



TODAY'S DATE: \_\_\_ / \_\_\_ / \_\_\_

SOCIAL SECURITY #	ADDRESS										APT NO	
FIRST NAME	CITY						STATE		ZIP			
MIDDLE NAME	HOME PHONE		( )									
LAST NAME	OTHER NUMBER		( )									
NICK NAME	CELL PHONE		( )									
E-MAIL ADDRESS	EMERGENCY PHONE		( )									
EMERGENCY CONTACT NAME												
What is your Lifting Capacity? ___ lbs.	DO YOU SMOKE? <input type="checkbox"/> YES <input type="checkbox"/> NO				DRIVERS LICENSE CLASS		STATE		EXPIRATION DATE			
	WILLING TO TAKE A DRUG TEST? <input type="checkbox"/> YES <input type="checkbox"/> NO											

Falsification of Criminal History will end in Immediate Dismissal of Consideration

PRIOR CONVICTIONS <input type="checkbox"/> YES <input type="checkbox"/> NO Have you ever been convicted of an offense other than a minor traffic violation? Such convictions may be relevant if job related, but does not exclude you from employment.	DATE	OFFENSE DETAILS	CITY	STATE
	1.	1.	1.	1.
	2.	2.	2.	2.

FIRST DATE AVAILABLE ___/___/___/	MINIMUM SALARY \$ _____	DAYS	8:00 - 5:00 pm	2:00 - 11:00 pm	11:00 - 7:00 am
HOUR PREFERENCE _____	TRAVEL DISTANCE _____ MILES ONE WAY	Please check boxes of days & shifts you can work.			
TRANSPORTATION <input type="checkbox"/> OWN <input type="checkbox"/> SHARES <input type="checkbox"/> TROLLEY/ TAXI <input type="checkbox"/> RIDES BIKE/WALK	ASSIGNMENT DURATION <input type="checkbox"/> LONG/SHORT TERM <input type="checkbox"/> LONG TERM <input type="checkbox"/> SHORT TERM	MONDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		TUESDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		WEDNESDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		THURSDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		FRIDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		SATURDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		SUNDAY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EDUCATION					
Circle Last Grade Completed 7 8 9 10 11 12 College 1 2 3 4 5 6					
HIGH SCHOOL	NAME, CITY/STATE	Date: From/To	Did You Graduate?	Type of Degree	Major Course of Study
COLLEGE	NAME, CITY/STATE				
COLLEGE	NAME, CITY/STATE				
OTHER TRAINING	NAME, CITY/STATE				

MILITARY EMPLOYMENT	Date of Service From: _____ To: _____
Branch of U.S. Armed Services	Principal Duty/Rank
Type of Specialty Training	



Employment History -Most recent employer or present employer first.

DATES	COMPANY NAME	JOB TITLE	STARTING SALARY: \$ <input type="checkbox"/> Per hour <input type="checkbox"/> Annually	ENDING SALARY: \$ <input type="checkbox"/> Per hour <input type="checkbox"/> Annually
START DATE	Address, City, State, Zip		JOB DUTIES <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
END DATE	Phone ( )	Type of Business		
	REASON FOR LEAVING	SUPERVISOR'S NAMES	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

DATES	COMPANY NAME	JOB TITLE	STARTING SALARY: \$ <input type="checkbox"/> Per hour <input type="checkbox"/> Annually	ENDING SALARY: \$ <input type="checkbox"/> Per hour <input type="checkbox"/> Annually
START DATE	Address, City, State, Zip		JOB DUTIES <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
END DATE	Phone ( )	Type of Business		
	REASON FOR LEAVING	SUPERVISOR'S NAMES	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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START DATE	Address, City, State, Zip		JOB DUTIES <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
END DATE	Phone ( )	Type of Business		
	REASON FOR LEAVING	SUPERVISOR'S NAMES	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Acknowledgement by Applicants for Temporary, Temp to Hire Employment:

