Financial Aid Specialist IV Skills Survey

Name:	Date:					
Position:						
This information becomes part of yo your answers. Please fill out this for category that best shows the depth	m as compl	etely as possible	e. Under co	lumns three th	rough six, chec	
Years of relevant experience: Full time work Part time work (*relevant is defined as: customer service, dealing with the public, dealing with forms, accounts, records, etc.)	Check Degrees (Attach Transcripts): HS/GED Certificate Area Associate Major Bachelor Major					
	Model/ Version Used	Years of Experience	Training only (1)	Preformed with help (2)	Performed unaided (3)	Instructed others (4)
Office Equipment:						
(May be tested) Keyboarding (wpm)						
Copy Machine						
Fax Machine						
Multi-line phones						
Calculator						
Document Scanner						
Other:						
Computer Hardware:						
PC						
Macintosh						
Other:						
Operating Systems:						
Windows						
Apple						
Othor						

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	Model/			Preformed	Performed	
	Version Used	Years of Experience	Training only (1)	with help (2)	unaided (3)	Instructed others (4)
Word Processing Software:		xperience	J, (2)	(-)	(0)	Guildi S (1)
Microsoft Word						
Other:						
Spreadsheet Software:						
Microsoft Excel						
Other:						
Database Software:						
Microsoft Access						
Other:						
Desktop Publishing Software:						
Microsoft PowerPoint						
Other:						
Email Software:						
Microsoft Outlook						
Accounting Software:						
Specify:						

Signature:	Date:

I have answered the above information to the best of my knowledge.