***Submit completed worksheet to:***

*Siskiyou County Clerk, 510 N Main St, Yreka, CA 96097*

# **AGENDA WORKSHEET**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[x]**  |  | **Time Requested:** |  | **Meeting Date:** | **02/01/2022** |
| ***OR*** |
| **Consent** | **[ ]**  |  |
| **Contact Person/Department:** | **Angela Davis/CAO** | **Phone:** | **842-8005** |
| **Address:** | **1312 Fairlane Road, Yreka** |
| **Person Appearing/Title:** | **Angela Davis/CAO** |
| **Subject/Summary of Issue:** |
| Due to the resignation of the Director of General Services, a full recruitment for the position was implemented and administered. As a result, the recommended successful candidate is Ms. Joy Hall.Ms. Hall's County employment began in October of 2006. Ms. Hall's County career includes employment in a variety of departments such as Health and Human Services Agency, Public Health, Community Development Department, and the Department of General Services. Throughout her tenure she has held various positions including fiscal classifications, Supervisor, Administrative Services Manager II and Project Coordinator. Ms. Hall’s experience, skills and knowledge is the basis for the recommendation to appoint Ms. Joy Hall to the position of Director of General Services effective February 6, 2022. |
| **Financial Impact:** |
| **NO** | [x]  | *Describe why no financial impact:* Filling vacant position |
| **YES** | [ ]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: |  |  |  |  |  |
| Fund:  |  |  | Description: |  | Org.: |  | Description: |  |
| Account: |  |  | Description: |   |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |  |
|  |
| **Recommended Motion:** |
| It is recommended that the Board appoint Ms. Joy Hall to the position of Director of General Services effective February 6, 2022.  |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |
| *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |
|  |  |
| Personnel |       | *Other:* |       |
| CAO |       |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 12:00 p.m. on the Wednesday prior to the Board Meeting.*** Revised 1/15/15