STATE OF CALIFORNIA

Training & Experience Examination Instructions

EXAMINATION INFORMATION

All parts of this examination belong to the California Highway Patrol

HOW TO COMPLETE YOUR TRAINING & EXPERIENCE EXAMINATION

- Read the instructions on the Training & Experience Examination carefully before you begin.
- Please note that your overall score will be determined solely by the information you provide on this Training & Experience Examination. Information on your application will not be used to determine your final score.
- Please utilize the checklist below to complete the 4 sections in the examination.

☐ Section 1: Employment/Education Verification

- Provide any previous and current Employment and/or Education information.
- Use the Employment/Education Verification information to complete Section 2.

☐ Section 2: Task Ratings

- EXPERIENCE/EDUCATION column: Using the Experience/Education rating scale identify the corresponding number for the amount of time, based on your experience and/or education that you have performed the item, and write that number in the Experience/Education box. Please complete this for each item.
- FREQUENCY column: Using the Frequency rating scale, identify the corresponding number of times you have performed the item, and write the number in the Frequency box. Please complete this for each item.
- VERIFICATION column: Mark the "Emp" and "Edu" boxes that match your employment and/or education listed in **Section 1: Employment/Education Verification.** Please reference any paid and/or unpaid experience (e.g., employment, education, volunteer work).
 - Ensure you have marked at least one box for each item in the Verification column.
 - Make sure the Verification column is marked correctly for the Employment/Education you indicated.

ІТЕМ	EXPERIENCE/EDUCATION SCALE I have performed this task for: 4 - I have more than 12 months of job experience performing this task. 3 - I have between 6 and 12 months of job experience performing this task. 2 - I have between 3 and 6 months of job experience performing this task. 1 - I have minimal job experience performing this task 3 months or less. 0 - I do not know how to do this task and have never done it.	FREQUENCY SCALE I have performed this task: 4 – More than 30 times 3 – At least 21-30 times 2 – At least 11-20 times 1 – At least 1-10 times 0 – 0 times	EXPERIENCE/EDUCATION	FREQUENCY	VERIFICATI Employment (Education (Ed	Emp)/
1.	Develop Human Resources training curricu development, survey) to ensure a comprehensiv handouts.		2	2	⊠ Emp A □ Emp B □ Emp C □ Emp D □ Emp F □ Emp F	☐ Edu A ☐ Edu B ☐ Edu C ☐ Edu D
2.	Develop training exercises utilizing books, tean question/answer exercises in order to assist the st		2	2	⊠ Emp A □ Emp B □ Emp C □ Emp D □ Emp F □ Emp F	⊠ Edu A □ Edu B □ Edu C □ Edu D

STATE OF CALIFORNIA

Training & Experience Examination Instructions

☐ Signature

• Failure to include an original signature on page 4 of the examination may result in disqualification.

NOTE: INCORRECT MARKS OR BLANK RESPONSES WILL NOT BE SCORED AND MAY AFFECT YOUR OVERALL SCORE OR RESULT IN DISQUALIFICATION FROM THIS EXAMINATION.

An example of how to fill out the Training & Experience Examination has been provided on the next page. Please submit your completed Training & Experience Examination, along with a State application (STD. 678, Examination / Employment Application, Rev. 12-21 or later) as follows:

Mail to:

CALIFORNIA HIGHWAY PATROL SELECTION STANDARDS AND EXAMINATIONS SECTION P.O. BOX 942898 SACRAMENTO, CA 94298-0001

OR hand deliver during regular business hours (8:00 a.m. to 5:00 p.m.) to the following location:

Hand Deliver to:

CALIFORNIA HIGHWAY PATROL SELECTION STANDARDS AND EXAMINATIONS SECTION 601 NORTH $7^{\rm TH}$ STREET SACRAMENTO, CA 95811

Training Program Specialist

Training & Experience Examination

Read instructions carefully

The California civil service selection system is merit-based and eligibility for appointment is established through a formal examination process. The Training Program Specialist examination consists of a Training & Experience Examination used to evaluate your education, training, and experience. The eligible list resulting from this examination process will be used by the State of California to fill existing positions.

This Training & Experience Examination will account for 100% of the weight of your examination for this classification. Therefore, please be sure to follow the instructions carefully.

