

## JACKSON COUNTY PERSONNEL DEPARTMENT

JACKSON COUNTY COURTHOUSE  
Phone (715) 284-0216

307 MAIN STREET – 2<sup>nd</sup> FLOOR  
Fax (715) 284-0269

BLACK RIVER FALLS, WI 54615  
Email: [geri.allen@co.jackson.wi.us](mailto:geri.allen@co.jackson.wi.us)

**TAM K. BURGAU**  
Personnel Director

**GERI ALLEN**  
Personnel Assistant

### **POSITION: – AGING AND DISABILITY RESOURCE CENTER SUPERVISOR**

This application packet contains the following materials:

- *Jackson County Job Application*
- *Job Description*
- *Benefit Sheet*

**The following materials must be complete and returned to be considered for employment:**

- \* Jackson County Job Application
- \* Resume

**Application materials are due no later than 3:00 p.m. - March 26, 2010**

**NO FAXED OR EMAILED APPLICATIONS WILL BE ACCEPTED**

To: Geri Allen  
Personnel Department  
307 Main Street – 2<sup>nd</sup> Floor, BRF Courthouse  
715-284-0216  
[www.co.jackson.wi.us](http://www.co.jackson.wi.us)

[geri.allen@co.jackson.wi.us](mailto:geri.allen@co.jackson.wi.us) (Email To Request Materials Only: include name and full address)

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The selection of the successful candidate will be made by assessment of experience, education, and background; oral interview; background check; review of references; and other appropriate job-related procedures. All applicants will be notified as to the status of their application.

Wisconsin Statutes, Sections 19.36 (7), 64.09 (5), and 64.11 (7) require public employers to treat the following items as public record: Each applicant's application, records, recommendations, and qualifications except as provided in Section 19.36 (7), Wis. Stats., which allows the identity of an application to remain confidential if the applicant requests in writing that the County not provide access to this information.

If you choose not to have this information become public record, you must make such a request as provided for in the Jackson County Application for Employment. If you become a finalist for the position, your identity may be disclosed as required by law.

Jackson County will make arrangements to furnish appropriate auxiliary aids and services where necessary and reasonable to afford an individual with a disability the opportunity to participate in the recruitment process. Please notify the Personnel Department at (715) 284-0215 to request accommodations prior to the application deadline.

**Thank you for your interest in employment with Jackson County**

# JACKSON COUNTY APPLICATION FOR EMPLOYMENT

Rev: 09/2009

Jackson County Personnel Department  
2<sup>nd</sup> Floor – Courthouse, 307 Main Street  
Black River Falls, WI 54615

715-284-0216  
Fax 715-284-0269

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a medical condition or handicap or any other legally protected status which is not a bona fide occupational qualification.

DATE \_\_\_\_\_ POSITION APPLYING FOR Aging & Disability Resource Center Supervisor

## PERSONAL INFORMATION

NAME	FIRST	MIDDLE	LAST
ADDRESS			
CITY, STATE, ZIP			
PHONE NUMBER		CELL PHONE NUMBER	
WORK (ALTERNATE) NUMBER			
SOCIAL SECURITY NUMBER			
EMAIL ADDRESS (PLEASE PRINT LEGIBLY)			
DRIVER'S LICENSE NUMBER			STATE
COMMERCIAL DRIVER'S LICENSE (CDL) (Only Provide If A CDL Is Required For The Position That You Are Applying For)			
Do you currently have a CDL? YES___ NO___ List Endorsements _____			

## QUESTIONS REGARDING EMPLOYMENT

Have you ever applied for employment with Jackson County in the past?	YES___ NO___
Have you ever been employed with Jackson County?	YES___ NO___
Are you currently employed?	YES___ NO___
May we contact your present employer?	YES___ NO___
Are you related to any person in the department in which you are applying?	YES___ NO___
Have you ever been discharged or asked to resign?	YES___ NO___
If yes, please explain _____	
_____	

**JACKSON COUNTY IS AN EEO/AA/ADA EMPLOYER**

**JACKSON COUNTY COMPLIES WITH DRUG TESTING**

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**EMPLOYMENT RECORD**

This information is required in addition to your resume. Include military experience if job related.