At the completion of each temporary or temp to hire assignment, I understand I must notify my Snelling Staffing Manager of my availability for additional assignments. Notification of availability must be made no later than 9:00 A.M. on the first business day following the last day of each temporary assignment. If I do not call: (1) Snelling may assume I am not available for additional assignments, and (2) I will be considered to have left work voluntarily and without cause, and unemployment benefits may be denied.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Agreement & Disclosure Statement

I understand that you may obtain information about my character, general reputation, personal characteristics, and financial responsibility in order to enable you to evaluate me as a prospective employee. I further understand that some clients may, as a precondition to using Snelling's services, require additional information about such matters as job related criminal convictions and other specific job related subjects that are relevant to a particular job or assignment. I hereby authorized you to make inquiries of my previous employers, educational institutions, friends, neighbors, associates, and references about these matters through personal interviews or other means. I understand that the-law requires that upon my written request, I be notified as to the nature and scope of such investigations and inquiries.

I understand that if employed by Snelling, such employment will be on an "employee at will" basis, which means that you and I are both free to terminate my employment at any time.

I offered a job, and if requested by Snelling, I will submit to a physical examination.

I hereby affirm that the information I provided in this application is true and complete. I understand that providing false or incomplete information to the company could result in dismissal from or refusal of employment.

I will submit to any medical procedures requested by Snelling for the purpose of screening for the illegal use of drugs or other substances.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_



# Consent for Criminal Background Check

*\*Criminal background checks will be conducted for all applicants. Credit history reports will only be generated and considered if requested by a specific client.*

CONSUMER CREDIT REPORTING REFORM ACT OF 1996

CONSUMER CREDIT DISCLOSURE/AUTHORIZATION RELEASE FORM

I hereby authorize Gulf Personnel Services, LLC, dba Snelling Staffing Services, and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment purposes.

I understand that the scope of the consumer report/investigative report may include, but is not limited to, the following areas:

Verification of social security number; current and previous residences; employment history including all personnel files; education including transcripts; character references; credit history and reports; criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; birth records; motor vehicle records to include traffic citations and registration; and any other public records or to conduct interviews with third parties relative to my character, general reputation, personal characteristics or mode of living.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me to Snelling or its agents or clients to where I maybe assigned to work. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release Snelling, the Social Security Administration, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related

Print Name: \_\_\_\_\_  
(First) (Middle) (Last) (Maiden)

Former Name (s)/Alias and Dates Used: \_\_\_\_\_

Current Address Since: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (State/Zip)

Soc. Sec. Number: \_\_\_\_\_ - - Date of Birth: \_\_\_\_\_ / / (I.D. Purposes Only)

Drivers License Number/State: \_\_\_\_\_

Telephone Number (s): \_\_\_\_\_

CALIFORNIA, MINNESOTA AND OKLAHOMA RESIDENTS ONLY: Please check here to have a copy of your consumer report sent directly to you. Minnesota and Oklahoma applicants will receive a copy directly from Snelling's background check provider. California applicants may receive a copy from either the prospective employer or Snelling's background check provider.

NOTICE TO CALIFORNIA APPLICANTS: Under Section 1786.22 of the California Civil Code, you have the right to request from Snelling's background check provider, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which Snelling's background check provider has previously furnished within the two-year period preceding your request. You may view the file maintained on you by Snelling's background check provider during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

NOTICE TO MAINE APPLICANTS: Under Chapter 210 Section 1314 of Maine Revised Statutes, you have the right, upon request, to be informed within 5 business days of such request of whether or not an investigative consumer report was requested. If such report was obtained, you may contact the Consumer Reporting Agency and request a copy.

NOTICE TO NEW YORK APPLICANTS: Under Article 25 Section 280-c (b) (2) of the New York General Business Law, you have the right, upon written request, to be informed of whether or not an investigative consumer report was requested. Under Article 25 Section 380-g of the New York General Business Law, should a consumer report received by an employer contain criminal conviction information, the employer must provide to the applicant or employee who is the subject of the report, a printed or electronic copy of Article 23-A of the New York Correction Law, which governs the employment of persons previously convicted of one or more criminal offenses.