Candidate's Name: John Doe

Social Security Number: 555-00-5555

Address: 1123 Mather Road, Sunny City, CA 91215

Phone Number: 123-233-4455_

Section 1: Employment/Education Verification

Include any previous and current Employment and/or Education information that may apply to this examination. You will use this information to complete Section 2.

Contact may be made to confirm that you have paid or unpaid experience pertaining to the duties and requirements listed in this examination. List all Employment and/or Education information that applies.

EMPLOYMENT

Employment A

Job Title: *Training Coordinator*

Organization Name and Address: ABZ Corporate Agency, 123 Oak Ave., Sacramento, CA 95814

Dates Worked: From: 7/1/2010 To: 7/30/2013

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities: Dana Clark

Contact Phone Number(s) of the above Individual(s): 555-565-5656

EDUCATION

Education A

School Name and Address: University of California, Sunny City

Degree(s) Earned: Business Administration with Concentration in Communications

Date(s) Attended: From: 9/1/2005 To: 5/1/2010

Section 2: Task Ratings

Instructions:

Respond to each of the following items by indicating how the statement applies to you. You are required to respond to every item.

Using the scales (Experience/Education, Frequency, Verification) provided below, you will rate your experience performing specific job-related tasks.

In responding to each item, use the information you listed in **Section 1: Employment/Education Verification.** Please reference any paid and/or unpaid experience (e.g., employment, education, volunteer work).

For items 1-2, provide responses regarding your:

- "Experience/Education" Using the Experience/Education rating scale identify the corresponding number for the amount of time, based on your experience and/or education that you have performed the item, and write that number in the Experience/Education box. Please complete this for each item.
- "Frequency" Using the Frequency rating scale identify the corresponding number of times you have performed the item, and write the number in the Frequency box. Please complete this for each item.
- "Verification" Mark the "Emp" and "Edu" boxes that match your employment and/or education listed in <u>Section 1: Employment/Education Verification</u>. Please reference any paid and/or unpaid experience (e.g., employment, education, volunteer work).
 - Ensure you have marked at least one box for each item in the Verification column.
 - Make sure the Verification column is marked correctly for the Employment/Education you indicated.

ТЕМ	EXPERIENCE/EDUCATION SCALE I have performed this task for: 4 – I have more than 12 months of job experience performing this task. 3 – I have between 6 and 12 months of job experience performing this task. 2 – I have between 3 and 6 months of job experience performing this task. 1 – I have minimal job experience performing this task. 1 – I have minimal job experience performing this task 3 months or less. 0 – I do not know how to do this task and have never done it.	FREQUENCY SCALE I have performed this task: 4 – More than 30 times 3 – At least 21-30 times 2 – At least 11-20 times 1 – At least 1-10 times 0 – 0 times	EXPERIENCE/EDUCATION	FREQUENCY	VERIFICATION Employment (Emp)/ Education (Edu)
1.	Develop Human Resources training cu & pay, exam development, survey) to class using Power Point, manuals, and	ensure a comprehensive	2	2	⊠ Emp A

ITEM	EXPERIENCE/EDUCATION SCALE I have performed this task for: 4 – I have more than 12 months of job experience performing this task. 3 – I have between 6 and 12 months of job experience performing this task. 2 – I have between 3 and 6 months of job experience performing this task. 1 – I have minimal job experience performing this task. 1 – I have minimal job experience performing this task 3 months or less. 0 – I do not know how to do this task and have never done it.	FREQUENCY SCALE I have performed this task: 4 – More than 30 times 3 – At least 21-30 times 2 – At least 11-20 times 1 – At least 1-10 times 0 – 0 times	EXPERIENCE/EDUCATION	FREQUENCY	VERIFICATION Employment (Emp)/ Education (Edu)
2.	Develop training exercises utilizing be concepts, fill-in-the-blanks, and questi to assist the students comprehend the r	on/answer exercises in order	2	1	⊠ Emp A

GRAPHIC DESIGNER III

Training & Experience Examination

Read instructions carefully

The California civil services selection system is merit-based and eligibility for appointment is established through a formal examination process. The Graphic Designer III examination consists of a Training & Experience Examination used to evaluate your education, training, and experience. Servicewide, open eligible lists for the Graphic Designer III classification will be established for the State of California (all State of California Departments, statewide).

