## CITY OF MILFORD

**OPEN COMPETITIVE NO. 23-12** 

## CLERK A

### POSTING DATE: November 15, 2022

#### CLOSING DATE: December 2, 2022

**NOTICE TO ALL APPLICANTS:** This opening is available to all City employees and the general public.

<u>NOTE</u>: The list we create will be used to fill openings in the same classification in other departments for up to one year.

SALARY RANGE: The position is a Grade 24 and provides for a weekly salary as follows:

\* New employees are customarily hired at the minimum salary.

### NOTE: Initial notification of qualification will be sent via email.

<u>GENEROUS BENEFITS</u>: The City offers the following benefits:

- Medical & Dental insurance effective 1<sup>st</sup> day of hire
- Traditional Pension Plan/Defined Benefit Plan (10-year vesting)
- o 457 Saving Plan
- o Free Life Insurance
- o Weekly Pay

- Paid Time Off Separate Vacation Pay, Sick Pay, Personal Business Pay, Bereavement Pay
- Paid Holidays 13 days per year
- Employee Assistance Program
- Free Access to Employee Fitness Center
- Wellness Initiatives

<u>SUMMARY OF POSITION</u>: This is moderately difficult and varied clerical work. Performs a variety of complex and responsible clerical duties according to clearly defined principles and is expected to exercise independent judgment based upon knowledge gained through experience in the performance of these duties.

<u>MINIMUM QUALIFICATIONS</u>: Graduation from high school, including or supplemented by post-secondary business and/or computer courses and one (1) year of experience performing general clerical and office work using word processing OR any equivalent combination of formal education/training and/or work experience. General computer skills including word processing and email required. Some spreadsheet knowledge helpful.

<u>SCOPE OF EXAMINATION</u>: Qualified applicants will be given an online keyboarding exam (pass/fail) that will test for the ability to type at least 35 words per minute with an error rate no higher than 95%. Those who pass the keyboarding exam will go on to the performance examination weighted at 50% (Basic Excel, Proofreading, and Customer Service) which will test for the ability to utilize various office automated software and applications required to perform the essential duties of the position. Those who pass the performance exam will then be ranked according to their education, training and experience as indicated on the application supplement No. 23-12 and weighted at 50%.

## FILING REQUIREMENTS: An Employment Application, Application Supplement #23-12 and

<u>a resume</u> must be submitted on or before <u>December 2, 2022</u>, to the Human Resources Department, Parsons Government Complex, 70 W. River St., Milford, CT or <u>HRrecruit@milfordct.gov</u>. For forms and detailed application instructions, go to <u>www.ci.milford.ct.us/hr/pages/jobs</u> then select *Clerk A*.



#### CLERK A

#### GENERAL SUMMARY OF DUTIES

This is moderately difficult and varied clerical work. Performs a variety of complex and responsible clerical duties according to clearly defined principles and is expected to exercise independent judgment based upon knowledge gained through experience in the performance of these duties.

#### **ILLUSTRATIVE DUTIES**

Independently composes, types, processes, proofreads and records correspondence applying a knowledge of departmental rules, regulations and policies; prepares routine narrative and other reports; maintains indices and files.

Types statistical or other tabular material exercising considerable judgment as to form and arrangement with the use of word processing system and / or spreadsheet and database management programs.

Interprets procedures and departmental policies and assists the public in the preparation of forms and statements; may receive and adjust routine complaints.

Checks documents and reports for accuracy; carries out routine correspondence relative to statutory guidelines; performs mathematical computations.

Operates a variety of office equipment including, but not limited to, personal computer, typewriter, copier, printer, fax, scanner, and calculator.

Receives calls and screens same, answering questions when possible or referring to appropriate sources. Provides information on policy and departmental functions to the public and follows through on proper routing of correspondence on related matters.

Performs related work as required.

#### REQUIRED KNOWLEDGES, SKILLS AND ABILITIES

Working knowledge of office practices, procedures, terminology and equipment.

Good knowledge of, and ability to utilize, various automation software, including word processing, spreadsheets and data management programs.

Good knowledge of business English and basic math.

Good verbal and written communication skills.

Ability to perform various tasks in a fast-paced office environment.

