

STATE OF OREGON

SC-05

SKILL CODE SHEET
Complete and Attach to Your Application
For the Following Job:

0323 Public Service Representative 3

The Skill Codes below list a range of office support skills used in this job. Circle each number by the 3-letter code that describes your education/training or experience in each area. Be as accurate as you can in providing this information. Do not circle skill areas that you are not willing to use on the job.

TYPING/KEYBOARDING –

Net typing/keyboarding speed:

LTP 0-39 wpm QTP 40-54 wpm PTP 55 and above

MULTIPLE LINE PHONE –

Work experience using:

MLS 1 - 3 lines MLT 4 - 9 lines MLM 10 or more lines

DATA ENTRY

D/E Completion of training in Data Entry or experience in the input, update, correction, and retrieval of alpha/numeric data.

WRITTEN COMMUNICATION

COM Work experience composing general correspondence, such as letters and memos.

RECORDS MAINTENANCE

ALM Work experience with MANUAL ALPHABETIC filing systems.
ALA Work experience with AUTOMATED ALPHABETIC filing systems.
NUM Work experience with MANUAL NUMERIC filing systems.
NUA Work experience with AUTOMATED NUMERIC filing systems.

LEDS

LED LEDS Work experience or training

PUBLIC CONTACT -

Training/education or work experience in the following:

Telephone	In Person	Providing Information
PIP	PIS	Answer routine inquiries for information about programs or services provided by your employer.
PEP	PES	Explain rules, regulations, policies and procedures.
PDP	PDS	Communicate and/or explain decisions regarding the approval or denial of benefits or services.
PCP	PCS	Explain or refer to other state, federal, or county programs and or community resources.

OBTAINING INFORMATION

Training/education or work experience in the following:

Telephone	In Person	Providing Information
OIP	OIS	Obtain information from a client or customer to determine what services are needed or to gather information.
OCP	OCS	Obtain information from a client or customer to determine the nature of a problem or complaint.

COMPLAINT HANDLING

Training/education or work experience in the following:

Telephone	In Person	Providing Information
CHP	CHS	Receive complaints and route to someone else for resolution.
CRP	CRC	Receive complaints and attempt to resolve them directly with the client or customer.
CCP	CCS	Responsibility for resolving complaints expressed by clients or customers.
CAP	CAS	Contact with angry, upset, distressed or hostile clients or customers.

NOTICE

By signing this form, I certify that I have the above indicated qualifications and skills.

Signature

Social Security Number