This Training & Experience Examination will account for 100% of the weight of your examination for this

classification. Therefore, please be sure to follow the instructions carefully. Candidate's Name: Social Security Number (Optional): Address: _____ Home Phone Number: Work Phone Number: _____ Cellular Phone Number: Section 1: Employment/Education Verification Include any previous and current Employment and/or Education information that may apply to this examination. You will use this information to complete Section 2. Contact may be made to confirm that you have paid or unpaid experience pertaining to the duties and requirements listed in this examination. List all Employment and/or Education information that applies. **EMPLOYMENT Employment A** Organization Name and Address: Dates Worked (mm/dd/yyyy): From: _____To: _____To: Name of Supervisor(s) or Person(s) who can verify your job responsibilities: Contact Phone Number(s) of the above individual(s):

Employment B Job Title: Organization Name and Address: _______To: ______To: _____ Name of Supervisor(s) or Person(s) who can verify your job responsibilities: Contact Phone Number(s) of the above individual(s): **Employment C** Job Title: Organization Name and Address: Dates Worked (mm/dd/yyyy): From: ______To: ______ Name of Supervisor(s) or Person(s) who can verify your job responsibilities: ______ Contact Phone Number(s) of the above individual(s): **Employment D** Job Title: _____ Organization Name and Address: Dates Worked (mm/dd/yyyy): From: ______To: _____ Name of Supervisor(s) or Person(s) who can verify your job responsibilities: Contact Phone Number(s) of the above individual(s): **Employment E** Job Title: Organization Name and Address: Dates Worked (mm/dd/yyyy): From: ______To: _____ Name of Supervisor(s) or Person(s) who can verify your job responsibilities: Contact Phone Number(s) of the above individual(s): **Employment F**

Organization Name and Address:

Dates Worked (mm/dd/yyyy): From: ______To: _____

Name of Supervisor(s) or Person(s) who can verify your job responsibilities:

Contact Phone Number(s) of the above individual(s):

Job Title: _____

EDUCATION

Education A

School Name and Address:	
Degree(s) Earned:	
Date(s) Attended (mm/dd/yyyy): From:	To:
Education B	
Sahaal Nama and Address:	
School Name and Address:	
Degree(s) Earned:	
Date(s) Attended (mm/dd/yyyy): From:	To:
Education C	
School Name and Address:	
Dagrag(s) Formad:	
Degree(s) Earned:	
Date(s) Attended (mm/dd/yyyy): From:	10:
Education D	
School Name and Address:	
Degree(s) Earned:	
Date(s) Attended (mm/dd/yyyy): From:	

CERTIFICATION – IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING – if not signed, this examination may be disqualified.

Before a final score is determined, your responses to exam questions will be verified. An exams manager or personnel staff member may contact the individuals or educational institutions you have provided to confirm job dates, experience, duties, achievements, and/or possession of knowledge, skills, and abilities. Failure to provide adequate employment and/or education information may result in a low score or disqualification from this examination.

If it is determined at any time that you have made any false or inaccurate representations in any of the information you have provided on this examination, you may be disqualified from this process, removed from the certification list(s), suffer a loss of State employment, and/or suffer a loss of the right to compete in any future State of California hiring processes. You are solely responsible for the accuracy of the responses provided.

This warning has been provided to protect your rights as a job candidate as well as the rights of the Department. Be advised that you are expected to answer truthfully and accurately.

I certify and understand that all statements I have made in this examination are true and complete to the best of my knowledge and contains no willful misrepresentation of falsifications. Failure to include original signature may result in disqualification.

Signature	Date

FILING INSTRUCTIONS:

Please submit your completed Training & Experience Examination and a State Application (STD. 678) as follows:

MAIL TO:

CALIFORNIA HIGHWAY PATROL SELECTION STANDARDS AND EXAMINATIONS SECTION P.O. BOX 942898 SACRAMENTO, CA 94298-0001

OR hand deliver during regular business hours (8:00 a.m. to 5:00 p.m.) to the following location:

HAND DELIVER TO:

CALIFORNIA HIGHWAY PATROL SELECTION STANDARDS AND EXAMINATIONS SECTION 601 NORTH 7TH STREET SACRAMENTO, CA 95811

MINIMUM QUALIFICATIONS

Each candidate must meet the minimum qualifications on his/her application by the cut-off date. If not, the candidate's application in the examination process will be rejected and his/her Training and Experience Examination will not be scored. Please ensure that your State Application (STD. 678) clearly indicates your education, experience, and licensure information reflective of the minimum qualifications for this examination process as stated below:

Either I

One year of experience in the California state service as a Graphic Designer II.

