



Job Title/Series/Grade: High Voltage Electrical Apprenticeship

- Electrician Apprentice - BB-2810, Step I
- Lineman Apprentice – BB-2810, Step I
- Substation Operator Apprentice – BB-5407, Step I

Job Announcement Number: 005694-08-A1*

THIS ANNOUNCEMENT HAS BEEN AMENDED TO EXTEND THE CLOSING DATE TO NOVEMBER 10, 2008. ALL OTHER INFORMATION REMAINS THE SAME.

*****NOTE: Due to Technical Difficulties the BPA Jobs fax line was unavailable October 25-26. If you attempted to fax your application during this time period, you will need to re-submit your application to (503) 230-3149 (fax).**

Duty Location: Throughout Washington, Oregon, Idaho and Montana

Position Information: This is a permanent position with a full-time work schedule.

Anticipated Number of Positions To Be Filled: More than One (1) position may be filled

Opening Date: 09/08/08

Closing Date: 11/10/08

Salary range: \$24.27 per hour. In addition to the wage rate, BPA currently pays a 3.16% differential (\$0.77 per hour) for each non-overtime hour worked. This differential is separate from other premiums that are paid under the negotiated collective bargaining agreement.

Organization: Transmission Services, Transmission Field Services, Apprentices – TFZ

For information on BPA's Mission, Vision and Core Values, please click on the following link: [About BPA.](#)

Who May Be Considered:

- Career and Career Conditional Employees of Bonneville Power Administration,
- Transfer eligibles, Reinstatement eligibles, 30% or more Disabled Veterans, Veterans eligible to apply under the Veterans Employment Opportunity Act (VEOA) of 1998**, VRA eligibles*, and CTAP/ICTAP eligibles.

****To be eligible for a VEOA appointment, a veteran must:**

Be a preference eligible ([VetInfo](#)) OR veteran separated after 3 or more years of continuous active service performed under honorable conditions. Veterans who were released shortly before completing a 3-year tour are considered to be eligible. ("Active service" defined in title 37, United States Code, means active duty in the uniformed services and includes full-time training duty, annual training duty, full-time National Guard duty, and attendance, while in the active service, at a school designated as a service school by law or by the Secretary concerned.)

As a recognized world leader in power transmission, the Bonneville Power Administration (BPA) knows what makes us successful – our people. To attract the most talented and dedicated professionals, not only do we offer one of the best compensation and benefits packages in the industry, we provide a comfortable work environment and an unlimited opportunity for individual achievement. In fact, the same cultural diversity that makes this region a great place to live also makes BPA an exciting place to work where people respect each other, with an employer who believes and promotes a healthy balance between work and family.

BPA has one of the most highly acclaimed high-voltage electrical [apprentice programs](#) in the world. Our Electrical Apprenticeship Program consists of 3 ½ to 4 years of intensive classroom study, homework, and on the job training. End of step presentations, exams, and reviews are required every six months and if successful, the apprentice will be promoted to the next step of the apprenticeship program and finally to Journeyman.

Interested? The following information will provide you with all the steps necessary to apply.



What Work Will I Be Doing?

Electrical apprentices are trained to perform a variety of tasks and duties associated with the operation, maintenance, and construction of high voltage electrical power system equipment and facilities. Apprentices receive on-the-job training by working with journeyman of the trade in learning the various tasks, work procedures, and skills of the trade. In addition, apprentices receive classroom instruction in electrical theory, print and schematic drawings, and other topics associated with the particular trade. Apprentices receive progressively more difficult and complex tasks and work assignments as they gain skill and knowledge in the trade and are required to successfully demonstrate their skill level and knowledge at the end of each step of the program. Apprentices are required to work safely and follow safety procedures and guidelines.

Power System Electrician Apprentices are trained to perform a variety of tasks that typically involve the construction, installation, maintenance, and repair of high voltage power system electrical equipment. Maintenance tasks typically include the routine inspection, modification, installation, and troubleshooting of electrical equipment and facilities. The type of equipment maintained may be electrical, hydraulic, mechanical, pneumatic, and/or electronic. Apprentices work from sketches, drawings, blueprints, wiring diagrams, instruction books, and equipment manuals.

Lineman Apprentices are trained to maintain and construct high voltage wood pole and steel structure transmission lines. Apprentices receive training that includes, but is not limited to: climbing techniques and procedures; care and inspection of transmission structure hardware, tools, gear, and a variety of equipment (e.g., vehicles, bucket trucks, etc.); digging procedures; guying of pole structures; right-of-way maintenance procedures; rigging and handling of conductor; conductor splicing; steel tower erection, and other work techniques.

