



**MEDICAL CONSULTANT I
and/or
MEDICAL CONSULTANT I (PSYCHIATRIST)**

SUPPLEMENTAL APPLICATION

INTRODUCTION

The purpose of the Supplemental Application examination is to give you an opportunity to explain significant aspects of your qualifications for Medical Consultant, California Department of Social Services (CDSS). The information you provide will be rated based on objective criteria created by Subject Matter Experts. The rating will be used to determine your final score in this examination and an employment list will be established for those candidates who attain a passing score. The employment list will be used by CDSS to fill positions. The employment list has a list life of 12 months. A "Conditions of Employment" form is included in this supplemental application that will allow you to select a location in which you are interested in employment.

Veteran's preference credit will not be granted in this examination as it does not qualify as an entrance examination under the law.

Please submit a standard State Application (STD.678) along with this examination. State Application can be obtained at the following site: <http://jobs.ca.gov/pdf/std678.pdf>

AFFIRMATION FOR COMPETITOR

I hereby certify and understand the information provided by me on this assessment is true and complete to the best of my knowledge and contains no willful misrepresentation or falsifications. I also understand that if it is discovered that I have made any false representations, I will be removed from the list resulting from this examination and may not be allowed to compete in future examinations for State employment. My responses are subject to verification before appointment to a position. If already hired from the result of this examination, I may have adverse action taken against me, which could result in dismissal.

I have read and understand the information given above.

Candidate's Signature _____

Date _____

<u>Job Requirements/Working Condition</u>		Yes	No
1.	Are you willing to work on a computer on a sustained daily basis that is for 6 to 8 hours per eight hour work day?		
2.	Have you ever had any restrictions on your California medical license?		
3.	Do you currently have any restrictions on your California medical license?		

<u>Work Experience</u>					
<u>Recency</u> 3 = within last 2 years 2 = within last 4 years 1 = > 5 years 0 = not performed	<u>Frequency</u> 4 = Daily 3 = Weekly 2 = Monthly 1 = Annually 0 = not performed	Recency	Frequency	Year of Experience	Level of Skill
<u>Year of experience</u> 3 = > 3 years 2 = 1 to 3 years 1 = < 1 year 0 = not performed	<u>Level of Skill</u> 2 = performed after licensure 1 = performed during training 0 = not performed				

4.	Assist patients with applications for governmental programs.				
5.	Assess the severity of physical and /or mental impairments following established protocols.				
6.	Project the level of recovery resulting from traumatic illness or injury.				
7.	Assess patients' physical and /or mental restrictions and their ability to perform work activities.				
8.	Advise and consult with other physicians on complex medical conditions.				
9.	Review medical assessments made by others to determine whether specific program requirements are met.				
10.	Review case histories, evaluate and interpret medical reports.				
11.	Provide assessments of the patients' functional limitations.				
12.	Participate in decision-making relating to production and its critical time management.				

Work Experience					
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<u>Year of experience</u> 3 = > 3 years 2 = 1 to 3 years 1 = < 1 year 0 = not performed	<u>Level of Skill</u> 2 = performed after licensure 1 = performed during training 0 = not performed	Recency	Frequency	Year of Experience	Level of Skill
13.	Contact physicians or other medical sources for the purpose of obtaining/clarifying pertinent medical information or resolving discrepancies.				
14.	Participate in outreach activities to medical and community resources.				
15.	Provide medical training or participate in the development and presentation of training.				
16.	Attend work-related training, conferences or seminars.				
17.	Participate in scheduled team and other staff meetings.				
18.	Use a computer for job-related communications, to make chart entries, write reports or compile data.				
19.	Assist other staff in understanding or interpreting medical and other related information.				
20.	Participate in interdisciplinary team for case management.				
21.	Participate in peer review activities for a medical association, hospital or other organization.				
22.	Successful interaction with paraprofessional staff members.				
23.	Mentor/teach paraprofessional staff members to improve professional competence.				
24.	Participate in a committee lead by nonmedical personnel.				
25.	Participate in a program where services were determined based on administrative regulations.				
26.	Summarize clinical information in succinct written reports.				

Candidate's Name: _____

Address: _____

Phone Number: _____

E-mail: _____

Medical License: _____
Number Expiration Date State

Specialty Board Certification: _____
Number Specialty Expiration Date

Board Re-certification date: _____

CONDITIONS OF EMPLOYMENT

If you are successful in the exam, your name will be placed on the active employment list and certified to fill vacancies according to the location(s) you specify.

_____ COVINA

_____ ROSEVILLE

_____ FRESNO

_____ SACRAMENTO

_____ LOS ANGELES

_____ SAN DIEGO

_____ OAKLAND

_____ STOCKTON

I certify that all the statements I have made in this application are true and correct.

Signature

Date

MAILING INSTRUCTIONS:

Mail your completed Supplemental Application along with a standard State Application Form, STD.678 to the address listed below. You may print the State Application from the State Personnel Board's website at <http://jobs.ca.gov/>
MAIL COMPLETED STD. 678 AND SUPPLEMENTAL APPLICATION TO:

California Department of Social Services
P.O. Box 944243 MS 8-15-59
Sacramento, CA 94244-2430

CRIMINAL RECORD CLEARANCE INFORMATION: Some positions, within various divisions of the California Department of Social Services, are subject to fingerprinting and criminal records check requirements. This check will be completed by the Department of Justice. Applicants will be notified during the hiring process if the position is affected by the criminal records clearance procedure. Criminal record clearance is a condition of employment in positions affected by this procedure.