**List employment beginning with present or last job.**

**Please list all jobs since high school. Use additional sheets if necessary.**

Company Name _____	Address _____
City _____	State _____ Zip Code _____ Phone _____
Job Title: _____	Supervisor: _____
Specific Duties: _____	
_____	
Reason for Leaving: (If currently working, why do you want to leave?) _____	
_____	
Dates Employed (Mo/Yr): _____ thru (Mo/Yr): _____ Salary: Starting \$ _____ Ending \$ _____	

Company Name _____	Address _____
City _____	State _____ Zip Code _____ Phone _____
Job Title: _____	Supervisor: _____
Specific Duties: _____	
_____	
Reason for Leaving: (If currently working, why do you want to leave?) _____	
_____	
Dates Employed (Mo/Yr): _____ thru (Mo/Yr): _____ Salary: Starting \$ _____ Ending \$ _____	

Company Name _____	Address _____
City _____	State _____ Zip Code _____ Phone _____
Job Title: _____	Supervisor: _____
Specific Duties: _____	
_____	
Reason for Leaving: (If currently working, why do you want to leave?) _____	
_____	
Dates Employed: (Mo/Yr): _____ thru (Mo/Yr): _____ Salary: Starting \$ _____ Ending \$ _____	

**JACKSON COUNTY COMPLIES WITH DRUG TESTING**

Company Name \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: (If currently working, why do you want to leave?) \_\_\_\_\_  
 \_\_\_\_\_  
 Dates Employed: (Mo/Yr): \_\_\_\_\_ thru (Mo/Yr): \_\_\_\_\_ Salary: Starting \$ \_\_\_\_\_ Ending \$ \_\_\_\_\_

**Be sure to attach additional sheets if necessary to provide complete employment history.**

**MILITARY SERVICE**

Branch of Service	Month/Year Served		Active Duty or Reserve	Highest Grade	Skill Specialty or Primary Duty
	From:	To:			

List Special schools attended/skills acquired during military service:

\_\_\_\_\_

\_\_\_\_\_

**List Education, Certificates and Degrees**

Name of High School or GED Educational Facility	Graduation Year	Title of Degree
_____	_____	_____

Name of College or Higher Education Facility	Graduation Year	# Credits Received	Title
_____	_____	_____	_____
_____	_____	_____	_____

List any other additional Licenses/Certifications	Certificate	Date
_____	_____	_____
_____	_____	_____

**JACKSON COUNTY COMPLIES WITH DRUG TESTING**

**REFERENCE FORM**

**Applicant Name** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

**May we contact your present employer if you are a final candidate? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Please list persons who may have knowledge concerning your qualifications for this position.  
Your references will be contacted only if you are a final candidate for the position.

**DO NOT INCLUDE RELATIVES, SOCIAL FRIENDS, OR CLERGY**

**REFERENCE INFORMATION**

<b>Name</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Title - Position</b>	
<b>Daytime Phone</b>	

<b>Name</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Title - Position</b>	
<b>Daytime Phone</b>	

<b>Name</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Title - Position</b>	
<b>Daytime Phone</b>	

**JACKSON COUNTY COMPLIES WITH DRUG TESTING**

APPLICANT PLEASE READ CAREFULLY AND SIGN BELOW

All information provided and statements made are subject to verification. Falsification of Information provided on this application may be grounds for not employing you at Jackson County or for dismissal after you begin work.

**CERTIFICATION**

ALL INFORMATION PROVIDED AND STATEMENTS MADE BY ME AS PART OF THIS APPLICATION, OR AS PART OF ANY ADDITIONAL INFORMATION PROVIDED IN SUPPORT OF THIS APPLICATION ARE COMPLETE, ACCURATE, AND TRUE TO THE BEST OF MY KNOWLEDGE.

I UNDERSTAND THAT IF I AM EMPLOYED, FALSE INFORMATION PROVIDED OR FALSE STATEMENTS MADE AS PART OF THIS APPLICATION MAY BE CONSIDERED AS CAUSE FOR DISMISSAL.

