/___

What is your desired salary range or hourly rate of pay?

$ _____ Per _____

Type of employment desired: ☐ Full-Time ☐ Part-Time ☐ Educational Co-Op ☐ Seasonal ☐ Temporary

Will you relocate if job requires it? ☐ Yes ☐ No

Will you travel if job requires it? ☐ Yes ☐ No

If they have been explained to you, are you able to meet the attendance requirements of the position? ☐ N/A ☐ Yes ☐ No

Will you work overtime if required? ☐ Yes ☐ No

If **no**, please explain _____

If driving is a required function of the job for which you are applying, provide driver's license number:

_____ State _____

Have you ever been bonded? ☐ Yes ☐ No

NOTE: Answering "yes" to the following questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. (In answering these questions, do not include minor traffic infractions and convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in any pre-trial or post-trial diversion programs, and marijuana-related offenses that occurred over two years ago.)

Have you ever pled "guilty" or "no contest" to, or been convicted of a misdemeanor or felony? ☐ Yes ☐ No

If **yes**, please give the date and details:

_____

Have you ever been arrested for any matters for which you are out on bail or on your own recognizance pending trial? ☐ Yes ☐ No

If **yes**, please give the date and details:

_____

Employment History

Starting with your most recent employer, provide the following information.

Employer | Telephone # ( )

Street address | City | State

Starting job title/final job title

Immediate supervisor and title (for most recent position held)

May we contact for reference? ☐ Yes ☐ No ☐ Later

Why did you leave?

Dates employed: Month / Year to Month / Year

Compensation (Starting)

☐ Hourly ☐ Salary $ per

Commission/Bonus/Other Compensation $

Compensation (Final)

☐ Hourly ☐ Salary $ per

Commission/Bonus/Other Compensation $

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

Employer | Telephone # ( )

Street address | City | State

Starting job title/final job title

Immediate supervisor and title (for most recent position held)

May we contact for reference? ☐ Yes ☐ No ☐ Later

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Compensation (Final)

☐ Hourly ☐ Salary $ per

Commission/Bonus/Other Compensation $

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability. _____

_____

_____

_____

If not addressed on previous page, have you ever been fired or asked to resign from a job?..... ☐ Yes ☐ No

If **yes**, please explain _____

_____

_____

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

_____

_____

_____

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

☐ Word Processing _____ Years: _____ ☐ Internet _____ Years: _____

☐ Spreadsheet _____ Years: _____ ☐ Other _____ Years: _____

☐ Presentation _____ Years: _____ ☐ Other _____ Years: _____

☐ E-mail _____ Years: _____ ☐ Other _____ Years: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors.
If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known
			( )	
			( )	
			( )	

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, sexual orientation, veteran/reserve national guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, sexual orientation, veteran/reserve national guard or any other similarly protected status.

_____

_____

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers?

☐ Yes ☐ No ☐ Not Applicable

If **yes**, please explain: _____

_____

Is there any other job-related information you want us to know about you? _____

_____

_____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct. I understand that any offer of employment I receive may be contingent on passing a job-related physical examination, and/or satisfactory completion of a background examination.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ **Date** ___/___/___

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Affirmative Action Voluntary Information

Completion of information below is voluntary.

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is *not* a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

Please Print

Position(s) applied for _____ Date ___/___/___

Referral Source

- ☐ Walk-in
- ☐ Employee
- ☐ Advertisement – Source _____
- ☐ Government Employment Agency
- ☐ Relative
- ☐ Private Employment Agency
- ☐ School
- ☐ Other _____

Name of person who referred you (if applicable) _____

Applicant Information

Name _____ Telephone # (_____) _____
Last First Middle

Address _____
Street City State Zip Code

☐ Male ☐ Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- ☐ White (not of Hispanic origin)
- ☐ American Indian/Alaskan Native
- ☐ Black (not of Hispanic origin)
- ☐ Asian/Pacific Islander
- ☐ Hispanic
- ☐ Multiracial (having parents of different races)

This identification group is recognized only in the state of Michigan.

For Administrative Use Only

Position(s) applied for ☐ Available ☐ Not Available

Other positions considered for _____

_____

Hired ☐ Yes ☐ No

Position hired for _____ Date of hire ___/___/___

_____

From the EEO job classifications listed below, which one best describes the position filled?

- ☐ Officials and Managers
- ☐ Professionals
- ☐ Technicians
- ☐ Sales Workers
- ☐ Office and Clerical Workers
- ☐ Craft Workers (skilled)
- ☐ Operatives (semi-skilled)
- ☐ Laborers (unskilled)
- ☐ Service Workers

Notes _____

_____

Completed by _____ Date ___/___/___

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