Or II

Experience: Three years of experience in concept development, consulting, page layout, drawing, photo editing, color correction, file preparation, on-line publishing, multimedia, and other mediums, **AND**

Education: Successful completion of a total of 30 semester college units with a minimum of six units in the following areas: graphic design theory, graphic computer software, and printing technology. (One year of additional experience can be substituted for one year of college.) (NOTE: Applications must contain the following information on all courses completed: Title, semester or quarter credits, name of institution, and completion date. Evidence of completion of required course work must be attached to the application at the time of filing [i.e., copy of transcript]. Applications received without this information will be rejected.)

Section 2: Task Ratings

Instructions:

Respond to each of the following items by indicating how the statement applies to you. You are required to respond to every item.

Using the scales (Experience/Education, Frequency, Verification) provided below, you will rate your experience performing specific job-related tasks.

In responding to each item, use the information you listed in <u>Section 1: Employment/Education</u> <u>Verification</u>. Please reference any paid and/or unpaid experience (e.g., employment, education, volunteer work).

For items 1-12, provide responses regarding your:

- "Experience/Education" Using the Experience/Education rating scale identify the corresponding number for the amount of time, based on your experience and/or education that you have performed the item, and write that number in the Experience/Education box. Please complete this for each item
- "Frequency" Using the Frequency rating scale identify the corresponding number of times you have performed the item and write the number in the Frequency box. Please complete this for each item.
- "Verification" Mark the "Emp" and "Edu" boxes that match your employment and/or education listed in <u>Section 1: Employment/Education Verification</u>. Please reference any paid and/or unpaid experience (e.g., employment, education, volunteer work).
 - Ensure you have marked <u>at least one</u> box for each item in the Verification column.
 - Make sure the Verification column is marked correctly for the Employment/Education you Indicated.

	EXPERIENCE/EDUCATION SCALE	FREQUENCY SCALE			VERIFICATION
	I have performed this task for:	I have performed this task:	-		Employment (Emp)/
			ON		Education (Edu)
	4 – More than 60 months.	4 – More than 30 times.	II		
	3 – More than 48 months and up to 60 months.	3 – At least 21-30 times.	CA		
	2 – More than 36 months and up to 48 months.	2 – At least 11-20 times.	Ŭ		
	1 – At Least 18 months and up to 36 months.	1 – At least 1-10 times.	ÆD)		
	0 – Less than 18 months.	0 - 0 times.	Œ/	\succ	
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			IE	圍	
V			ERIE	10	
ITEM			Ъ	FREQUENCY	
II			EX	Ŧ	