I FURTHER UNDERSTAND THAT I MAY BE ASKED TO UNDERGO A PRE-EMPLOYMENT EXAMINATION, INCLUDING SUBSTANCE ABUSE SCREENING, PRIOR TO APPOINTMENT OF A POSITION WITH JACKSON COUNTY. REFUSAL TO PARTICIPATE WILL RESULT IN THE REJECTION OF MY APPLICATION.

Under the provisions of Section 19.36, Wisconsin Statutes, I request that my identity as an applicant for this position not be revealed without my consent or until required under law.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Signed

**AUTHORIZATION FOR RELEASE OF INFORMATION  
FOR EMPLOYMENT WITH JACKSON COUNTY**

I authorize pertinent companies, schools, agencies, municipalities or persons to give Jackson County any information requested regarding my employment, character, experience and qualifications and/or suitability for employment with Jackson County including a check on my fingerprints and police record for the purpose of considering my suitability for hire. I hereby forever release, discharge and covenant not to sue any person or organization for any good faith result of providing, obtaining or acting upon such information. I understand that such information is sought with confidentiality and will not be released to me in any form whatsoever.

In addition, a copy of this authorization is as valid as the original and should be recognized as such.

\_\_\_\_\_  
PRINT Name Clearly

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Signed

**JACKSON COUNTY COMPLIES WITH DRUG TESTING**

**EQUAL EMPLOYMENT OPPORTUNITY INFORMATION**

It is practice of Jackson County to consider all applicants for employment regardless of race, color, creed, sex, age, national origin or other protected status.

To assist Jackson County with compliance of Federal and State Equal Employment Opportunity (EEO), record keeping, reporting, and other legal requirements, please answer the questions below.

THIS PRE-EMPLOYMENT INFORMATION IS ANONYMOUS AND WILL BE SEPARATED FROM YOUR APPLICATION AT THE TIME YOUR APPLICATION IS RECEIVED AND IT WILL BE KEPT CONFIDENTIAL IN A FILE SEPARATE FROM THE ATTACHED APPLICATION FOR EMPLOYMENT.

**DISCLOSURE OF THIS INFORMATION IS ENTIRELY VOLUNTARY**

**POSITION APPLIED FOR: AGING & DISABILITY RESOURCE CENTER SUPERVISOR**

DATE OF BIRTH: _____	AGE: _____
SEX: MALE: _____	FEMALE: _____
DO YOU IDENTIFY YOURSELF AS HANDICAPPED FOR WISCONSIN FAIR EMPLOYMENT/EQUAL OPPORTUNITY PURPOSES?	
YES: _____ NO: _____ NOT SURE: _____	
RACE (ETHNIC GROUP):	WHITE: _____ (NOT OF HISPANIC ORIGIN) BLACK: _____ (NOT OF HISPANIC ORIGIN) HISPANIC: _____ NATIVE AMERICAN: _____ ASIAN: _____
MARITAL STATUS:	MARRIED: _____ SINGLE: _____ DIVORCED: _____ SEPARATED: _____ WIDOWED: _____
VETERAN STATUS:	VIETNAM ERA VETERAN: _____ DISABLED VETERAN: _____

**WHERE DID YOU LEARN ABOUT THIS EMPLOYMENT OPPORTUNITY?**

- BANNER JOURNAL and/or SHOPPER \_\_\_\_\_
- CHRONICLE \_\_\_\_\_
- LA CROSSE TRIBUNE \_\_\_\_\_
- EAU CLAIRE LEADER TELEGRAM \_\_\_\_\_
- INTERNET \_\_\_\_\_
- FRIEND \_\_\_\_\_
- OTHER \_\_\_\_\_

# FOR INFORMATIONAL PURPOSES ONLY

## Jackson County Job Description Department of Health and Human Services

### **JOB TITLE: Aging & Disability Resource Center Supervisor**

Reports To: Social Services Operations Manager  
Representation: Non-Union; Management  
FLSA Status: Exempt