Substation Operator Apprentices are trained to operate high voltage power system equipment to remove and return substation equipment to service. Work tasks may include, but are not limited to: the review of station logs; checking equipment automatic logging devices, event recorders, and other devices for proper operation. Apprentices also read and analyze substation drawings, plan and perform switching procedures, tag equipment, and coordinate with power system dispatchers. In addition, apprentices read meters, instruments, gauges, and other equipment and maintain records; inspect switchyards and out-building for proper security.

Am I Qualified?

SELECTIVE PLACEMENT FACTOR (Screen Out): This position has a selective factor, which will serve as a screen-out element. Applicants who do not show evidence of meeting this selective factor will be rated as not qualified.

Applicants must submit a copy of their complete employment driving record (obtained from the Dept. of Motor Vehicles or equivalent State agency) covering the past 3 years and dated within the last 3 months), along with their application. Candidates with a poor driving record* and/or revocation of license will be immediately disqualified from consideration.

***Disqualifying driving records:** Within the past three years, any of the following conditions disqualify an applicant for a U.S. Government Motor Vehicle Authorization:

- A. Conviction for operating a motor vehicle under the influence of alcohol or a controlled substance.
- B. Conviction for leaving the scene of an accident without making his or her identity known.
- C. Suspended, revoked, or cancelled driver's license.
- D. Any recurrent record of auto accidents/incidents, traffic violations, or arrests, which demonstrate that the driver does not have an adequate sense of responsibility. This may be shown by any of the following:
 - Conviction for fleeing or attempting to elude a police officer;
 - Conviction for a felony involving the use of a motor vehicle;
 - 2 or more accidents in which the driver was at fault;
 - 2 or more excessive speeding violations (15 miles per hour or more over the posted speed limit.);
 - Or 4 or more moving violations.

How Will My Application Be Evaluated and Referred?

You will be evaluated on the basis of experience, education, and training on the following elements. **You must complete the attached Supplemental Questionnaire for Electrical Apprenticeships** that addresses the following Elements:

- **1. Willingness and ability to perform the duties of Electrical Apprentice and Journeyman under various working conditions;**
 - **2) Ability to follow instructions;**
 - **3) Dexterity and Safety;**
 - **4) Ability to use prints and drawings; and**
 - **5) Ability to use and maintain tools.** Experience/training shown in your supplemental questionnaire must be reflected in your application
- All applicants will be required to pass a written aptitude examination prepared by the Office of Personnel Management to be considered for a position. All applicants **will be notified** of their eligibility (or non-eligibility) to test, and of the dates, times and locations of testing.
 - Applicants will be evaluated on the basis of the information contained in their application, written test results, and supplemental questionnaire for Electrical Apprenticeships. Candidates considered to be best qualified on the above-mentioned job elements may be further evaluated by a competency-based interview with the Apprentice Craft Committee

APPRENTICE EXAMINATION INFORMATION (Please note changes from prior testing procedures): (Written Aptitude Examination)

- The apprenticeship examination is a requirement for all applicants that pass the initial screening. **If you do not take this examination, you will be eliminated from further consideration for the position.** The examination will cover the following areas: **high school level algebra and geometry; dexterity; arithmetic computations; ability to follow instructions and mechanical aptitude.** The examination process will take approximately **4 hours.**
- **If you have applied for more than one apprentice craft, you will only need to take the examination one**

time (applicants will have only one opportunity to test). You will receive a notice by mail if your complete application has been received and it has been determined you are eligible to test. This notice will list all testing dates, locations and times. **Applicants will not be scheduled for testing, all eligible applicants may show up at the location and time of their choice and will be tested on a first-come, first-served basis, with a limit of 50 people per test session.** You will be required to bring your eligibility notice with you to the test (this is **not** the student eligibility form which is attached to this announcement, but the notice we will send you that lets you know that we have made the determination you are eligible to test.) **(Applicants who travel to take the Apprentice Exam do so at their own expense).**

Apprentice exams are scheduled for **December 6th and 13th, 2008 in Vancouver, Washington, and December 13th, 2008 in Spokane, Washington.**

Working Conditions

Working conditions vary depending on the specific apprentice craft and tasks assigned. Some or all of the following conditions may apply: Work may be performed outside in all weather conditions during the day or night. System priorities may require extended periods of overtime, including working weekends. Work may be performed around energized equipment, and at various heights that may be in excess of 100 feet, such as on steel framework, platforms, and ladders adjacent to energized high-voltage equipment. At times, work may be physically demanding, and the work environment will occasionally include high noise levels or exposure to hazardous substances such as mercury, acids, radiation, solvents, PCB's, etc. Apprentices can expect to be in a travel status for a substantial amount of time and assignments away from the headquarters will be required (may be up to 6 months in duration) to complete some work processes.

