



Mechanic

Date _____

Name _____

Address _____

Phone Number _____

Drivers License Class _____

Number of Years with a CDL? _____

Endorsements T____ P____ N____ H____ X____

Please Rate Your Abilities from 1 to 5, 5 Being the Highest

Diesel Engines: 0 1 2 3 4 5 Hydraulics: 0 1 2 3 4 5 Transmissions: 0 1 2 3 4 5

Gas Engines: 0 1 2 3 4 5 Welding: 0 1 2 3 4 5 Differentials: 0 1 2 3 4 5

Do you have the following?

MSHA _____ Safeland _____ Medical Card _____

Prior Employment:

Company Name _____

Position _____

Dates _____

Reason for Leaving _____

Company Name _____

Position _____

Dates _____

Reason for Leaving _____

Company Name _____

Position _____

Dates _____

Reason for Leaving _____