



DEPARTMENT OF HEALTH AND HUMAN SERVICES

NAVAJO REGION
INDIAN HEALTH SERVICE



VACANCY ANNOUNCEMENT

FD-08-97

OPENING DATE

September 26, 2008

CLOSING DATE

October 9, 2008

POSITION

Food Service Worker

LOCATION AND DUTY STATION

Hospital Food Services
Fort Defiance Indian Hospital- Fort Defiance, AZ

GRADE/SALARY

WG-7408-02, \$11.79 per hour

NUMBER OF VACANCIES

One (1) Vacancy: MD1601

APPOINTMENT: Permanent

WORK SCHEDULE: **Full Time

AREA OF CONSIDERATION: Commuting Area

PROMOTION POTENTIAL: No Known Potential

SUPERVISORY/MANAGERIAL: NO

HOUSING: Private Housing **ONLY**

TRAVEL/MOVING: NO EXPENSES PAID

***Will require shift work to include days, nights, weekends and Holidays.*

DUTIES: Prepares beverages, uncooked food items, nourishments, supplemental feedings and special formulas according to standardized recipes. Checks and delivers nourishments to care units. Provides assistance to cooks in the food preparation area. Sets up assigned station on the tray line with the correct supplies and food items, disassembles and cleans the station after the serving period. Serves and replenishes cafeteria lines at scheduled times. During the patient tray assembly, selects and places food items on patient trays, according to regular or modified menu, individual diet cards, and/or patient selections. Can identify obvious discrepancies between the prescribed diets and the food times designated by the menu. Delivers and picks up patients trays. Reports patient's comments and complaint to the supervisor or dietitian. Serves and replenishes cafeteria line at scheduled times.
Sanitation/Safety: Uses established policies and procedures, maintains a sanitary, safe working environment for employees and food production, by using proper personal hygiene and universal precautions to protect self and all who come in contact with products prepared in the department. **Record keeping:** Answers telephone calls, promptly, courteously and takes appropriate action. Maintains pertinent patient diet records. May assist with recording meal counts, physical inventory and is able to occasionally receive food deliveries, following correct procedures. Prepares work orders in writing for maintenance repair of kitchen equipment. Performs all other duties as assigned.

QUALIFICATION REQUIREMENTS: YOUR DESCRIPTION OF WORK EXPERIENCE, LEVEL OF RESPONSIBILITY, AND ACCOMPLISHMENTS WILL BE USED TO DETERMINE THAT YOU MEET THE FOLLOWING REQUIREMENTS.

BASIC QUALIFICATIONS: Your description of work experience, level of responsibilities and accomplishments will be used to determine that you meet the job elements for this position.

- Element 1: Ability to do Kitchen Related Math (Screen Out)
- Element 2: Ability to do Quantity Food Preparation
- Element 3: Special Practices in Food Service Work
- Element 4: Work Practices (includes cleanliness, neatness and concern for sanitation.)

SEE ATTACHED SUPPLEMENTAL QUESTIONNAIRE FOR DEFINITIONS.

CONDITION OF EMPLOYMENT: Immunization Requirement -- All persons born after 12-31-56 must provide proof of immunity to Rubella and Measles. Serology testing to confirm immunity and/or immunizations will be provided free of charge. Special consideration may be allowed to individuals who are allergic to a component of a vaccine, have a history of severe reaction to a vaccine, or who are currently pregnant. This applies to candidates for positions in any Service Unit or any Area Office position which requires regular work at a Service Unit.

THIS POSITION IS LOCATED IN A TOBACCO-FREE ENVIRONMENT 



REASONABLE ACCOMMODATION: This agency provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for any part of the application and hiring process, please notify the agency. The decision on granting reasonable accommodation will be on a case-by-case basis.

NOTE: Refer to OPM Operating Manual Qualification Standard Handbook or IHS Excepted Service Qualification Standard, Series WG-7408 for complete information. Substitution of education for experience will be made in accordance with those standards. For more complete information, contact your servicing Personnel Office.

