
Training Coordinator
#27-00913-2
DEPARTMENT OF ROADS
Supplemental Questionnaire

Name: _____

Social Security Number: _____

To ensure that everyone has a chance to describe and include your own specific qualifications, all candidates for this position are being asked to complete this supplemental questionnaire as part of your application. Add more pages if needed. Make sure your name and Social Security number are on each sheet you submit. To be considered, your responses to this questionnaire must be on file or received at

Nebraska State Personnel
wrk4neb.dasper@nebraska.gov
301 Centennial Mall South
P. O. Box 94905
Lincoln, NE 68509-4905

or postmarked by **January 22, 2008**.

1. List 4 or more courses you have taught in the areas of Leadership, Succession Planning, Building Teams, and/or Strategic Thinking, along with a brief description of each.

2. List 4 or more courses you have developed in the areas of Leadership, Succession Planning, Building Teams, and/or Strategic Thinking, along with a brief description of each.

3. Briefly describe the process you follow when developing a new course.

4. Explain your experiences with teambuilding courses and activities, as well as any related certification you may hold.

5. Explain any Supervisory Experience you have had in a training environment. Include number of staff supervised, length of time in supervision, whom you reported to and the level of management that individual was at in the organization. Also provide a brief description of your duties and responsibilities in the position.