

Supplemental Questionnaire
for
Clinical Assistant II - Health Dept. / Nursing Division

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 Personnel 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 Personnel Office, 100 East Center, Suite 3800, Provo, Utah, 84606.

Name (please print)

Date

Job Announcement Posting # _____

Last four numbers of Social Security #: X X X - X X - ____ ____ ____ ____

PLEASE READ CAREFULLY BEFORE SIGNING: The answers to the following questions are true and complete to the best of my knowledge. I understand that falsification of information may result in my disqualification or removal from a County position.

Signature: _____ Date: _____

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.

Please describe in detail the length and scope of your experience in the following areas:

1. Please detail your work experience in client in-take processes: registering, receiving and reviewing client paperwork and documentation

Number of months in this function: _____ full time part time

2. Describe your clerical skills. Give a detailed work related example of how you have used word processing, data entry, spreadsheets and other computer programs in your current or prior position.

Number of months in this function: _____ full time part time

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 in:

a. fee collection Number of months in this function: _____ full time part time

b. receiving and giving receipts for payment of fees

c. maintaining a cash drawer

d. preparing daily deposits

5 Preference may be given for 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