WHO MAY APPLY:

Merit Promotion Plan (MPP) Candidates: Applications will be accepted from status eligibles (e.g., reinstatement eligibles and current permanent employees in the competitive Federal service) and from current permanent IHS employees in the Excepted Federal Service who are entitled to Indian Preference.

Excepted Service Examining Plan (ESEP) Candidates: Applications will be accepted from individuals entitled to Indian Preference. Current Permanent IHS Excepted Service employees and Competitive Service employees or Reinstatement eligibles entitled to Indian Preference may also apply under the provisions of the Indian Health Service Excepted Service Examining Plan. These candidates MUST indicate on their application whether their application is submitted under the IHS Excepted Service Examining Plan or both.

Applications will also be accepted from individuals eligible for non-competitive appointment (e.g., applicants eligible for appointment under the Veterans Readjustment Act, the severely handicapped, those with a 30% or more compensable service-connected disability).

INFORMATION FOR DISPLACED EMPLOYEES REQUESTING SPECIAL SELECTION PRIORITY CONSIDERATION UNDER THE INTERAGENCY CAREER TRANSITION ASSISTANCE PROGRAM (ICTAP):

If you are a displaced Federal employee, you may be entitled to receive special priority selection under the ICTAP. To receive this priority consideration, you must:

1. Be a displaced Federal employee. You must submit a copy of the appropriate documentation such as RIF separation notice, a letter from OPM or your agency documenting your priority consideration status with your application package. The following categories of candidates are considered displaced employees.
 - A. Current or former career or career-conditional (tenure group I or II) competitive service employees who:
 1. Received a specific RIF separation notice; or
 2. Separated because of a compensable injury, whose compensation has been terminated, and whose former agency certifies that it is unable to place; or
 3. Retired with a disability and whose disability annuity has been or is being terminated; or
 4. Upon receipt of a RIF separation notice returned on the effective date of the RIF and submits a Standard Form 50 that indicates "Retirement in lieu of RIF"; OR
 5. Retired under the discontinued service retirement option; or
 6. Was separated because he/she declined a transfer of function or directed reassignment to another commuting area.
 - OR
 - B. Former Military Reserve or National Guard Technicians who are receiving a special Office of Personnel Management (OPM) disability retirement annuity under section 8337 (h) or 8456 or Title 5 United States Code.
2. Be applying for position at or below the grade level of the position from which you have been separated. The position at or below must not have a greater promotion potential than the position from which you are separated.
3. Have a current (or last) performance rating of record of at least fully successful or equivalent. This must be submitted with your application package. (This requirement does not apply to candidates who are eligible due to compensable injury or disability retirement.)
4. Occupy or be displaced from a position in the same local commuting area of the position for which you are requesting priority consideration.
5. File your application by the vacancy announcement closing date and meet all the application criteria (e.g., submit all required documentation, etc)
6. Be rated well qualified (a score of 80 on a rating scale of 70 to 100) for the position including documenting selective factors, equality ranking factors, physical requirements with reasonable accommodations and is able to satisfactorily perform the duties of the position upon entry.

SEE ATTACHED SUPPLEMENTAL QUESTIONNAIRE FOR DEFINITIONS.

NOTE: The *Declaration for Federal Employment (OF-306)* and *IHS Addendum to the Declaration for Federal Employment* must be completed and submitted with original signature to determine your suitability for Federal employment, to authorize a background investigation, and to certify the accuracy of all the information in your application. Responding “yes” to any one of these two questions on the *IHS Addendum* can make you ineligible for employment in this position. **If you make a false statement in any part of your application, you may not be hired; you may be fired after you begin work; or you may be fined or jailed.**

HOW & WHERE TO APPLY: All applicants must submit *ONE* of the following to the Fort Defiance Indian Hospital, Personnel Department, P. O. Box 649, Fort Defiance, AZ 86504, by the close of business (5:00 PM) on the closing date. For more information contact: *Sarah V. Morgan, HR Specialist* at (928) 729-8265.