Prepared by/Date: Personnel Dept. 12/2005  
Approval/Date: 3/23/06 DHHS, 4/5/06 Personnel  
Amended : DHHS 6/09, Personnel/Barg. 07/06/09

### **POSITION SUMMARY**

Under the general supervision of the Social Services Operations Manager assumes responsibility for various administrative functions. Position has overall responsibility for administration of the Aging Department, including planning, developing, and coordinating programs and services for the elderly. Manages the Senior Nutrition Program, Volunteer and Minibus Transportation Programs, Elderly Benefit Specialist Program, Elder Abuse Program Manager has the responsibility for planning, operations, and direct supervision of the ADRC, including Information and Assistance, Long Term Care Options Counseling, Functional Screens, Pre-admissions Consultation and Assessments, , marketing, public education, and direct supervision of staff.

### **ESSENTIAL DUTIES AND RESPONSIBILITIES**

To perform this job successfully, an individual must be able to possess and maintain the knowledge, skills, and responsibilities that are required to perform this job. This position description has been prepared to assist in evaluating duties, responsibilities and skills of the position. It is not intended to limit duties to those listed. It is understood that the supervisor has the right to assign, direct, and modify duties and responsibilities listed and that the duties not mentioned that are of similar kind or level of difficulty shall not be excluded.

- Develop and implement departmental goals and objectives
- Directs department and meal site operations
- Plans, coordinates, and evaluates department operation, staff and equipment needs and utilization
- Assists in preparation of annual budget
- Reviews policies and procedures to ensure compliance with Federal, State, and Local laws and regulations
- Coordinates the Senior Nutrition program, including congregate and home-delivered meal services, nutrition sites, contracts with meal providers, and supervises and directs all meal site staff and volunteers
- Oversees menus for meal sites and routinely travels to meal sites to review and assess staff and operations
- Establishes a Nutrition Advisory Board and develops Nutrition Program with the Advisory Board's input
- Keep current with new programs and policies governing Aging and ADRC-WW programs
- Directs the Aging and ADRC-WW program's public relations activities and meets with groups of older persons to describe programs
- Acts as liaison between GWAAR – Greater Wisconsin Agency on Aging Resources, State of Wisconsin – Division of Disability and Elder Services, Resource Center and other County, community, and senior groups
- Reviews time records, approving vacation and sick leave
- Organizes and guides volunteer service persons
- Serve as liaison and prepare and provide reports and documents to ADRC-WW required by ADRC-WW contract

- Perform functions of service brokerage, resource development and interagency referral for all ADRC target group consumers
- Assure compliance with the ADRC-WW contract and with state and federal requirements of the Older Americans Act
- Assist in maintaining good public relations and assist in interpreting agency programs to the community. Assures working relationships with all collateral agencies.
- Assures positive coordination and collaboration with other service divisions with DHHS.
- Assures compliance with state laws, social work “best practices,” legislative and policy interpretation and implementation.
- Participate in development of contractual arrangements needed to carry out assigned functions of the division.
- Cooperate and communicate with other agencies, officials, and citizens in planning for community services.
- Stimulate and develop resources and the extension of services to provide client choices, education, health care, housing, training, and employment essential to the prevention, reduction of dependency, abuse, neglect, or exploitation.
- Perform other duties as assigned
- Thorough knowledge of principles and practices of business management with regards to office management, bookkeeping, and accounting
- Knowledge of Federal and State programs for the aging and applicable State/Federal rules and regulations, thorough knowledge of the Older Americans regulations
- Knowledge of Wisconsin Statutes pertaining to social service, Family Care, Adult Protective Services, mental health, alcohol and other drug abuse, and cognitive impairments especially chapters 51, 54, and 55 of the Wisconsin Statutes, and familiarity with pertinent provisions of the Federal Social Security Act and the Older American’s Act of 1965.
- Familiarity with modern administrative practices and procedures, budgeting, fiscal management, public administration, and personnel management
- Requires computer competency including word processing, spreadsheet, and accounting applications and considerable knowledge of modern office procedures, equipment, and practices
- Ability to communicate effectively both orally and in writing. Experience in public speaking and public relations
- Ability to demonstrate strong interpersonal communication skills and a high degree of integrity and honesty
- Ability to plan, organize, develop, implement, interpret and direct the programs, goals, objectives, policies and procedures, etc. that are necessary for providing aging programs and maintaining a department
- Ability to work in a pleasant and understanding manner with the general public, County department heads and staff, County Board members, collateral agencies, news media, and various agencies and officials
- Pass caregiver background check

