

5.) Occasionally we must work on the weekend, do you have an issue with working on a Saturday or Sunday if required?

6). Using a scale of 0-5 with 0 representing no experience and 5 representing extensive experience, please circle how you rate yourself in the following areas:

Drilling	0	1	2	3	4	5
Tapping	0	1	2	3	4	5
Welding	0	1	2	3	4	5
Metal Fabrication	0	1	2	3	4	5
DC Wiring	0	1	2	3	4	5
Heavy Equipment Repair	0	1	2	3	4	5
Class 8 Truck Repair	0	1	2	3	4	5
Industrial Machine Repair	0	1	2	3	4	5
Hydraulic hose assembly	0	1	2	3	4	5
Computerized work orders	0	1	2	3	4	5
Safety Training	0	1	2	3	4	5
OSHA 10 Certification	Yes		No			

Please confirm that you have read our ad in its entirety and that you understand that we are a NO Smoking company and that you do not smoke. Failure to answer this question disqualifies you.

Are you a smoker? Yes No

Will you pass a DOT physical which includes a drug test? Yes No

I certify that my answers are complete to the best of my ability and knowledge. If this questionnaire leads to employment, I understand that false or misleading information on this questionnaire, the application or interview, may result in my release.

Please fill out your name, phone number, and signature below.

Print Name: _____ Phone #: _____

Signature: _____ Date: _____

Thank you for your time.