1. OF-612, Optional Application for Federal Employment; **OR**
2. Resume; **or**
3. Other written application format plus college transcripts, a copy of your most recent performance appraisal, any other necessary documentation pertinent to the position being filled.

A *copy* of an *Official Bureau of Indian Affairs Preference Certificate, BIA Form 4432*, signed by the appropriate BIA Official, *must be submitted if the applicant claims Indian Preference*. Navajo Area Indian Health Service employees claiming Indian Preference need not submit the BIA Form 4432, but must state such documentation is contained in their Official Personnel Folder.

INFORMATION REQUIRED FOR RESUMES AND OTHER APPLICATION FORMATS: Resumes or other application formats must contain all of the information listed below in sufficient detail to enable the personnel office to make a determination that you have the required qualifications for the position. **SPECIFICALLY, THE INFORMATION PROVIDED UNDER #8 (HIGH SCHOOL), #9 (COLLEGES AND UNIVERSITIES) AND #10 (WORK EXPERIENCE) WILL BE USED TO EVALUATE YOUR QUALIFICATIONS FOR THIS POSITION. FAILURE TO INCLUDE ANY OF THE INFORMATION LISTED BELOW MAY RESULT IN LOSS OF CONSIDERATION FOR THIS POSITION.**

1. Announcement Number, Title and Grade of the job for which you are applying.
2. Full Name, Mailing Address (with Zip Code) and Day and Evening Phone Numbers (with Area Codes).
3. Social Security Number.
4. Country of Citizenship.
5. Veteran's Preference Certificate: DD-214, indicating discharge and/or SF-15 if claiming 10-point preference. Veteran's Preference is not applicable to current DHHS permanent employees, Federal employees with competitive status, or reinstatement eligibles.
6. Copy of the latest SF-50, Notification of Personnel Action, if current or prior Federal employee.
7. Highest Federal civilian grade held (give series and dates held).
8. High School: Name, City, State (Zip Code if known) and date of Diploma or GED.
9. Colleges and Universities: Name, City, State (Zip Code if known), majors, type and year of any degrees received (if no degree, show total semester or quarter hours earned); preferably attach transcripts.
10. Work Experience (Paid and Non-Paid): Job title, duties and accomplishments, employer's name and address, supervisor's name and phone number, starting and ending dates (month/year), hours per week, and salary.
11. Indicate if we may contact your current supervisor.
12. Job related training courses, skills, certificates, registrations and licenses (current only), honors, awards, special accomplishments.

ADDITIONAL INFORMATION WILL NOT BE SOLICITED BY THIS OFFICE.

NOTE: Persons who submit incomplete applications will be given credit only for the information they provide and may not, therefore, receive full credit for their veteran preference determination, Indian preference, education, training, and/or experience.

ADDITIONAL SELECTIONS: Additional or alternate selections may be made within 90 days of the date of the certificate issued if the position becomes vacant or to fill an identical additional position in the same geographic location.

INDIAN PREFERENCE: Preference in filling vacancies is given to qualified Indian candidates in accordance with the Indian Preference Act. In other than this, the IHS is an Equal Opportunity Employer.

VETERANS PREFERENCE: Veterans who are preference eligible or who have been separated from the armed forces under honorable conditions after three (3) years or more of continuous active service may apply.

SELECTIVE SERVICE CERTIFICATION: If you are male born after 12-31-59, and you want to be employed by the Federal Government, you must (subject to certain exemptions) be registered with the Selective Service System. Submit a copy of registration to verify compliance.

EQUAL EMPLOYMENT OPPORTUNITY: SELECTION FOR POSITIONS WILL BE BASED SOLELY ON MERIT WITH NO DISCRIMINATION FOR NON-MERIT REASONS SUCH AS RACE, COLOR, RELIGION, GENDER, SEXUAL ORIENTATION, NATIONAL ORIGIN, POLITICS, MARITAL STATUS, PHYSICAL HANDICAP, AGE, OR MEMBERSHIP OR NON-MEMBERSHIP IN AN EMPLOYEE ORGANIZATION. PROMOTION OR APPOINTMENTS WILL NOT BE BASED ON PERSONAL RELATIONSHIP OR OTHER TYPES OF PERSONAL FAVORITISM OR PATRONAGE.

