Central District Health Department
HALL • HAMILTON • MERRICK

Health Educator

Supplemental Application Questionnaire

Name: _____

Please complete this form along with an application for employment and submit to the Central District Health Department.

1. Why are you interested in this position?

2. Describe your experience promoting policy or environmental change on a community level.

3. Describe your experience working with grants.

4. Describe your experience leading groups of people.

5. What experience do you have working with community groups on a project?

6. Do you have a passion for community health and wellness? If so, explain.

7. What makes you stand out as a top candidate for the position of Health Educator?