Good organizational skills.

Ability to maintain complex clerical records and to prepare reports from such records.

#### CLERK A

#### REQUIRED KNOWLEDGE, SKILLS & ABILITIES (cont'd.)

Ability to make minor decisions in accordance with laws, ordinances and regulations.

Ability to deal with the public tactfully and courteously and to work harmoniously with other employees.

Skill to type at a minimum speed of 35 WPM with 95% accuracy using a word processing program.

Ability to learn applicable software applications.

Ability to enter text and numeric data into a computer database with speed and accuracy.

Ability to understand and follow oral and written directions.

#### MINIMUM EDUCATION & EXPERIENCE REQUIRED

Graduation from high school, including or supplemented by post-secondary business and /or computer courses and one (1) year of experience performing general clerical and office work using word processing OR any equivalent combination of formal education/training and/or work experience.. General computer skills including word processing and email required. Some spreadsheet knowledge helpful.

NOTE: Some position may require the ability to obtain certain certification(s) and/or professional designation(s) relevant to the department/division the position is part of. Said certification and/or designation shall be obtained in a period of time not to exceed four (4) years from the date of appointment. Any requests for extension of this timeframe will be reviewed on a case by case basis.

Civil Service Commission City of Milford, CT Retyped 5/91 Revised 07/2009 Revised: 08/18/14 Revised: 03/2016

## **CITY OF MILFORD, CONNECTICUT**



- Founded 1639 -70 West River Street, Milford, CT 06460 (203) 783-3239 <u>HRrecruit@milfordct.gov</u>

Human Resources Department

# **APPLICATION FOR EMPLOYMENT & EXAMINATION**

## **INSTRUCTIONS FOR COMPLETION:**

THIS APPLICATION FORM CONSTITUTES A PART OF THE EXAMINATION PROCESS.

**Every section must be completed in full** even if resume or other supporting documents are attached. You should not direct this Office to refer to a resume for information that is being asked on the application form. You must answer <u>all</u> questions completely and accurately in order for your application to be given the proper consideration.

## **INCOMPLETE APPLICATION WILL BE REJECTED.**

- LATE APPLICATIONS WILL NOT BE ACCEPTED. Applications must be <u>received</u> in the Human Resources Department by the application deadline as stated on the job announcement. You must complete an application form in ink or typed print. You can complete an application form online at the City's website and print the application. <u>You must sign your application in ink</u> or with digital signature. Application closing dates are noted on each job announcement.
- ALL APPLICANTS SHOULD READ THE JOB ANNOUNCEMENT OF THE JOB FOR WHICH YOU ARE APPLYING. Specific job requirements will be noted under the section titled "Minimum Qualification Requirements."
- EACH SECTION IN THE APPLICATION FORM MUST BE COMPLETED. You can use additional sheets of papers to attach to your application if you need more space to provide complete information, especially as it pertains to your employment history. <u>Applications submitted without completing each section will be rejected</u>.
- **LICENSES AND CERTIFICATIONS** required for the position you are applying for must be listed and you must provide a copy of any and all licenses and certifications required, as stated on the job announcement. <u>Applications submitted without providing a copy of the required licenses/</u> certifications will be rejected.
- YOU MUST ATTACH A CLEAR COPY OF YOUR DRIVER'S LICENSE TO THE APPLICATION FORM if the job for which you are applying requires a driver's license. Applications submitted without providing a copy of your driver license will be rejected.
- YOU MUST COMPLETE EACH SECTION OF EMPLOYMENT HISTORY. You must complete "Describe Work Performed" completely. Do not write "see resume" in lieu of completing this information on the application form. <u>Applications submitted without completing</u> each line of this section will be rejected.
- **COMPLETING THE INVITATION TO SELF-IDENTIFY IS VOLUNTARY.** This information is needed to meet Federal and State reporting requirements and is also used to evaluate the effectiveness of our recruiting and testing procedures. This sheet is not seen by anyone making the hiring decision. <u>Applications will not be rejected if you choose not to complete this voluntary information section</u>.