/S/ _____
Human Resource Clearance/Date

EACH APPLICATION FORM AND DOCUMENT MUST BE INDIVIDUALLY IDENTIFIED BY THIS ANNOUNCEMENT NUMBER – **FD-08-97** ALL ORIGINAL DOCUMENTS AND COMPLETED APPLICATION FORMS MUST BE DUPLICATED BY THE APPLICANT BEFORE SUBMISSION AS WE DO NOT HONOR XEROX REQUESTS. THE APPLICATION AND ATTACHMENTS BECOME THE PROPERTY OF THIS PERSONNEL OFFICE AND WILL NOT BE RETURNED. ORIGINAL SIGNATURES ARE REQUIRED ON THE APPLICATION FORM AND THE SUPPLEMENTAL QUESTIONNAIRE. ONLY MATERIAL SUBMITTED BY THE CLOSING DATE WILL BE CONSIDERED.

Electronic or faxed application or documents will not be accepted.

Applications mailed using government postage or through an internal government mail system will not be considered.

SUPPLEMENTAL EXPERIENCE STATEMENT

(To accompany OF-612 or Resume)

Food Service Worker, WG-7408-02

NAME: (Mr., Mrs., Miss) _____ BIRTH DATE: _____
(First, Middle, Maiden (if applicable), Last) (Month, Day, Year)

NOTE TO APPLICANTS: Use Columns II and III to answer questions to Column I. Use additional plain sheets of paper, if needed.

COLUMN I	COLUMN II Indicate Job No. or Experience block from OF-612/Resume to which this refers.	COLUMN III In this column, write your answers to the questions in Column I. For education, include formal school, trade school, military classes, etc.; state subjects & grades, tell experience applicable to the position, paid or non-paid, part or full-time & hobbies appropriate to the job.
1. <u>ABILITY TO DO KITCHEN RELATED MATH (SCREEN OUT)</u> . This is the ability to count servings, determine supplies available and needed. What in your background shows you possess this ability?		

SUPPLEMENT EXPERIENCE STATEMENT
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COLUMN I	COLUMN II	COLUMN III
<p>2. <u>ABILITY TO DO QUANTITY FOOD PREPARATION.</u> This is the candidate's ability to assist in preparing quantities of food for large groups of people. This includes the ability to judge ingredients or products prepared in quantities by smell, taste, appearance, or consistency; the ability to follow recipes and cook's worksheets; and knowledge of food preparation methods. What in your background indicates you possess this ability?</p> <p>3. <u>SPECIAL PRACTICES IN FOOD SERVICE WORK.</u> This is the candidate's ability to serve modified diets and/or set up patient trays and employee meals in an attractive, accurate manner with required foods and other items. This includes the ability to deliver meals, nourishments and special feedings to patient area per written departmental policies. What in your background shows you possess this ability?</p>		

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COLUMN I	COLUMN II	COLUMN III
<p>4. <u>WORK PRACTICES</u> <u>(Includes Cleanliness, Neatness,</u> <u>and Concern for Sanitation).</u> This is the ability to keep one's own work area neat, clean and in order; and to maintain the grooming and personal hygiene expected of a food service worker. What in your background shows you possess this ability?</p>		

After completing this form, look it over carefully to make sure that you have signed it and answered all questions. Be sure that you have given complete information about your experience. You cannot be given credit for work you do not tell us about.

STATEMENTS CONCERNING QUALIFICATIONS MAY BE VERIFIED BY THE OFFICE OF PERSONNEL MANAGEMENT, EXAGGERATION OR MISSTATEMENTS MAY BE CAUSE FOR YOUR DISQUALIFICATION OR LATER REMOVAL FROM THE SERVICE.

CERTIFICATION

I CERTIFY that all of the statements made are true, complete and correct to the best of my knowledge and belief and are made in good faith.

Signature of Applicant: _____ Date: _____