Please initial here to acknowledge receipt of Article 23-A of the New York Correction Law.

NOTICE TO VERMONT APPLICANTS: Pursuant to the Vermont Fair Credit Reporting Act 9.V.S.A. § 24080e, I hereby consent to the obtaining of a credit report for purposes of employment prescreening.

I acknowledge that I have been provided under separate cover a copy of my Notice of Rights under The Fair Credit Reporting Act.

Applicant Signature: \_\_\_\_\_

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



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

### Clerical /Computer Skills

<b>Business Equipment</b>		
<input type="checkbox"/> 10 Key by Touch	<input type="checkbox"/> Typing 61 - 70 WPM	<input type="checkbox"/> Accounts Payable
<input type="checkbox"/> Calculator	<input type="checkbox"/> Typing 71 - 90 WPM	<input type="checkbox"/> Accounts Receivable
<input type="checkbox"/> Cashier	<input type="checkbox"/> Typing 91 + WPM	<input type="checkbox"/> Payroll
<input type="checkbox"/> Fax	<input type="checkbox"/> Shorthand -Slow, Med, Fast	<input type="checkbox"/> Certified Payroll
<input type="checkbox"/> Typing 1 - 20 WPM	<input type="checkbox"/> Transcription Medical or Legal	<input type="checkbox"/> General Ledger
<input type="checkbox"/> Typing 21 - 30 WPM	<input type="checkbox"/> Customer Service	<input type="checkbox"/> Bookkeeper
<input type="checkbox"/> Typing 31 - 40 WPM	<input type="checkbox"/> Receptionist	<input type="checkbox"/> IT
<input type="checkbox"/> Typing 41 - 50 WPM	<input type="checkbox"/> Phones up to 9 lines	<input type="checkbox"/> _____
<input type="checkbox"/> Typing 51 - 60 WPM	<input type="checkbox"/> Phones up to 24 plus lines	<input type="checkbox"/> _____

<b>Office Clerical</b>		
<input type="checkbox"/> Bank Teller	<input type="checkbox"/> Insurance 220 License -Comm	<input type="checkbox"/> Medical Clerical
<input type="checkbox"/> Construction Clerical	<input type="checkbox"/> Insurance 440 License -Personal	<input type="checkbox"/> Outside Sales
<input type="checkbox"/> Government Clerical	<input type="checkbox"/> Insurance Clerical	<input type="checkbox"/> Retail Sales
<input type="checkbox"/> HR -Human Resources	<input type="checkbox"/> Legal Clerical	<input type="checkbox"/> Telemarketing
<input type="checkbox"/> HR Assistant	<input type="checkbox"/> Legal Secretary	<input type="checkbox"/> Property Management
<input type="checkbox"/> Hiring, Termination, Interviews	<input type="checkbox"/> Paralegal	<input type="checkbox"/> CAM License
<input type="checkbox"/> Recruiting	<input type="checkbox"/> Office Manager	<input type="checkbox"/> Secretary
<input type="checkbox"/> SPHR Senior Professional HR		<input type="checkbox"/> Executive Secretary
<input type="checkbox"/> PHR Professional HR		<input type="checkbox"/> Front Desk Reservations

<b>Computer</b>
<input type="checkbox"/> Hardware
<input type="checkbox"/> Laptop/Notebooks
<input type="checkbox"/> Mainframes
<input type="checkbox"/> PC's / Micros
<input type="checkbox"/> Personal Digital Assistants
<input type="checkbox"/> Pen Based
<input type="checkbox"/> Terminals
<input type="checkbox"/> Workstations
<input type="checkbox"/> Installation of Servers/Stations
<input type="checkbox"/> Peripheral -Cabling
<input type="checkbox"/> Servers - Mainframe