Physical Requirements

Incumbents must be physically and mentally able to efficiently perform the duties of the position, with or without reasonable accommodation, without hazard to themselves or others. Depending on the craft and tasks assigned, work may require some or all of the following: Extensive bending, pushing, pulling, reaching, and climbing; occasional crawling; and working in cramped confined positions. Walking long distances over rugged terrain. The ability to grip and hold lines and ropes with 75 to 90 pounds of weight attached and the ability to work with small components. Working around machinery with moving parts. Strenuous tasks that include loading or unloading crates or other equipment weighing up to 75 pounds. The ability to work at heights that may be in excess of 535 feet. The ability to perform work under varying terrain and climatic conditions. Good distance vision in at least one eye and the ability to read printed material the size of typewritten characters. The ability to distinguish different electrical components based on color-coding. The ability to hear the conversational voice. The ability to clearly communicate. Extensive day and night driving. The ability to move and position loads weighing up to 120 pounds. The ability to wear protective apparel that includes respirators. Working with both arms overhead. Working alone under stressful situations requiring exacting procedures and the pressure of emergencies.

Key Requirements:

- If selected you will be required to enter into a *****"Continuation of Service" Agreement****, which will

obligate you to remain with BPA following your apprenticeship training. In the event you fail to complete the required period of service with BPA, you would be liable, (indebted) in most cases, to BPA for the cost of the training received.

- **This position has a selective factor which will serve as a screen-out element.** You must submit a copy of your Employment driving record (**obtained from the Dept. of Motor Vehicles or equivalent State agency**, covering the past three years and dated within the last three months. **Failure to provide will result in a rating of not qualified. Candidates with a poor driving record and/or revocation of license will be immediately disqualified from consideration (Details are provided in the 'Qualifications' section of the announcement, below.)**
- **If selected, you will be required to pass a pre-appointment background check, drug screen and physical examination.** This position is also subject to random drug testing. Tentative selectees will be tested for the use of illegal drugs prior to final selection. A determination of the use of illegal drugs may lead to non-selection (based on a failure to meet conditions of employment). The successful applicant(s) will be subject to future random, unannounced testing. Failure to pass subsequent tests may result in disciplinary action, including removal from the Federal Service.
- **Candidates considered to be best qualified may be further evaluated (e.g., interview panel) by the BPA Apprenticeship Craft Committee(s) for each craft as required.**
- Upon successful completion of the apprentice program, management will determine duty station placement.
- **Apprentices will be required to travel during their training program to gain experience.**

****Service Agreement:**

- **If selected you will be required to enter into a "Continuation of Service" Agreement, prior to your entry on duty.** The agreement will obligate you to remain with BPA for a period of one (1) year upon completion of apprenticeship training. In the event you fail to complete the required period of service with BPA, you would be liable (indebted), in most cases, to BPA for the cost of the training received. Specific information regarding the Continuation Service Agreement will be provided to selected applicants in future correspondence. Of course, we are hopeful that you would remain with BPA for your entire career, as nearly all of BPA's electrical employees have chosen to do so.

Special Conditions of Employment

Apprentices are required to meet some or all of the following conditions:

- Participate in all training activities. Satisfactory completion of each step of training is mandatory for advancement.
- Positions that require unescorted access to a nuclear facility will be required to take annual radiation training.
- If exposed to health hazards, have periodic physical examinations.
- Follow BPA safety practices.
- Live within one-hour travel time of duty location.
- Obtain and maintain a Restricted Electrical Workers' permit.
- Possess and maintain a valid commercial driver's license (CDL).

- Obtain and maintain certification on equipment assigned to use or operate.
- Take First Aid training and possess and maintain a CPR card.
- Be available for emergency call-outs.
- Be able to wear protective apparel.
- Apply restricted use pesticides if required.
- Satisfactorily complete the Standard Clearance Certification Examination.
- Be able to relocate as business needs dictate.



