

Interview Paperwork Checklist

The following items *must* be turned in to HR department in order to complete the hiring process:

- □ All applications and resumes
- □ Official Transcripts, Professional Licenses and/or Diplomas
- □ Effective Hiring Phone Screen Form for *each* screened candidate (attach second page with questions/answers)
- □ Interview Panel Form (all interviewers should be listed)
- □ Interview Disclosure Statement (*if applicable*)
- □ Interview Questionnaire w/ answers (*for each interviewed candidate*)
- □ Interview Evaluation Form (*for each interviewed candidate*)
- □ Completed Interview Schedule Form
- □ Professional Reference Release Form (*signed by preferred candidate*)
- □ Completed Business Reference Form (*minimum of 2*) for preferred candidate
- Completed Applicant Review Form if recommended salary exceeds approved salary in NEOGOV, offer must be reviewed/approved by District Administrator and DHD

District 2 Public Health EFFECTIVE HIRING PHONE SCREEN

Position:			
Applicant Name:			Pul
		Attempts to Contact – date & time	
Date:		1.	
of Phone Screen		2.	
		3.	
Pro	gram Title	Travel	
Record Program with	thin which this position falls	Does the job require travel?	
_	-	- •	

Voice Mail Message Script: (speak slowly and clearly)	Message Left At:
I am calling with regard to's (applicant's name) application for the	Number:
position of with District 2 Public Health / County Health Dept.	Date:
Please call (phone number) by the end of business on	
(day) (date) to schedule an initial phone screen.	Time:
[Applicant must be given until the end of business, one full business day from the date the message is left. Ex. If leave message on Monday 5/20, give until COB Tuesday, 5/21. If leave message on Friday 7/11, give until COB Monday 7/14.]	

Phone Screen Script:

Thank you for your interest in a career with District 2 Public Health / _____

County Health Department. I am _____

We have received your application and would like to discuss this career opportunity with you. Do you have a few moments?

I would like to tell you a bit about District 2. We are one of 18 public health districts in Georgia, and we cover the 13 counties in the northeast corner of the state. As public health, we are responsible for disease prevention, health promotion, and preparing for and responding to health-related disasters. Our main functions include: Maternal and Child Health, Immunizations, Preventative Nursing, Infectious Diseases, Epidemiology, Children with Special Needs, Environmental Health, Emergency Preparedness, Health Promotion, WIC food vouchers and nutrition, and Children's Dentistry.

The position that we are recruiting for is: ______

This role involves:

Describe the major responsibilities, expectations. Give as much detail as possible. It is important for the applicant to clearly understand the position that they are applying for. If it is not what they expected, then removing themselves from consideration is best at this point in the process.

This job is located at: _____

Describe the location. Identify landmarks, etc. to ensure that the applicant understands where the job is located.



In addition to a benefits package, the starting salary for the position is ______

Is this starting salary agreeable for you? YES NO

Reveal starting salary for this position. Wait for agreement before moving on.

If applicant is concerned, ASK, "What is your salary expectation?"

Salary must be fully discussed during the phone screen. Salary discussed: ______

If applicant requires a salary above the maximum available or allowed for the position, do not interview them. Refer to the Effective Hiring policy for increase options above the advertised salary based on experience, promotion, etc.

If NO: Thank you for your time and interest. May I refer you to <u>phdistrict2.org</u> to consider other job opportunities? PHONE SCREEN ENDS HERE IF NO.

If YES: I would like to ask you a few questions.

A minimum of two questions must be asked. More questions may be asked if desired.

1) Behavioral Skill or Competency Question #1:

2) Behavioral Skill or Competency Question #2:

This concludes the phone interview.

Did applicant present a superior understanding of the skills and competencies necessary for success in this job? Make a decision, suitable or not suitable for the more in-depth face-to-face interview.

Not suitable: Thank you for your time and interest in this position. Someone will be in touch if we need anything further from you. You do not have to explain your decision to the applicant.

Suitable: We would like to schedule you for a face-to-face interview. We have an interview panel that will conduct interviews at (location): ______

on (date):	 We have available times at:	 What
would be a convenient time for you?		

Interview								
Date:	Time:	Location:						

I will send you a confirmation email with the time/date and location. Additionally, I will include a Professional Reference form. Please bring the completed form with you to the interview.

When you come to the interview, please plan to arrive early and bring:

- **Completed Professional Reference form**
- □ A copy of documents to verify your credentials/degree
- **Other documents**

We look forward to meeting with you on _

(Date and time agreed upon)

. Take care.



INTERVIEW PANEL FORM

NOTE: All panel members must disclose any and all known relations and/or associations with candidates. Panel members cannot participate if they are related to a candidate. Please use discretion if a panel member knows or is acquainted with any of the candidates.