<b>Business Software / Word Process</b>	
<input type="checkbox"/> Display Write	<input type="checkbox"/> PCwrite
<input type="checkbox"/> Mail Merge	<input type="checkbox"/> QuickBooks
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Timberline
<input type="checkbox"/> Officewriter	<input type="checkbox"/> WordPerfect

<b>Computer Software Applications</b>
<input type="checkbox"/> Accounting/Finance Software
<input type="checkbox"/> CAD/CAM
<input type="checkbox"/> Data Entry
<input type="checkbox"/> DBMS Database Manager
<input type="checkbox"/> Desktop Publishing
<b>Graphics Software</b>
<input type="checkbox"/> Adobe Photoshop
<input type="checkbox"/> Adobe Illustrator
<input type="checkbox"/> Draw Plus
<input type="checkbox"/> Linux Web Design
<input type="checkbox"/> Corel Draw
<input type="checkbox"/> Pagemaker
<input type="checkbox"/> PowerPoint
<input type="checkbox"/> MS Publisher
<input type="checkbox"/> Quark Express
<input type="checkbox"/> Other

<b>Software / Operating Systems</b>	
<input type="checkbox"/> APPLE -MAC	<input type="checkbox"/> Unix
<input type="checkbox"/> OS/X	<input type="checkbox"/> Windows
<input type="checkbox"/> LINUX	

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

## Clerical /Computer Skills

### Business Software

- Insurance Software
- Legal Software (name)
- Payroll Software (name)
- Banking Software (name)
- Medical Software (name)
- Engineer Software (name)

### Spreadsheets

- Lotus 123
- Peachtree
- Excel
- Quicken

### Suites

- Lotus Notes
- Lotus Smart Suites
- Microsoft Back Office
- Microsoft Office

### Databases

- Adabas D
- Clarion
- Clustrix
- CSQL
- Database Management Library
- Derby aka Java DB
- Empress Embedded Database
- FileMaker Pro
- HSQLDB
- IBM DB2
- IBM Lotus Approach
- EBM DB2 Express-C
- Microsoft Jet Database Engine
- Microsoft SQL Server
- MS Visual Fox Pro
- MSQL
- MySQL
- OpenOffice.org Base
- Oracle
- Oracle Rdb for Open VMS
- The SAS system
- SQLBase
- SQLite
- Unisys
- UniData
- UniVerse
- Other \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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

### Healthcare

<b>Healthcare</b>		
<input type="checkbox"/> Skilled Nursing Facility	<input type="checkbox"/> Health Professional Clerical	<input type="checkbox"/> Aquatics
<input type="checkbox"/> LPN -Licenced Practical Nurse	<input type="checkbox"/> Medical Billing Clerk	<input type="checkbox"/> Rehabilitation Therapist
<input type="checkbox"/> RN -Registered Nurse	<input type="checkbox"/> Hospital Administrator	<input type="checkbox"/> CPR Instructor
<input type="checkbox"/> CMA -Certified Medical Assistant	<input type="checkbox"/> Director of Nursing	<input type="checkbox"/> Hyperbaric Specialist
<input type="checkbox"/> CNA - Certified Nursing Assistant	<input type="checkbox"/> Emergency Medical Tech	<input type="checkbox"/> Insurance Verification
<input type="checkbox"/> Equipment Tech	<input type="checkbox"/> Medical Transcriptions	<input type="checkbox"/> _____
<input type="checkbox"/> Orderly	<input type="checkbox"/> Rehabilitation Specialist	<input type="checkbox"/> _____
<input type="checkbox"/> Dietary Aide	<input type="checkbox"/> Rehabilitation Assistant	<input type="checkbox"/> _____
<input type="checkbox"/> Nurse Aide	<input type="checkbox"/> Water Safety Instructor	<input type="checkbox"/> _____

### Insurance

<b>Insurance</b>	
<input type="checkbox"/> Insurance	<input type="checkbox"/> Insurance -Workers Compensation
<input type="checkbox"/> Insurance -Bonds	<input type="checkbox"/> Insurance -440 Home & Auto
<input type="checkbox"/> Insurance -Life	<input type="checkbox"/> Insurance -220 Commercial Business
<input type="checkbox"/> Insurance -Health	<input type="checkbox"/> Other _____

