***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **December 10, 2024** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Angela Davis / County Administration** | **Phone:** | **530-842-8005** |
| **Address:** | **1312 Fairlane Rd, Suite 1** |
| **Person Appearing/Title:** | **Angela Davis / County Administration Officer**  |
| **Subject/Summary of Issue:** |
| Due to the retirement of the Chief Probation Officer effective December 14, 2024, it is recommended the Board of Supervisors appoint an Interim Chief Probation Officer effective December 15, 2024 and until the recruitment process is completed and a new Chief Probation Officer is appointed by the Board. This recommendation requests the Board appoint Stacey Jackson as the Interim Chief Probation Officer as she is currently the Deputy Chief Probation Officer and will insure continuity of services and business operations. |
| **Financial Impact:** |
| **NO** | [x]  | *Describe why no financial impact:* Presentation and staff direction only |
| **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 the Board appoint Stacey Jackson as the Interim Chief Probation Officer effective December 15, 2024 and until the position of Chief Probation Officer is appointed by the Board. |
| **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 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021