					VEDIEI CA ELON
	EXPERIENCE/EDUCATION SCALE	FREQUENCY SCALE	Z		VERIFICATION
	I have performed this task for:	I have performed this task:	10		Employment (Emp)/
	4 M d 60 d	4 34 4 20 6	A T		Education (Edu)
	4 – More than 60 months.	4 – More than 30 times.	7C		
	3 – More than 48 months and up to 60 months.	3 – At least 21-30 times.	DI		
	2 – More than 36 months and up to 48 months.	2 – At least 11-20 times.	Œ		
	1 – At Least 18 months and up to 36 months.	1 – At least 1-10 times.	CE	\mathbf{X}_{i}	
	0 – Less than 18 months.	0 - 0 times.	Ž	N.	
			ZII	UE	
M			Œ	Q	
ITEM			EXPERIENCE/EDUCATION	FREQUENCY	
			H	F	
1.	Consult with departmental personnel, and on o				☐ Emp A ☐ Edu A ☐ Emp B ☐ Edu B
	departmental personnel in interpreting, planning				□ Emp C □ Edu C
	executing high-level design for a variety of pro-	ojects/programs being			□ Emp D □ Edu D □ Emp E
	implemented by using applicable communicat	ion tools (e.g., virtual, in			□ Emp F
	person) based on the client's needs.	_			•
2.	Recommend design solutions (e.g., projects, p	resentations, reports, cost			□ Emp A □ Edu A □ Emp B □ Edu B
	referrals, vendors) using industry standards to	ensure the requirements			□ Emp C □ Edu C
	and objectives are being met and communicate	ed using applicable			□ Emp D □ Edu D
	communication tools per client and departmen	0 11			□ Emp E □ Emp F
3.	Manage projects in various stages of design (e				□ Emp A □ Edu A
	mock-ups, final product) per department needs				□ Emp B □ Edu B □ Emp C □ Edu C
	accordance with industry standards and statew				□ Emp D □ Edu D
	accordance with madely standards and state w	rae garaennes.			□ Emp E□ Emp F
4.	Utilize appropriate file management process (a	e.g., hierarchy, naming			□ Emp A □ Edu A
	convention) to ensure organizational consisten				□ Emp B □ Edu B □ Emp C □ Edu C
	department policies and procedures.	J 1			□ Emp D □ Edu D
	ark				□ Emp E□ Emp F
5.	Develop graphics for printed collateral (e.g., p	ublications, brochures.			□ Emp A □ Edu A
	signage) and digital media such as visual asset				□ Emp B □ Edu B □ Emp C □ Edu C
	and video production using design software in				□ Emp D □ Edu D
	industry standards and statewide guidelines.	decordance with			□ Emp E
6.	Maintain graphics for printed collateral (e.g., p	nublications brochures			☐ Emp F ☐ Emp A ☐ Edu A
0.	signage) and digital media such as visual asset				□ Emp B □ Edu B
	and video production using design software in				□ Emp C □ Edu C □ Emp D □ Edu D
		accordance with			□ Emp E
7.	industry standards and statewide guidelines. Utilize design software (e.g., Adobe Creative (Cloud) to produce decice			☐ Emp F ☐ Emp A ☐ Edu A
' ·	material in accordance with industry standards				□ Emp B □ Edu B
	•	s and statewide			□ Emp C □ Edu C □ Emp D □ Edu D
	guidelines.				□ Emp E
		* 4 * 4 . * 4 /			□ Emp F
8.	Assist with major outreach campaigns by prov	_			□ Emp A □ Edu A □ Emp B □ Edu B
	recommendations (e.g., written, verbal, mock-				□ Emp C □ Edu C
	communications to develop and implement ma	arketing efforts according			□ Emp D □ Edu D □ Emp E
	to management requests.				□ Emp F

ITEM	EXPERIENCE/EDUCATION SCALE I have performed this task for: 4 – More than 60 months. 3 – More than 48 months and up to 60 months. 2 – More than 36 months and up to 48 months. 1 – At Least 18 months and up to 36 months. 0 – Less than 18 months.	FREQUENCY SCALE I have performed this task: 4 – More than 30 times. 3 – At least 21-30 times. 2 – At least 11-20 times. 1 – At least 1-10 times. 0 – 0 times.	EXPERIENCE/EDUCATION	FREQUENCY	VERIFICATION Employment (Emp)/ Education (Edu)
9.			F	<u> </u>	□ Emp A □ Edu A □ Emp B □ Edu B □ Emp C □ Edu C □ Emp D □ Edu D □ Emp E □ Emp F
10.	Provide art direction to staff and/or contractors (e.g., photographers, videographers, designers) to obtain the assets needed to meet the goals of the project for client or department needs.				☐ Emp A ☐ Edu A ☐ Emp B ☐ Edu B ☐ Emp C ☐ Edu C ☐ Emp D ☐ Edu D ☐ Emp E ☐ Emp F
11.	Produce print and digital materials (e.g., forms, publications, presentations) to stay in compliance with Federal and State laws and regulations (e.g., American with Disabilities Act [ADA], Web Content Accessibility Guideline [WCAG]).				□ Emp A □ Edu A □ Emp B □ Edu B □ Emp C □ Edu C □ Emp D □ Edu D □ Emp E □ Emp F
12.	Present design concepts (e.g., virtual, in person) to internal and/or external stakeholders (e.g., clients, management, department personnel) to obtain feedback, inform, or gain approval for concepts and/or projects in accordance with department needs and industry practices.				□ Emp A □ Edu A □ Emp B □ Edu B □ Emp C □ Edu C □ Emp D □ Edu D □ Emp E □ Emp F
13.	Approve press proof (e.g., in person, virtual) to ensure accuracy, quality, and brand consistency of printed product in accordance with department needs and industry practices.				□ Emp A □ Edu A □ Emp B □ Edu B □ Emp C □ Edu C □ Emp D □ Edu D □ Emp E □ Emp F
14.	Prepare output files for print (e.g., fonts, images) utilizing design software to deliver press ready digital files (e.g., Portable Document Format [PDF], vector art) based on vendor specifications.				□ Emp A □ Edu A □ Emp B □ Edu B □ Emp C □ Edu C □ Emp D □ Edu D □ Emp E □ Emp F
15.	Prepare output files for digital publishing utideliver web ready digital files (e.g., Graphic Portable Document Format [PDF], Joint Pho [JPEG]) based on vendor and/or client specification.	Interchange Format [GIF], otographic Experts Group			□ Emp A □ Edu A □ Emp B □ Edu B □ Emp C □ Edu C □ Emp D □ Edu D □ Emp E □ Emp F