### Accounting

<b>Accounting</b>	
<input type="checkbox"/> Accounting	<input type="checkbox"/> Certified Public Accountant (CPA)
<input type="checkbox"/> Certified Accountant	<input type="checkbox"/> Collections
<input type="checkbox"/> Certified Internal Auditor (CIA)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Certified Management Accountant (CMA)	<input type="checkbox"/> Other _____

### Finance

<b>Finance</b>	
<input type="checkbox"/> Finance	<input type="checkbox"/> Finance -Securities -Investments
<input type="checkbox"/> Finance -Lending	<input type="checkbox"/> Other _____

### Management

<b>Management</b>		
<input type="checkbox"/> Management	<input type="checkbox"/> Managed Company	<input type="checkbox"/> Other _____
<input type="checkbox"/> Budget Managed	<input type="checkbox"/> Managed Department	<input type="checkbox"/> Other _____
<input type="checkbox"/> Employee Managed	<input type="checkbox"/> Managed Store	<input type="checkbox"/> Other _____
<input type="checkbox"/> Office Manager	<input type="checkbox"/> Territory Managed	<input type="checkbox"/> Other _____

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

## Healthcare

- Abdominal Medicine
- Acupuncture
- Acute Care
- Addiction Medicine
- Adolescent Medicine
- Adult Medicine
- Aerospace Medicine
- Allergy Medicine
- Anatomic Medicine
- Anesthesiology
- Audiology
- Burn Medicine
- Cardiology
- Chemical Medicine
- Chiropractic
- Clinical Medicine
- Community Health
- Critical Care Medicine
- Dentistry
- Dental Hygienist
- Dental Tech
- Dermatology
- Diabetics
- Diagnostic Medicine
- Emergency Medicine
- Endocrinology
- Epidemiology
- Esophagology
- Experimental Medicine
- Family Practice
- Forensic Medicine
- Gastroenterology
- General Practice
- Genetics
- Geriatrics
- Gynecological Medicine
- Hematology
- Hepatology
- Histology
- Home Health Care
- Hospice
- Immunology
- Infectious Diseases
- Internal Medicine
- Mental Health
- Microbiology Medicine

- Molecular Medicine
- Musculoskeletal Medicine
- Naturopathic Medicine
- Neonatal Care
- Neurology
- Neuroradiology
- Nuclear Medicine
- Nutrition
- Obstetrics
- Oncology
- Ophthalmology
- Orthopedic Medicine
- Pain Management
- Pathology
- Pediatrics
- Perinatal Medicine
- Pharmacology
- Phlebotomy
- Physical Medicine
- Preventative Medicine
- Proctology
- Prosthetics
- Psychiatry
- Psychology
- Public Health
- Pulmonary Diseases
- Radiology
- Rehabilitation
- Reproductive Medicine
- Research
- Respiratory
- Rhinology
- Roentgenology
- Serology
- Social Services
- Speech Pathology
- Sports Medicine
- Surgery
- Teaching
- Thoracic Medicine
- Toxicology
- Traumatic Medicine
- Undersea Medicine
- Urology
- Veterinary Medicine
- Vet Tech

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

**Legal**

- Accounting & Finance Law
- Acquisitions / Mergers
- Admiralty & Maritime Law
- Adoption Law
- Advertising & Marketing Law
- Agriculture Law
- Alcoholic Beverage Law
- Alternate Dispute Resolution
- Appellate Practice
- Arts & Entertainment Law
- Bankruptcy
- Banks & Banking
- Business Law
- Casino & Gambling Law
- Civil Rights Law
- Class Action Practice
- Collections Law
- Commercial Law
- Communications & Media
- Constitutional Law
- Construction Law
- Consumer Law
- Contract Law
- Corporate Law
- Criminal Law
- Dealers & Distributorship Law
- Drugs & Narcotics Law
- Education Law
- Environmental, Conservation & Ecology
- Family Law
- Family Business Law
- Foundation Law
- Franchising Law
- General Practice
- Government Law
- Government Contract Law
- Health Care Law
- Highway Law
- Hospital Law
- Immigration & Naturalization
- Insurance Law
- Intellectual Property Law
- International Law
- Investments & Securities
- Judicial Ethics