Does BPA Provide Accommodation for Applicants With a Disability?

Yes. If you need a reasonable accommodation for any part of the application and hiring process, please notify the agency. Decisions for granting reasonable accommodation will be on a case-by-case basis. For more information on Federal employment for the disabled, please visit DisabilityInfo.gov.

Questions?

If you have questions or need a hard copy of this vacancy announcement, please e-mail us at jobs@bpa.gov

Apprentice Application and Hiring Timeline

- **September** - BPA Announcement Opens
- **October** - BPA Announcement Closes
- **December** - **Apprentice Written Examinations**
- **Jan/Feb** - Craft Specific Application Rating
- **March** - Apprentice Interviews
- **April** - Selections
- **June** - Hire Date (June 07, 2009)

How Do I Apply for This Position?

You can access BPA's Apprentice Website for more information about the Apprentice Program. The link is: [Apprentice Program](#).

A complete application package must include the following:

1. Your resume, Optional Application for Federal Employment (OF-612), or other written application format of your choice that includes **all** the following bulleted information.
 - Position title and Announcement number of the position for which you are applying. **(Please check off which apprenticeship position(s) you are applying for on the first page of the supplemental questionnaire.)**
 - Your full name, mailing address, email address, and day and evening telephone numbers.
 - Country of citizenship.
 - Work experience (Paid and non-paid experience related to the job for which you are applying. Include job title (PLEASE INCLUDE SERIES AND GRADE IF FEDERAL JOB), duties and accomplishments,

employer's name and address, supervisor's name and phone number, starting and ending dates (including month and year), salary, hours worked per week, salary).

- Indicate if we may contact your current supervisor.
- A list of other job related training, skills (for example, languages, tools, machinery, typing speed, etc.), certificates and licenses, honor societies, awards, professional membership, publications, leadership activities, performance awards, etc.
- 2 –3 references that can verify the work experience information provided in your application or resume. Please include names, titles, and current contact information. (BPA requires reference checks prior to appointment).

****Please note that if your resume or application does not provide all of the required information requested in the vacancy announcement, you may lose consideration.**

2. Completed BPA Electrical Apprentice Supplemental Questionnaire is **REQUIRED**. **(Attached)** Be sure to indicate on the 1st page of the questionnaire, which apprenticeship position(s) you are applying for.
3. If eligibility to apply is based on military service (VEOA, VRA, 30% or more disabled veteran), you must submit **Member 4 copy** of Military Discharge Papers, DD-214 **(REQUIRED)**; and if you are applying for consideration with 10-point veteran's preference, you must provide a copy of your DD-214 (Member 4), Standard Form 15 (Application for 10-Point Veteran Preference), and documented proof of claim as specified on SF-15. ([SF-15 form](#))
4. Copy of Notification of Personnel Action (SF-50). **REQUIRED** if you are a current or former Federal employee
5. All non-BPA applicants are encouraged to complete and submit BPA F 3330-11e, Applicant Disability, Race/National Origin and Gender Identification form (attached).
6. Employment Driving record abstract for past three (3) years dated within the last 3 months (obtained from the **Dept. of Motor Vehicles** or equivalent **State agency**) **(REQUIRED)**.

***All required information must be received by the closing date. Applicants will not be contacted for missing information. Failure to provide the required information will result in a rating of not qualified.**

Please retain a copy of your application as BPA does not return applications or provide copies.

Where Do I Send My Application?

Your complete application packet must be received no later than 12 mid-night Pacific (PT) of the closing date to be accepted. Applications submitted by fax or e-mail must be time/date stamped or electronically postmarked at point of origin no later than 12 midnight. Applicants will be notified of receipt of their application package.

Forms Availability:

All application materials may be obtained from all Bonneville Power Administration Human Resources offices @ 905 NE 11th Avenue, Portland, OR 97232), or by calling 503-230-3230, or 1-877-975-4272 . You may also download a copy of this announcement, including all forms from our website at <http://www.jobs.bpa.gov/>

**THE BONNEVILLE POWER ADMINISTRATION IS A
HARASSMENT FREE WORKPLACE.**

Required forms may be sent as email attachments, may be faxed, or sent as hard copy. Application materials provided by different means must be cross-referenced so they may be combined after they arrive. Applicants are responsible for ensuring that application materials are formatted in a manner that will transmit successfully.

