Supplemental Questionnaire for

Clinical Assistant II - Immunizations

Please read through the instructions and the questionnaire carefully before you fill it out. It is very important that you answer the questions as completely and accurately as possible.

INSTRUCTIONS

The Utah County Human Resources Office appreciates your interest in this position. Since this questionnaire is an important part of the selection process for this position, **it must be fully completed.** It has been prepared to give applicants the same opportunity to fully explain their background as it relates to this position. In this questionnaire you will be asked to describe your past experience in performing certain duties. **Do not substitute your resume or any other material for a response to the questions contained in this questionnaire.** *Any work experience listed on this supplemental questionnaire must be indicated on your application.* We are only interested in your past experience, not in titles of positions you have held, or in your belief that you could do the job if given the chance. Please follow the instructions carefully for each question. Please write clearly.

The information you provide will be evaluated to determine your eligibility for further consideration.

Please type or use black ink (for reproduction purposes). Please attach additional

pages using the same format when more space is needed. Please submit all application materials to Utah County HR Office, 100 East Center, Suite 3800, Provo, Utah, 84606.			
Name (please print)	 Date		
Job Announcement Posting #			
Last four numbers of Social Security #: XXX	- X X		
PLEASE READ CAREFULLY BEFORE SIGNING: The answers to t my knowledge. I understand that falsification of information may resu	• •		
Signature:	Date [.]		

PΙε	ease describe in detail the length and	I scope of your experience in the fo	ollowing area	s:	
1.	Please detail your work experier reviewing client paperwork and	documentation.		J	
	1	Number of months in this function:		full time	part time
2.	Describe your clerical skills. Gives used word processing, data ent your current or prior position.				
	·	Number of months in this function:	fı	ull time p	part time

Please answer the questions as completely as you can. Remember, we are interested in a description of your past experience and not in the titles of positions you have held. Identify your employer(s) for all the experience you describe.

3.	What is your work experience in receiving and responding to public complaints and inquiries?				
		Number of months in this function:	full time	part time	
4.	Please review your experience				
		Number of months in this function:	full time	part time	
	a. fee collection				
	h manaissing and giving manai	into for novement of food			
	b. receiving and giving recei	pts for payment of fees			

c. maintaining a cash drawer
d. preparing daily deposits

This position may require bilingual Spanish communications skills. Please rate your skill level in the following areas:

a: Speaking Spanish:

None

Beginner

Intermediate

Advanced

Superior

Fluent

b: Reading Spanish

None

Beginner

Intermediate

Advanced

Superior

Fluent

c: Writing Spanish

None

Beginner

Intermediate

Advanced

Superior

Fluent