

CITY OF NORMAN
SUPPLEMENTAL QUESTIONNAIRE
SANITATION WORKER II
(Sanitation Division)

Name: _____ **Date:** _____

This questionnaire is a supplement to your application and will be used for further evaluation of your education, training, and experience as it relates to the Sanitation Worker II position for which you applied. **FILL OUT THE QUESTIONNAIRE EVEN IF THIS INFORMATION IS ON YOUR APPLICATION/RESUME!**

1. Do you have a valid Oklahoma Commercial Driver's License, Class B? ___ Yes ___ No
2. Do you have experience driving a right or left hand refuse or similar truck or any equivalent combination of education and experience which provides the required knowledge, skills, and abilities? (For required knowledge, skills, and abilities, please refer to the employment announcement that is enclosed inside the application.)
___ Yes ___ No If **yes**, please explain.

3. Please list the types of trucks you have operated.

_____	_____
_____	_____
_____	_____
_____	_____

4. Have you used equipment or performed tasks that required good hand/eye coordination.
___ Yes ___ No If yes, please explain.

5. Why do you feel you would be the best-qualified applicant for this position?

6. What additional experience, training, certification, or special skills do you have that would relate to this position?

7. List any other information, including personal strengths, that you feel will aid us in determining your qualifications for this position.

EQUAL OPPORTUNITY EMPLOYER