14CI0525 PAYROLL AND BENEFITS ASSISTANT SUPPLEMENTAL QUESTIONNAIRE

This Supplemental Questionnaire will be used, along with the City/County Application and any other attachments, to determine if you meet the minimum qualifications. If more than five (5) qualified applications are received, the Questionnaire will be scored, and the score will be used to rank the qualified applicants on the eligible register and tied scores will not be broken. If there are five or less qualified applicants, they will be considered equally qualified and placed on the register in alphabetical order. While you must list your entire work history on the application form, you must restate the requested information in the format requested in the Supplemental Questionnaire to receive proper credit. Also, any employer/organization (paid or volunteer) listed on the Supplemental Questionnaire must be listed on the application form. You may attach one (1) additional sheet as needed to respond in detail to each question. Please provide the school/employer and dates of attendance/employment for each question. The Supplemental Questionnaire must be completed and returned with your City/County Application to the Montgomery City-County Personnel Department no later than 5 PM, December 10, 2014.

NAME: (Print)		
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:
TELEPHONE NUMBERS:	HOME:	CELL:
Your Agreement: (Read)		

By submission of this supplemental questionnaire to the application form, I hereby certify that all information on this supplemental questionnaire and any attached sheets are accurate and complete to the best of my knowledge and belief.

1. Describe your experience processing payroll for benefit recipients. Include a description of the steps that you used to process the payroll and the forms that are used in the process.

2. Describe your experience working with employee benefits. Include a description of the benefits that you have processed for employees and the steps that you used to process those benefits.

3. Describe your experience providing customer service to employees and benefit recipients. Also, describe your experience networking and communicating with benefit providers, insurance companies, etc. Specifically, describe why you were interacting with each individual or group of individuals. Provide an example of an especially difficult or complex situation that you had to resolve using your communication and/or customer service skills.

4. Describe your general clerical experience. Include a list of the clerical duties that you have performed starting with the most complex duties and ending with the least complex duties. Also, include a list of the computer programs that you have used starting with the program that you are most confident in using and ending with the program that you are least confident in using.