

STATE OF OREGON

SC-11

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

6657 Human Services Specialist 1
6658 Human Services Specialist 2

6659 Human Services Specialist 3

Review the following Human Services Specialist 3 Skill Code Information Sheet to aid in identifying specific skills that you have. The following skills are not a requirement for all positions. Some positions however, require skill in speaking a second language. Please indicate if you are proficient in other languages.

DIRECTIONS: Review the skills/knowledge areas below that address any specialized experience you have.

I HAVE SKILLS IN THE FOLLOWING AREAS:

Net typing /keyboarding speed:

- LTP Limited Typing 0 - 39 Words Per Minute
QTP Qualified Typing 40-54 Words Per Minute
PTP Proficient Typing 55+ WPM and above

CRT Experience using a computer for the entry, update, correction and retrieval of information.

W/C Experience composing written communication such as letters, memos, reports, etc.

ANL Experience analyzing technical data/information and making decisions or recommendations.

Table with 3 columns: Phone, In Person, PUBLIC CONTACT. Rows include PIP, PIS, PEP, PES, PDP, PDS, PCP, PCS, OIP, OIS, OCP, OCS, OFP, OFS, OEP, OES.

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.

***I AM PROFICIENT IN THE FOLLOWING LANGUAGES. Please note that you may be tested on proficiency if invited for interview.***

Speaking	Writing	Reading & Translating	
SPA	SPR	SPB	Spanish
RUS	RUR	RUW	Russian
VIE	VIR	VIW	Vietnamese
LAO	LAR	LAB	Laotian
JPN	JPR	JPW	Japanese
CHI	CHR	CHW	Chinese

Sign Language Training/ Education	Signing ASE Experience	Interpreting	
ASL	ASE	AMB	American Sign
SXT	SXE	EXP	Signed English

**TEMPORARY WORK**

TMP I am available for temporary work.

**I AM WILLING TO WORK FOR THE FOLLOWING DHS DIVISIONS:**

- ASD Adult and Family Services Division (AFS)
- SSD Senior and Disabled Services Division (SDSD)

\_\_\_\_\_  
NAME (Please Print)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature