

INTERVIEW QUESTIONS GUIDE

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Hiring supervisors may use this guide to document interview questions and responses. Ask as many questions as needed and ask the same questions of each applicant. Record the questions and anticipated responses before beginning your interviews. Retain this form in accordance with System Regulation 33.99.01, Employment Practices.

Applicant's Name:	Interviewer's Name:	
NOV Number:	Date:	Score:

Question 1:
Anticipated Answer(s):
Applicant's Response:
Score: <input type="checkbox"/> 5 = Outstanding <input type="checkbox"/> 4 = Excellent <input type="checkbox"/> 3 = Good <input type="checkbox"/> 2 = Fair <input type="checkbox"/> 1 = Poor <input type="checkbox"/> 0 = No Answer

Question 2:
Anticipated Answer(s):
Applicant's Response:
Score: <input type="checkbox"/> 5 = Outstanding <input type="checkbox"/> 4 = Excellent <input type="checkbox"/> 3 = Good <input type="checkbox"/> 2 = Fair <input type="checkbox"/> 1 = Poor <input type="checkbox"/> 0 = No Answer

Question 3:
Anticipated Answer(s):
Applicant's Response:
Score: <input type="checkbox"/> 5 = Outstanding <input type="checkbox"/> 4 = Excellent <input type="checkbox"/> 3 = Good <input type="checkbox"/> 2 = Fair <input type="checkbox"/> 1 = Poor <input type="checkbox"/> 0 = No Answer

Question 4:
Anticipated Answer(s):
Applicant's Response:
Score: <input type="checkbox"/> 5 = Outstanding <input type="checkbox"/> 4 = Excellent <input type="checkbox"/> 3 = Good <input type="checkbox"/> 2 = Fair <input type="checkbox"/> 1 = Poor <input type="checkbox"/> 0 = No Answer

Question 5:
Anticipated Answer(s):
Applicant's Response:
Score: <input type="checkbox"/> 5 = Outstanding <input type="checkbox"/> 4 = Excellent <input type="checkbox"/> 3 = Good <input type="checkbox"/> 2 = Fair <input type="checkbox"/> 1 = Poor <input type="checkbox"/> 0 = No Answer

Question 6:
Anticipated Answer(s):
Applicant's Response:
Score: <input type="checkbox"/> 5 = Outstanding <input type="checkbox"/> 4 = Excellent <input type="checkbox"/> 3 = Good <input type="checkbox"/> 2 = Fair <input type="checkbox"/> 1 = Poor <input type="checkbox"/> 0 = No Answer

For questions concerning this form, please call 979-845-2423.