Sample Screening Form

Applicant Name_____

Evaluator Printed Name _____ Date _____

All applicants must meet minimum qualifications. All evaluations must be completed in ink. Changes are permissible, but should be initialed and dated.

PRELIMINARY SCREENING - MINIMUM QUALIFICATIONS

Bachelor's Degree

Yes [ ] or No [ ] Comments:

_____

Experience compiling and analyzing information

Yes [ ] or No [ ] Comments:

_____

Experience identifying and defining problems/alternatives and developing recommendations.

Yes [ ] or No [ ] Comments:

_____

Experience presenting information clearly and concisely

Yes [ ] or No [ ] Comments:

_____

Experience delivering student-centered customer service

Yes [ ] or No [ ] Comments:

_____

Good knowledge of the structure and chain of responsibilities within a university

Yes [ ] or No [ ] Comments:

_____

If the applicant meets all of the minimum qualifications, move to screening the preferred qualifications:

INTERMEDIATE SCREENING – PREFERRED QUALIFICATIONS

Please rank each qualification 1 – 5, with 5 the highest.

Ability to operate independently, exercising independent judgment and discretion with little or no guidance, display strong organizational skills. Rank_____

Comments:

_____

Ability to display a strong work ethic. Rank_____

Comments:

_____

Ability to communicate effectively both in writing and orally. Rank_____

Comments:

_____

Ability to work cooperatively as part of a team with a variety of people. Rank_____

Comments:

_____

Ability to serve as liaison with other departments/institutions. Rank_____

Comments:

_____

Do not select candidates for interviews based only on rank. Candidate selection should come after discussion, and hopefully consensus, among all of the committee members.

Recommend for Interview

Yes [ ] or No [ ] Comments:

_____

_____

Evaluator Signature _____