- Labor & Employment Law
- Law Enforcement
- Leases & Leasing Law
- Legal Ethics
- Legal Research
- Legislative Practice
- Libel, Slander & Defamation
- Litigation
- Lobbying
- Medical Malpractice
- Military Law
- Minority Business Law
- Mortgage Law
- Municipal Law
- Natural Resource Law
- Nonprofit Organization Law
- Partnerships Law
- Patent Law
- Personal Injury Law
- Political Campaigns & Elections
- Product Liability Law
- Professional Liability Law
- Proprietorships Law
- Public Utility Law
- Real-Estate Law
- Real-Estate Property Law
- Resorts & Leisure Law
- Racketeer Influenced/Corrupt Orgs
- Science & Technology Law
- Sports Law
- Tax Law
- Trade & Professional Assoc Law
- Trademarks
- Traffic Violations
- Transportation Law
- Utilities & Energy Regulation Law
- Wills, Estate, Trusts & Probate Law
- Workers Compensation Law
- Zoning, Planning & Land Use
- Legal -Other
- Legal -Legal Secretary
- Legal -Paralegal
- Legal Claims Assistant
- Legal Investigator
- Legal Stenographer



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

**General Labor / Skilled Labor**

- General Labor
- Mover & Packer
- Delivery Helper
- CDL A or CDL B
- Heavy Equip Operator
- Steel Wheel Roller
- Front End Loader
- Backhoe Operator
- Dozer Operator
- Asphalt Worker
- Mechanic -List Type:
- Machine Operator -List Equip:
- Machinist -Lathe Operator:
- Shipping & Receiving
- Glass Worker -List Type:
- Sander -List Type:
- Grinder -List Type:
- Jitterburg Sander
- Cabinet Maker
- Building Maintenance
- Security Guard
- Warehouse Worker
- Warehouse Manager
- Stocking
- Pool Cleaner
- Appliance Repair
- Housekeeping
- Air Conditioning Repair
- Janitor
- Buffing, Waxing, Stripping
- Utility Worker
- Telephone Cable Installer
- Telephone Repairman
- Telephone System Installer
- Gas Meter Reader
- Gas Pipeline Installer
- Electric Power Lineman
- Cable TV Lineman
- Cable TV Tech
- Cellular Phone Tech
- Outside Landscaping
- Sprinkler Maintenance & Installation
- General Construction
- Construction & Carpentry
- Construction Foreman
- Milling

- Concreter Helper
- Concrete Finisher
- Block or Brick Mason
- Sheet Metal Worker -List type:
- Framer
- Metal Stud Frammer
- Steel Worker -List type:
- Sheetrock Hanger
- Sheetrock Finisher
- Painter -Interior or Exterior
- Stucco Applier
- Tile Setter
- Finish Carpenter
- Carpenter Helper
- HVAC
- Plumbing
- Plumber Helper
- Plumber -Septic
- Electronics -List type:
- Electronics -Home Trouble Shooter
- Electronics Design
- Electronics Assembler -List type:
- Electronics Tester
- Electrician's Helper
- Electrician
- Electrician Job Site Foreman
- Master Electrician
- Electrical Supervisor
- Printing
- Screen Printing
- Bindery Worker
- Folder
- Welding -List type:
- Arc Welding
- Mig Welding
- Gas Welding
- Tig Welding
- Soldering & Brazing
- Cutting
- Product Demonstrator
- Quality Control Specialist
- Blueprint Reader
- Computerized Inventory Control
- Other \_\_\_\_\_
- Other \_\_\_\_\_