Mail:

Bonneville Power Administration
ATTN: Employment Center – NHR-1
PO Box 3621
Portland, OR 97208-2621

Personal Delivery:

905 NE 11th Avenue, Portland, OR 97232

Please note that if you do not currently have a building access pass, and will be hand delivering your application, you will not be able to gain access into the building after 6 p.m.

Fax:

Fax your application to 503-230-3149. Applicants are responsible for ensuring that application materials transmit successfully.

Email:

Applications should be sent as email attachments to: jobs@bpa.gov. **The Announcement Number must be included in the subject line of the email.** Required forms may be sent as email attachments, may be faxed, or sent as hard copy. Application materials provided by different means must be cross-referenced so they may be combined at BPA. Applicants who apply by email will receive an email confirmation. Applicants are responsible for ensuring that application materials are formatted in a manner that will transmit successfully.

INFORMATION FOR DISPLACED FEDERAL EMPLOYEES:

Displaced or surplus employees who may be entitled to consideration under CTAP/ICTAP must meet the OPM and BPA requirements for consideration and be considered “well-qualified. In order to receive consideration, displaced/surplus employees must apply for consideration. For additional information, please refer to [CAREER TRANSITION ASSISTANCE PROGRAM \(CTAP\)/AND INTERAGENCY CAREER TRANSITION ASSISTANCE PROGRAM \(ICTAP\)](#).

Websites:

Veterans Administration

www.va.gov

Bonneville Power Administration

www.bpa.gov

Office of Personnel Management Jobs

www.usajobs.opm.gov

Office of Personnel Management

<http://www.opm.gov/qualifications/index.htm>

Request Copies of Military Personnel Records

<http://www.archives.gov/veterans/evetrecs/>

OMB Approval
#1910-1100
07/04

**United States Department of Energy
Bonneville Power Administration
Supplemental Questionnaire for all**

Electrical Apprenticeships

Name		Announcement #
Street Address/P.O. Box		
City/State	Zip Code	
Telephone (Day)	Evening (Cellular)	E-mail Address

<p>Please check the box(s) for all electrical apprenticeship positions for which you are applying:</p>	<input type="checkbox"/> Electrician Apprentice	<input type="checkbox"/> Substation Operator Apprentice
	<input type="checkbox"/> Lineman Apprentice	

Applicant Foreword: The completion of this supplemental questionnaire is **mandatory**. The information requested is needed to evaluate your relative ability to perform the duties of an electrical apprentice. Complete the entire questionnaire answering each question completely and accurately. Your responses must reflect your actual knowledge and skills.

Drug and Alcohol Testing Notice: In accordance with DOE Order 3792.3, this position is subject to random drug testing. If offered a position, you will be tested for the use of illegal drugs prior to beginning work, and are subject to periodic unannounced random drug testing while employed. A determination of illegal drug use will result in non-selection and withdrawal of an employment offer, based upon your failure to meet a condition of employment. While employed, failure to pass a random or post-accident drug test may result in disciplinary action, up to and including removal from the Federal Service. If the position you are selected for requires the operation of equipment requiring a commercial driver’s license (CDL), you are subject to random alcohol testing under Department of Transportation regulations.

Privacy Act Information: The Bonneville Power Administration is authorized to evaluate applicants for Federal jobs under the provisions of Title 5, United States Code, chapter 11, sections 1104, 1302, 3301, and 3304. The information you provide will be used to determine your qualifications for these positions. If you do not complete the information listed, we will be unable to rate your application, and you will not be considered for these positions.

Name

Working Conditions – The nature of electrician, lineman and substation operator work require that applicants are willing and able to perform the duties of electrical apprentice and journeyman occupations under various working conditions. Please indicate whether you will work under the conditions listed below. ***If you are unwilling to work under these conditions, you will receive NO further consideration for these positions.***

Yes	No	Work Condition	Yes	No	Working Condition
<input type="checkbox"/>	<input type="checkbox"/>	Work with frequent overnight travel (11 or more nights per month)	<input type="checkbox"/>	<input type="checkbox"/>	Work from high places (15 feet and above)
<input type="checkbox"/>	<input type="checkbox"/>	Work when subject to emergency call-outs (i.e., call to perform emergency work outside normal working hours)	<input type="checkbox"/>	<input type="checkbox"/>	Work around hazardous materials (i.e., solvents, PCB's, chemicals, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Work extended periods of overtime, including working weekends.	<input type="checkbox"/>	<input type="checkbox"/>	Work around herbicides/pesticides
<input type="checkbox"/>	<input type="checkbox"/>	Work under varying climatic (rain, snow, ice, high winds, etc.) conditions	<input type="checkbox"/>	<input type="checkbox"/>	Work with a team or as a member of a crew
<input type="checkbox"/>	<input type="checkbox"/>	Work around energized high voltage (above 12.5kv) equipment.	<input type="checkbox"/>	<input type="checkbox"/>	Work in close and confined places
<input type="checkbox"/>	<input type="checkbox"/>	Work around moving machinery	<input type="checkbox"/>	<input type="checkbox"/>	Work with respirator or full face mask
<input type="checkbox"/>	<input type="checkbox"/>	Work from ladders and scaffolds	<input type="checkbox"/>	<input type="checkbox"/>	Work alone in isolated locations