$\begin{array}{c} \textbf{GRAPHIC DESIGNER III} \\ \textbf{TRAINING \& EXPERIENCE EXAMINATION} \end{array}$

CONDITIONS OF EMPLOYMENT

EXA MINA TION TITLE(S)			
	T. 14.14E		
PRINT FIRST NAME, M.I., LAS	INAME		
SOCIAL SECURITY NUM	BER Providing a Social Secu	rity Account Number is voluntary in	accordance with the Privacy Act of 1974.
			ot included, it will delay the processing
		you are providing regarding your pref	
	•		
		-	or positions in LOCATIONS not
marked. If more than 16 locatio	on choices are selected, you may	be considered available for work	k anywhere in the State.
De 141 e 4	41.		
			to relocate or are not willing to travel
to a distant job focation, do not s	elect locations that are a long wa	ly from your residence.	
O 0000 United States - If man	ked, no further selection is neces	ssaiv.	
© 1111 1	,	,	
O400 Butte	○ 1700 Lake	○ 3100 Placer	○ 5100 Sutter
O600 Colusa	1800 Lassen	💍 3200 Plumas	○ 5200 Tehama
0800 Del Norte	2300 Mendocino	○ 4500 Shasta	○ 5300 Trinity
1100 Glenn	O 2500 Modoc	○ 4600 Sierra	○ 5800 Yuba
1200 Humboldt	○ 2900 Nevada	◯ 4700 Siskiyou	
○ 0100 Alameda	○ 2000 Madera	○ 3500 San Benito	○ 4900 Sonoma
0200 Alpine	2100 Marin	3800 San Francisco	5000 Stanislaus
O 0300 Amador	2200 Mariposa	3900 San Joaquin	○ 5500 Tuolumne
0500 Calaveras	2400 Merced	○ 4100 San Mateo	O 5700 Yolo
0700 Contra Costa	2700 Monterey	○ 4300 Santa Clara	O 1111 2111
O900 El Dorado	O 2800 Napa	O 4400 Santa Cruz	
1000 Fresno	3400 Sacramento	4800 Solano	
○ 1300 Imperial	1900 Los Angeles	3600 San Bernardino	○ 5400 Tulare
🐧 1400 Inyo	O 2600 Mono	3700 San Diego	○ 5600 Ventura
○ 1500 Kern	○ 3000 Orange	O 4000 San Luis Obispo	
○ 1600 Kings	○ 3300 Riverside	○ 4200 Santa Barbara	
TYPE OF A	ADODED STATE THAT WOUNT	LACCEPT DI 1 1	
TYPE OF AP	POINTMENT THAT YOU WIL	L ACCEPT - Please mark only or	ne.
A 11 Permanent or	r Temporary - full time, part time,	or intermittent	
	r Temporary - full time only		
-	r Temporary - part time or intermi	ttent only	
	nly - full time only	,	
	nly - full time only		
		orary - full time, part time, or into	ermittent