# EMPLOYMENT APPLICATION

DO NOT WRITE IN THIS SPACE				
Πq	Rev. by:			
Reaso	n:			

Human Resources Department City of Milford 70 West River Street Milford, CT 06460 (203) 783-3239

An Equal Opportunity Employer

Position applying for

Date

#### PLEASE TYPE OR PRINT CLEARLY IN BLACK OR BLUE INK.

Entire application must be completed in order for application to be considered.

#### PERSONAL INFORMATION

Last Name	First Name	M.I.		000- Last 6 digits of Soc. Sec. No.
Home Address	(	City	State	Zip
Home Telephone	Mobile _		Email	
Are you legally eligible for employment in the l (If hired, you will be required to provide proof of elig		Yes No Are you	18 years of age or older?	P Yes No
Do you claim 5 points preference based on activ	ve duty in the U	JS Armed Forces? Attach copy	v of DD214 Yes	No
Do you claim 10 points veteran's disability prefer	rence? <i>Attach c</i>	copy of DD214 & other support	ing documentation	/es No
List any relatives currently employed with the	City: Name(s	s)	Job Title/[	Dept
Have you read the job description explaining t	he essential du	luties of the position for whic	h you are applying?	Yes No
Are you able to perform the essential functions	s of the positio	on for which you are applying	g? Yes No Da	ate available to start

			EDUCATION			
High School(s) attended		City/State		Did you gradu	ate?	
					Yes	No
					Yes	No
College/Institution attended	City/State	9	Dates attended	Degree/C	ertification	Major

#### EMPLOYMENT HISTORY

Have you ever been discharged or asked to resign from a job?	Yes	No	If yes, please explain:
--	-----	----	-------------------------

Have you previously worked for the City of Milford? Yes

No If yes, dates of employment:

Position/Department:

On the next page, list ALL present and past employment in reverse chronological order **BEGINNING WITH YOUR MOST RECENT EMPLOYMENT**. Applicants may be required to furnish satisfactory proof of employment history. Use additional pages if necessary. **Include resume with completed application**, however, resume WILL NOT substitute completion of application.

### **EMPLOYMENT HISTORY CONTINUED**

	EWIPLOTI	MENT HISTORY CONTINUED	
Employer	Address		Phone
Dates of Employment	Job title		Hours per week
Supervisor's name/title	Reason for leaving		
Number of employees supervised (i/a)	Describe wo	ork performed below DO NOT W	RITE "SEE RESUME":

Employer	Address		Phone
Dates of Employment	Job title		Hours per week
Supervisor's name/title		Reason for leaving	
Number of employees supervised (i/a) Describe we		k performed below DO NOT WRITE "SEE RESU	<u>ME"</u> :

Employer	Address		Phone
Dates of Employment	Job title		Hours per week
Supervisor's name/title		Reason for leaving	
Number of employees supervised (i/a) Describe		k performed below DO NOT WRITE "SEE RESU	<u>ME"</u> :

#### \*\*\*ONLY COMPLETE THE SECTIONS BELOW IF THEY ARE RELEVANT TO THE POSITION YOU HAVE APPLIED\*\*\* SDECIAL SVILLS/TDAINING

SPECIAL SKILLS/TRAINING
Typing speed: words per minute
Business machines (other than computers) you are able to operate:
What computer experience do you have?
Your skill level in Word can best be described as:
Your skill level in Excel can best be described as:
Your skill level in Outlook can best be described as:
Your skill level in PowerPoint can best be described as:
Your skill level in Access can best be described as:
Your skill level in Acrobat can best be described as:
Your skill level in Publisher can best be described as:
Describe any other software and level of skill or any other applicable abilities:

#### SPECIAL SKILLS/TRAINING

Please list/describe any specialized training, apprenticeship, certifications, licenses, skills, special skills and qualifications related to the job for which you are applying, such as machines you are able to operate, languages you speak and read or write well, computer skills besides those previously mentioned and any other special abilities or knowledge. Provide name and location where training was given, dates attended, subject of training, total number of training hours, and other details. Please also include any professional trade, business or civic activities and other offices held: (You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)

#### LICENSES, CERTIFICATIONS, REGISTRATIONS

If the position for which you are applying requires you to operate a vehicle, you must possess a valid driver's license and any special endorsements must be current and valid. NOTE: If applicable, if you are offered employment by the City of Milford, and if your driver's license is from another state, you will be required as a condition of employment to obtain a valid Connecticut Driver's License before you can begin work.

Do you have a valid driver's license? Yes

No State \_\_\_\_ License # \_\_\_\_\_ Classification \_\_\_\_\_

Expiration Date \_\_\_\_\_

Endorsements

FINALISTS WILL BE REQUIRED, UPON NOTIFICATION, TO SUBMIT A COPY OF THEIR DRIVING ABSTRACT. Note: Driving abstracts may be obtained at any Connecticut Department of Motor Vehicles office. This fee is at the finalist's expense.

PROFESSIONAL REFERENCES				
List three professional colleagues who are not your relatives or employees of The City of Milford we may contact.				
Name Phone Relationship				

IMPORTANT: Read each of the following sections carefully and completely. If you do not understand any portion of the statements that follow, ask for clarification. Your signature indicates that you have read and understand each of the provisions listed and that you agree to abide by the conditions stated therein.

**NOTICE TO PERSONS WITH DISABILITIES:** Testing arrangements to accommodate persons with disabilities will be made upon request of the applicant. If accommodation is requested, the applicant will be required to state what accommodation is needed.

**PRE-EMPLOYMENT MEDICAL EXAMINATION:** Applicants selected for employment will be required to pass a medical examination given by a physician designated by the City of Milford.

**PROBATIONARY PERIOD:** Employees serve a probationary period as determined by City policy or by any applicable collective bargaining agreement. Termination of employment during the probationary period may be with or without cause and is not subject to any appeal process or grievance procedure of any applicable collective bargaining agreement.

**DRUG POLICY:** It is the policy of the City of Milford to maintain a drug free workplace. Employees who are observed in possession of or using controlled substances (drugs) will be terminated and may have criminal actions filed against them. Employees in certain positions are subject to Federal laws requiring pre-employment, post-accident, and random drug testing.

UPON EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE YOUR SOCIAL SECURITY NUMBER.

#### PRE-EMPLOYMENT STATEMENT

**AGREEMENT:** I CERTIFY THAT ALL STATEMENTS MADE ON OR IN CONNECTION WITH THIS APPLICATION ARE TRUE, ACCURATE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT INCOMPLETE, FALSE, INACCURATE, OR MISLEADING INFORMATION GIVEN IN MY APPLICATION, INTERVIEW(S) OR DURING THE COURSE OF MY EMPLOYMENT MAY RESULT IN THE REJECTION OF THIS APPLICATION OR WITHDRAWAL OF A JOB OFFER. FURTHER, FALSE INFORMATION PROVIDED, WHETHER WILLINGLY OR ACCIDENTALLY, MAY RESULT IN DISCIPLINE OR IMMEDIATE DISMISSAL IF EMPLOYED, WHENEVER THE OMISSION OR FALSEHOOD IS DISCOVERED.

I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT NOR IS IT A GUARANTEE OR INDICATION OF EMPLOYMENT. I ALSO UNDERSTAND THAT SHOULD I BE GRANTED AN INTERVIEW, THE REPRESENTATIONS THAT MAY BE MADE AT THE INTERVIEW ARE NOT TO BE CONSTRUED AS CREATING ANY OBLIGATION, PROMISE OR CONTRACT ON BEHALF OF THE CITY OF MILFORD. SHOULD I BE EMPLOYED BY THE CITY, IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO ABIDE BY ALL THE RULES, POLICIES AND REGULATIONS OF THE CITY OF MILFORD, AS THEY MAY FROM TIME TO TIME BE IMPLEMENTED OR REVISED. IDENTIFICATION AND VERIFICATION OF ELIGIBILITY TO WORK IN THE UNITED STATES MUST BE SATISFIED FOR EMPLOYMENT.