## **SUPERVISORY RESPONSIBILITIES**

- Manage and supervise staff within the division. Positions include:
- Social Worker I, II – Resource Center
- Benefit Specialists I and II,
- Transportation Service Workers I and II,
- Meal Site Managers
- Home Delivered Meal Drivers
- Volunteer Drivers

## **EDUCATION AND EXPERIENCE REQUIRMENTS**

Requires a minimum of 3 years experience in supervisory/management position and a minimum of 3 years experience working with the elderly. Bachelor's degree in nutrition, administration, gerontology, or other related field preferred. Registered Dietician preferred. In evaluation credentials for this position the County may consider a combination of education and experience that provides the required knowledge, abilities and skills to perform the duties of the position.

## **CERTIFICATES, LICENSES, REGISTRATIONS**

Valid Wisconsin drivers license and/or access to transportation suitable to complete necessary work out of the office.

## **HIPPA RESPONSIBILITY**

All members of the workforce have a responsibility to watch for unauthorized use or disclosures of Protected Health Information (PHI), to act to prevent the action, and to report suspected breaches of privacy and security policies to their supervisor, or to the Privacy or Security Officer (example of a breach: member or visitor looking through a claim or personal information left on a desk).

## **LANGUAGE SKILLS**

Ability to read and interpret documents, and laws in the English language; ability to listen to and understand information and ideas in spoken and written format so individuals may effectively understand and convey communications.

## **MATHEMATICAL SKILLS**

Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent.

## **REASONING ABILITY**

Ability to apply common sense understanding to carry out instructions furnished in written, oral, or diagram form. Inductive and deductive reasoning – ability to combine separate pieces of information, or specific answers to problems, to form general rules or conclusions; includes coming up with a logical explanation for why a series of seemingly unrelated events occur together and deciding if an answer makes sense.

## **PHYSICAL DEMANDS**

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. The employee is regularly required to stand, walk, use hands to finger, handle or feel objects; reach with hands and arms, hear and talk. The employee may be required to run, sit, stoop, kneel, crouch or crawl, climb, balance, taste, and smell. May seldom be required to lift and/or move up to 50 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus.

## **WORK ENVIRONMENT**

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job.

*Jackson County is an Equal Employment Opportunity employer and will provide reasonable accommodations to qualified individuals with disabilities in accordance to the Americans With Disabilities Act. Jackson County encourages incumbents and future employees to discuss potential accommodations*

**FOR INFORMATIONAL PURPOSES ONLY**

**JACKSON COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY RESOURCE CENTER SUPERVISOR  
Benefit Information 2010**

**One (1) Year Probationary Period**

2010 Wage Scale:       **\$43,201.60 - \$51,875.20 per year**

**Health Insurance Employee Contribution 2010:**

Health Insurance:	Premier Plus Community Health Traditions	
	<u><b>Premium</b></u>	<u><b>Employee Share -9%</b></u>
Family -	\$1,463.00/month	\$131.67/month
Single -	\$ 562.70/month	\$ 50.64/month

**Dental Insurance:** (Employee pays 20 % of Premium)  
Family Plan = \$13.66/month  
Single Plan = \$ 4.27/month

**Life Insurance:**  
County pays for the amount equal to yearly salary. Additional coverage and coverage for spouse and dependents are available at additional cost.

**State Retirement:**  
Paid 100% by county.

**Sick Leave:**  
1 day per month - accumulating.

**Vacation:**

1-6 years	15 days
7-19 years	20 days
20 years +	25 days

**Holidays:**  
Nine (9) specific and one (1) floating

Income Continuation (disability), Deferred Compensation 457b and Flex Plan programs also available.

**This benefit summary is for informational purposes only. It is not intended as an implied contract of employment.**