	PANELIST NAME	JOB TITLE/EMPLOYER	DAY TIME PHONE #
1.	Hiring Mgr:		
2.			
3.			
4.			
5.			

Must have a minimum of 3 panelists



INTERVIEW DISCLOSURE STATEMENT

Persons serving on an interview panel must notify Human Resources in advance by e-mail if they are a relative or friend of an interviewee(s). In addition, the Interview Disclosure Statement is to be filled out and returned to Human Resources with the hire packet at the end of the process.

Interview Panel for Position:

with County/Program:

I am a relative, friend or acquaintance of one or more of the applicants interviewed for this position.

Please list applicant(s) name and describe the nature of the relationship(s):

Name:		
	PLEASE PRINT	
Signature:		
Date:		
D2PH HR		



after the interview. Applicant Name Position Applied For Date of Interview									
Арріс						Date of I			
Name of	Interviewer		Interviewer Title Total Rati				ng: 28 max		
TRAITS	Unsatisfactory		eds vement	Satisfactory	Proficient	Excellent	RATING		
	0		1	2	3	4	(0-4)		
JOB KNOWLEDGE	Unsatisfactory	Needs Improvement		Adequate	Exceeds Expectation	Outstanding			
EDUCATION	Unsatisfactory	Needs Improvement		Adequate	Exceeds Expectation	Outstanding			
EXPERIENCE	Unsatisfactory	Needs Improvement		Adequate	Exceeds Expectation	Outstanding			
SKILLS	Unsatisfactory	Needs Improvement				Adequate	Exceeds Expectation	Outstanding	
MOTIVATION	Unsatisfactory	Needs Improvement		Adequate	Exceeds Expectation	Outstanding			
COMMUNICATION	Unsatisfactory	Needs Improvement		Adequate	Exceeds Expectation	Outstanding			
OVERALL IMPRESSION	Unsatisfactory	Needs Improvement		Adequate	Exceeds Expectation	Outstanding			



SCHEDULED INTERVIEWS

POSITION TITLE/POSITION NUMBER: _____

PROGRAM:

APPLICANTS	INTERVIEW DATE	TIME	
1.			
2.			
3.			
4.			
5.			
5.			
6.			
7.			
8.			
9.			
10.			



PROFESSIONAL REFERENCE RELEASE FORM

The applicant named below is being considered for a position with District 2 Public Health and has provided your name as a reference.

We would appreciate you completing Page 2 of this form. Please be assured that your comments will be held in confidence.

Thank you.

District 2 Public Health

I hereby authorize the addressed individual, company, or institution to provide District 2 Public Health with any information it may have concerning me which is on record or otherwise, and do hereby release District 2 Public Health, for all liability for any damage whatsoever incurred in furnishing such information. A photo copy of this authorization shall be deemed as effective as the original.

Name:_____

Please Print

Signature:_____

Optional: Other identifying information (aliases, maiden name, SS #, etc...)

Date:_____

Business Reference Form

Please list below three business references including the address, telephone, and fax number:

Supervisor:
Company Name:
Address:
City/State/Zip:
Telephone Number:
Fax Number:
E-Mail:

Supervisor:
Company Name:
Address:
City/State/Zip:
Telephone Number:
Fax Number:
E-Mail:

Supervisor:
Company Name:
Address:
City/State/Zip:
Telephone Number:
Fax Number:
E-Mail:

APPLICANT REVIEW FORM

POSITION:______ POSITION #:_____ DATE:_____

COUNTY/PROGRAM:______ SCREENED BY: _____

SIGNATURE/DATE

APPLICANT NAME	DOES NOT MEET MINIMUM	MEETS MIN.	MEETS PREFERRED	SUITABLE FOR PHONE SCREEN	UNABLE TO CONTACT	PHONE SCREEN COMPLETE	SELECTED FOR INTERVIEW BASED ON PHONE SCREEN	FACE-TO-FACE INTERVIEW COMPLETE	INTERVIEW NO SHOW	APPLICANT WITHDREW	TRANSCRIPTS & CREDENTIALS CHECKED	REFERENCES CHECKED	RECOMMEND FOR HIRE (Indicate 1st choice. Mark 2nd or 3rd if desired. *)
*Only indicate 2nd and/or 3rd candidates if you want	to hire the	em, shou	ld the pre	vious car	ndidate(s) decline.	HR will auto	omatically	call dow	n throug	h the list t	o make o	offers.

INTERVIEW PANEL SIGNATURE INTERVIEW PANEL SIGNATURE INTERVIEW PANEL SIGNATURE DATE RECOMMENDED SALARY & JUSTIFICATION ** : \$, ** Enter salary and justification only if salary requested is other than advertised RECOMMENDED START DATE:

District 2 Public Health, Rev. 05/2/2016

DO NOT MAKE WRITTEN NOTES ON THIS FORM