

Department of Workforce Services Job Skills Survey – Fax to 1-877-827-9511
or 307-473-3829

Rev.5/2011

Survey Date: March 2012



Research & Planning
Wyoming DWS

Wyoming Department of Workforce Services

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http://doe.state.wy.us/LMI/

Please return form by August 13, 2012

**We expect this form to take approximately
10-15 minutes to complete
(ID NUMBER)**

All data collected by Research & Planning must, by the Workforce Investment Act (see: 29 USC sec. 491-2 (a)(2)) and the Wyoming Employment Security Law (section 27-3-603), be held in the strictest confidence, with results published only as summary statistics.

Employee holding this job: (First Initial, Last Name)

This is a request for information about this job: work, pay, and benefits

1. Our records indicate the above-named individual was an employee of your business during the **reference period** of January, February, and/or March, 2012. Is this correct? **(Please select one response)**

Yes **(if yes, please continue)**

No **(If no, STOP. Please return this form in the enclosed self-addressed stamped envelope or fax it to one of the numbers above. Thank you.)**

2a. What was the rate of pay for this job during the **reference period** of January, February, and/or March 2012 \$ _____ . ____ per **(check one)**

Hour

Week

2 Weeks

Month

Other **(specify: e.g. supplemental insurance)**

Please include base rate of pay, tips, commissions, and other monetary compensation.

2b. On average, how many hours were worked in this job each week at that time? _____ Hours

3. Were any of the following benefits offered for the job? **(Please check all that apply)**

Health insurance

Retirement plan

Paid time off

Other **(specify):** _____

No benefits offered

Type of Work

4a. During the **reference period**, what was the job title for this job? **(For example, secretary, accountant, personnel manager. Please print in the space provided.)**

4b. During the **reference period**, what were the most important *activities or duties* of this job? **(For example, typing and filing, reconciling financial records, directing hiring policies. Please print in the space provided.)**

Employee Licensing, Certification, Training, and Education

5a. Does this job require a specialized license or certification? **(For example, commercial driver's license, medical license, real estate license.)**

No

Yes

If yes, please specify: _____

Don't know

(Over Please)

Confidential

Licensing, Certification, Training, and Education, Continued			(ID NUMBER)
5b. Check the qualifications required for the type of work described in questions 4a and 4b. <i>(Please check all that apply)</i>			
<input type="checkbox"/> On-the-job training	<input type="checkbox"/> Associate's degree	<input type="checkbox"/> None required	
<input type="checkbox"/> Postsecondary technical training	<input type="checkbox"/> Bachelor's degree or greater	<input type="checkbox"/> Other <i>(specify; for example, a course in medical terminology)</i>	
<input type="checkbox"/> Work experience in related occupations	_____		
Employee Job Skills			
We are seeking information about the importance of the following skills for the job in which the worker was employed during the reference period of January, February, and/or March 2012. Skills are defined as the capacity to carry out the tasks required to accomplish the activities and duties of this job.			
When possible, we request that someone with knowledge about this job complete all parts of questions 6 through 12. Please use a scale of 1 to 3 where 1 means Unimportant and 3 means Important. Please circle or check the most appropriate response for this job. Thank you.			
6. How would you rate the level of importance for service orientation for this job? (Involves actively looking for ways to help people.)			
Unimportant 1	Neither Important nor Unimportant 2	Important 3	<input type="checkbox"/> Don't know
7. How would you rate the level of importance for critical thinking for this job? (Involves using logic and reasoning to identify the strengths and weaknesses of alternative solutions or approaches to problems.)			
Unimportant 1	Neither Important nor Unimportant 2	Important 3	<input type="checkbox"/> Don't know
8. How would you rate the level of importance of reading comprehension for this job? (Involves understanding written sentences and paragraphs in work related documents.)			
Unimportant 1	Neither Important nor Unimportant 2	Important 3	<input type="checkbox"/> Don't know
9. How would you rate the level of importance of technology design for this job? (Involves generating or adapting equipment and technology to serve user needs.)			
Unimportant 1	Neither Important nor Unimportant 2	Important 3	<input type="checkbox"/> Don't know
10. How would you rate the level of importance of operation and control for this job? (Involves controlling operations of equipment or systems.)			
Unimportant 1	Neither Important nor Unimportant 2	Important 3	<input type="checkbox"/> Don't know
11. In your opinion, what one skill is most important to accomplishing the activities and duties of this job? It could be one of the above or it could be another skill. <i>(Please print in the space provided)</i>			

12. How would you rate your overall satisfaction with this employee's work skills ? (for example, cooking, customer service skills, welding, teaching skills, heavy lifting skills.)			
Unsatisfied 1	Neither Satisfied nor Unsatisfied 2	Satisfied 3	<input type="checkbox"/> Don't know
13. Is this person still employed at your firm? <input type="checkbox"/> Yes <input type="checkbox"/> No			
14. Contact person name and title <i>(Please print)</i>			
First _____ Last _____ Title _____			
Phone number <i>(Please include area code)</i> _____			
Email address _____			
15. Would you like to receive a copy of the statistical report compiled from all of the questionnaire results?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Thank You!