I FURTHER UNDERSTAND THAT IN CONSIDERATION FOR EMPLOYMENT, AN INVESTIGATIVE BACKGROUND REPORT MAY BE PREPARED AT THE REQUEST OF THE CITY OF MILFORD, WHEREBY INFORMATION MAY BE OBTAINED FROM MY EMPLOYERS (PRESENT OR FORMER), EDUCATIONAL INSTITUTIONS, ALL BRANCHES OF THE U.S. MILITARY SERVICE, AND PUBLIC RECORDS MAINTAINED BY GOVERNMENT AGENCIES OR OTHERS, INCLUDING BUT NOT LIMITED TO CRIMINAL CONVICTION REPORTS, CREDIT REPORTS, ETC. I AUTHORIZE THE CITY OF MILFORD AND ITS DESIGNATED REPRESENTATIVE(S) TO PERFORM THIS INVESTIGATION, AND FURTHER AUTHORIZE PRESENT AND FORMER EMPLOYERS, REFERENCES AND OTHER PERSONS TO PROVIDE INFORMATION FOR THE INVESTIGATION. I ALSO AUTHORIZE THE CITY OF MILFORD TO RECEIVE CRIMINAL CONVICTION RECORDS PERTAINING TO ME, WHICH MAY BE IN THE FILES OF ANY CRIMINAL JUSTICE AGENCY

I UNDERSTAND THAT ACCEPTANCE FOR EMPLOYMENT SHALL DEPEND ON SATISFACTORY REPLIES FROM MY REFERENCES AND OTHER BACKGROUND CHECKS. ANY OFFER OF EMPLOYMENT MAY BE CONTINGENT UPON PASSING A DRUG TEST AND MEDICAL EXAMINATION. I AUTHORIZE MEDICAL PROVIDER(S) TO RELEASE ANY/ALL MEDICAL INFORMATION TO THE CITY PURSUANT TO ITS PRE-EMPLOYMENT PHYSICAL AND DRUG SCREEN PROCEDURES IN ACCORDANCE WITH HIPAA.

**RELEASE:** I HEREBY RELEASE AND HOLD HARMLESS ANY PERSON, CORPORATION, COMPANY FROM ANY AND ALL POSSIBLE DAMAGES, DIRECT OR CONSEQUENTIAL, IMMEDIATE OR REMOTE, OF ALL FORMS OR TYPES, THAT I MAY SUSTAIN OR ALLEGE TO SUSTAIN BY VIRTUE OF THAT PERSON, CORPORATION, COMPANY OR OTHER ENTITY COMPLYING WITH MY REQUEST TO FULLY AND COMPLETELY COMPLY WITH THE INVESTIGATION, INQUIRY OR INTERESTS OF THE CITY OF MILFORD, TO WHOM I HAVE MADE AN APPLICATION OF EMPLOYMENT AND IS THE BEARER OF THIS AUTHORIZATION.

I affirm and certify that I have read all of the information above and that all answers to the questions herein are complete, true and accurate to the best of my knowledge. I understand that any misrepresentation, falsification or omission of any facts may render this application void and will be cause for disqualification, whenever discovered.

SIGNATURE APPLICANT \_\_\_\_\_

DATE



City of Milford

## INVITATION TO SELF-IDENTIFY

## Position applying for (use the title that appears on the job announcement)

#### SECTION 1: CANDIDATE INFORMATION

It is the policy of the City of Milford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, gender, color, religion, creed, national origin, marital or veteran status, sexual orientation, gender identity or expression, disability or any other legally protected status, unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, all applicants are strongly urged to complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Milford with the requested information by checking the appropriate box in Section 4. This information will not affect in any way your employment opportunities. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.

SECTION 2: GENERAL	INFORMATION					
Name		Date				
Social Security Number 000		(Last six digits ONLY)				
SECTION 3: STATISTIC	CAL INFORMATIO	N				
	P	LEASE ANSWER THE FOLLOWING QUESTION:				
What is your race/ethn	icity? (Please mar	k the ONE BOX that describes the race/ethnicity category with which you primarily identify.)				
American Indian or Alaska Native Asian Black or African American Hispanic or Latino Native Hawaiian or Other Pacific Islander White Two or more races Gender	(Not Hispanic of who maintains tribal (Not Hispanic of including, for examp (Not Hispanic of All persons of (Not Hispanic of (Not of Hispanic)	Identification or Latino) All persons having origins in any of the original peoples of North and South America (including Central America), and affiliation or community attachment. or Latino) All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent le, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam. or Latino) All persons having origins in any of the black racial groups of Africa. Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race. or Latino) All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands. c or Latino origin.) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa. originarily identifies with two or more of the above race/ethnicity categories.				
SECTION 4: NON-PAR	TICIPATION					
I have read the above state	ement and have chos	Please check box if applicable				
	SECTION 5: RECRUITING INFORMATION					
How did you hear about thi	s job? (Please check	City Employee				
Other newspaper (give	name).	Human Resources or Department Bulletin Board				
City Website		Community Agency (give name):				
Internet (list site):		Professional Journal (give name):				
State of CT job site		Other (please specify):				



### CITY OF MILFORD

## CLERK A APPLICATION SUPPLEMENT #23-12

NAME

SOCIAL SECURITY NUMBER 000 - -

(Last six digits only)

For this examination, you will be filling out specific information about your education, training and experience. The information that you give will be used to find out how well your background qualifies you for this position. You must fill out this examination booklet completely in order to take part in this examination. THIS BOOKLET IS AN EXAMINATION.

On the pages that follow, you will be asked to supply factual information about your education, training, and the duties, responsibilities and accomplishments that are associated with the jobs which helped you qualify for the position for which you are applying. Your education, training, and experience will be scored according to how closely they relate to the various job components or factors of the position of Clerk A. Your score will be based only on what you include in this examination. Incomplete or illegible applications/supplements will be rejected.

This examination booklet, a completed Employment Application, a resume and a cover letter must be filed with the Human Resources Department by the last filing date noted in the job announcement, or bear a postmark no later than the last filing date: Information submitted after the last filing date <u>will not</u> be considered.

#### I. <u>EDUCATION</u>:

А.	Do you possess any of the following degrees? (If "Yes", specify the major field of study for which the degree was conferred.)					
	1.	High School D	iploma Yes	No		
	2.	Associate's	Yes	(Major)		No
	3.	Bachelor's	Yes	(Major)		No
	4.	Master's	Yes	(Major)		No
В.		•			d complete college course work, Major	
C.	2. Did you complete any post-secondary (technical or business school) education course(s) or training in Office Administration, Business, Management or a related field? If so, please specify number of courses.					
	Yes	s Num	ber of courses		No	
EXPERIENCE:						
Do	you	have at least on	e (1) year of profe	essional experi	ience performing general clerical :	and office work?
Yes	3	No.	of Years		No	

#### PART I. – EXPERIENCE

II.

# Please follow column headings completely. Use whatever terms would be most indicative of the level and scope of your responsibilities. You may use additional pages, if necessary.

A. Describe your experience performing clerical duties where you exercised independent judgment to complete assigned tasks, duties and responsibilities.

Name of Employer:	Dates & No. of Hours/Week Performing This Job:
Supervisor's Name:	Supervisor's Title:
Your Job Title & Dutles:	

Name of Employer:		Dates & No. of Hours/Week Performing This Job:		
Supervisor's Name:		Supervisor's Title:		
Your Job Title & Duties:				

#### PART II. - SPECIALIZED TRAINING

List all specialized training (seminars, special courses, advanced training, etc.) that you have attended/completed within the past five (5) years, relevant to administrative/clerical work.

SPONSORING ORGANIZATION	DATES ATTENDED & NO. OF HOURS

On the following pages are a variety of statements which are related to this position. For each of those statements, circle the letter for the level described below which best reflects your experience, education or training as it relates to that item.

- A I have applied this Knowledge, Skill or Ability in an actual setting while performing a job.
- B I have education or training related to this Knowledge, Skill or Ability, but have not applied it in an actual job.
- C I have little or no experience, education or training related to this Knowledge, Skill or Ability.

For each A or B answer, give evidence, in detail, in the space provided of how you acquired this Knowledge, Skill or Ability listed, through education and/or training

1. Working knowledge of office practices, procedures, terminology and equipment.

Circle the Appropriate Letter A B C

Employer/School:

Details:

2. Ability to employ strong customer service skills.

Circle the Appropriate Letter A B C

Employer/School:

Details:

3. Ability to organize the office environment and/or workload.

Employer/School:

Details:

4. Ability to communicate, both verbally and in writing.

Circle the Appropriate LetterABC

Employer/School:

Details: