

**DEPARTMENT OF TRANSPORTATION  
OFFICE OF EXAMINATIONS  
BOOKBINDER III – 5TR76  
TRAINING AND EXPERIENCE EVALUATION**

The Department of Transportation (Caltrans) BOOKBINDER III examination is being given on an Open, Non-Promotional basis. This examination will consist solely of this self-assessment Training and Experience Evaluation.

**This questionnaire is your entire exam** and is designed to elicit a range of specific information regarding each candidate's knowledge, abilities, and experience to effectively perform the duties relative to the classification(s). Candidates are responsible for reading all of the material provided prior to completing this questionnaire. Responses will be evaluated using predetermined rating criteria. In order to obtain a position on the eligible list, a minimum rating of 70% must be attained. Please answer questions completely since incomplete responses and omitted information cannot be considered and/or assumed. *Resumes, letters of reference, and other materials **will not be evaluated or considered*** as responses to items in the Training and Experience Evaluation. **(NOTE:** Failure to meet the entrance requirements and/or to complete this evaluation accurately will result in elimination from this examination.)

*Candidates who fail to follow the instructions and/or **who solicit input or assistance from others to complete this questionnaire** will be eliminated from the examination.*

IT IS IMPORTANT THAT YOU RETAIN A COPY OF THIS TRAINING AND EXPERIENCE EVALUATION FOR YOUR RECORDS. Caltrans will **NOT** provide you a copy of your Training and Experience Evaluation.

**THIS AFFIRMATION MUST BE COMPLETED**

I hereby certify and understand that the information provided by me (without assistance from others) on this Training and Experience Evaluation is true and complete to the best of my knowledge and contains no willful misrepresentation or falsifications. I understand this information may be verified. I also understand that if it is discovered that I have made any false representations, I will be removed from the examination process, removed from the list resulting from the examination, may not be allowed to compete in future examinations for State employment, and may be subject to prosecution for misdemeanor or felony offenses under California law. Additionally, State employees may have adverse action taken against them up to and including dismissal.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NAME (PRINT):** \_\_\_\_\_

**EXAMINATION TITLE:** Bookbinder III

The completed Training and Experience Evaluation can be mailed and/or personally hand delivered to:

**Caltrans  
Exam Services (MS 86)  
P.O. Box 168036  
Sacramento, CA 95816-8036**

**File in person: Caltrans  
1727 30<sup>th</sup> Street, 1<sup>st</sup> Floor  
Sacramento, CA 95816  
(916) 227- 5181**

Facsimile (FAX) or electronically mailed (e-mailed) Training and Experience Evaluations **will not** be accepted

**Failure to submit your Training and Experience Evaluation by February 12, 2016 will result in elimination from the examination.**

**BOOKBINDER III**  
**Training and Experience Evaluation**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**PART I - EMPLOYMENT HISTORY**

Instructions: Please describe your work experience as it relates to the EXAM TITLE position. Begin with your most recent position. The *EXPERIENCE CODE* will be used in Part II to identify where you worked. You may include additional pages if necessary.

**EXPERIENCE CODE A**

Employer Name: \_\_\_\_\_

Employer Location: City: \_\_\_\_\_ State: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**EXPERIENCE CODE B**

Employer Name: \_\_\_\_\_

Employer Location: City: \_\_\_\_\_ State: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**EXPERIENCE CODE C**

Employer Name: \_\_\_\_\_

Employer Location: City: \_\_\_\_\_ State: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**EXPERIENCE CODE D**

Employer Name: \_\_\_\_\_

Employer Location: City: \_\_\_\_\_ State: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

# BOOKBINDER III

## Training and Experience Evaluation

### PART II - WORK EXPERIENCE

#### INSTRUCTIONS

**Step 1:** In the *Experience Code* column, use the codes from PART I of this questionnaire to indicate where you performed the activity and/or acquired the task or knowledge. You may list more than one code per item, if applicable.

**Step 2:** For each item listed on page 4 in rows “1” through “10,” place an “X” in the column that most accurately represents the Experience you have and the Amount of Time your experience represents.

#### SAMPLE

		CODE	EXPERIENCE				AMOUNT OF TIME			
		Experience Code(s)	I have had no training, or experience with this task.	I have had training on this task, but no application on the job.	I have performed this task on the job under normal supervision.	I have performed this task independently	I possess less than one ( 1 ) year of experience.	I possess one ( 1 ) to two ( 2 ) years of experience.	I possess two ( 2 ) to three ( 3 ) years of experience.	I possess more than four ( 4 ) years of experience.
1.	<b>(Sample Item)</b> Basic knowledge of printing plant equipment, machinery operations and terminology to produce quality bindery work	<b>A &amp; C</b>				<b>X</b>		<b>X</b>		

## BOOKBINDER III Training and Experience Evaluation

### PART II-WORK EXPERIENCE

PRINT NAME \_\_\_\_\_

**INSTRUCTIONS:** In the *Experience Code* column, use the codes from **PART I** of this form to indicate where you performed the activity or task. You may list more than one code per item, if applicable.

Place an "X" in the column that most accurately represents the **Experience** you have **AND** the **Amount of Time** your experience represents.

		CODE	EXPERIENCE				AMOUNT OF TIME			
		Experience Code(s) (FROM PART I)	I have had no training, or experience with this task.	I have had training, but no application on the job.	I have performed this task on the job under normal supervision.	I have performed this task independently.	I possess less than one ( 1 ) year of experience.	I possess one ( 1 ) to two ( 2 ) years of experience.	I possess two ( 2 ) to three ( 3 ) years of experience.	I possess more than four ( 4 ) years of experience.
1.	Examine stitched, collated, bound, or unbound product samples for defects, such as imperfect bindings, ink spots, torn pages, loose pages, or loose or uncut threads									
2.	Read work orders to determine instructions and specifications for machine set-up									
3.	Install or adjust bindery machine devices, such as knives, guides, rollers, rounding forms, creasing rams, or clamps, to accommodate sheets, signatures, or books of specific sizes									
4.	Trim edges of books to size, using cutting machines, book trimming machines, or hand cutters									
5.	Monitor machine operations to detect malfunctions or to determine whether adjustments are needed									
6.	Maintain records, such as daily production records, using specified forms									
7.	Lubricate, clean, or make minor repairs to machine parts to keep machines in working condition									
8.	Utilize computers to produce quality bindery work									
9.	Meet with clients, printers, or designers to discuss job requirements or printing/binding plans									
10.	Train workers to set up, operate, and use automatic bindery machines									