Instructions

This form will be used to collect information pertaining to your knowledge, skill, and ability for some of the job elements for the position(s) for which you are applying. The intent of the questionnaire is *not* to measure your ability to write; therefore, if a question can be answered with a simple “Yes” or “No,” you should do so. If you answer, “Yes,” you will be asked to write a short descriptive explanation. If you fail to provide an explanation for an answer you will not receive credit for the response. If you use pen and ink to complete the questionnaire, be sure that your responses are legible. Each question should be completed separately, so DO NOT use "ditto marks" or references to answers in other questions. If you need more space to complete an answer, indicated continued on *page 8*, and use the space provided to complete your answer. You’re advised that statements made on your resume, application, and this form are be subject to verification by contact with former employers.

"WHEN" can be answered by month and year, e.g., October 1968, or if covering several years for example, by "09/68 - 10/72."

"HOW MANY HOURS" OR "HOW OFTEN" can be answered, for example, by writing "full-time," or the total approximate number of hours, weeks or months spent performing the particular activity.

"WHO FOR," "WHAT COMPANY," OR "WHERE" can be answered by name of school attended, company, or employer, or "at home" or "self."

"PURPOSE," "METHOD," "HOW," etc., can be answered sometimes by very few words, such as "used broom to sweep out work area."

Disqualifying Driving Records

Within the past **THREE** years, any of the following conditions **disqualify** an applicant for a U. S. Government Motor Vehicle Authorization and the position(s) for which you are applying:

1. Conviction for operating a motor vehicle under the influence of alcohol or a controlled substance.
2. Conviction for leaving the scene of an accident without making his or her identity known.
3. Driver license suspended, revoked, or canceled.
4. Any recurrent record of auto accidents/incidents, traffic violations, or arrests, which demonstrates that the employee does not have an adequate sense of responsibility. This may be shown by any of the following:
 - Conviction for fleeing or attempting to elude a police officer.
 - Conviction for a felony involving the use of a motor vehicle.
 - Two or more accidents in which the applicant was at fault.
 - Two or more excessive speeding violations (15 miles per hour or more over the posted limit.)
 - Four or more moving violations

Name

Element 2 – Ability to Follow Instructions			
Questions	Yes	No	Briefly describe the task (i.e., what you were doing); how you received your instructions (verbal, visual, or written) OR type of equipment you were using (Questions 1 through 9)
1. Have you ever operated equipment, which required that you perform functions in a precise sequence?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Have you ever participated in a work or other activity where the use of specialized terminology was required?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Have you been responsible for cleaning and maintaining tools or shop equipment?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Have you ever participated in any activity that required you to perform a sequence of tasks as directed by another individual or entity?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Have you performed inventory or been responsible for supply stock?	<input type="checkbox"/>	<input type="checkbox"/>	
6. Have you had to perform detailed planning and investigation to complete a job or other activity?	<input type="checkbox"/>	<input type="checkbox"/>	

Name _____

Element 2 – Ability to Follow Instructions (Continued)			
Questions	Yes	No	Briefly describe the task (i.e., what you were doing); how you received your instructions (verbal, visual, or written) OR type of equipment you were using (Questions 1 through 9)
7. Have you performed equipment inspection tasks that included reading gauges, meters, or dials?	<input type="checkbox"/>	<input type="checkbox"/>	
8. Have you been responsible for compiling and maintaining records?	<input type="checkbox"/>	<input type="checkbox"/>	
9. Have you used instruction books or manuals to complete tasks?	<input type="checkbox"/>	<input type="checkbox"/>	

Question	Yes	No	Briefly describe the curriculum and the approximate number of hours completed.
10. Did you satisfactorily complete a technical school (e.g., military, lineman, etc.) or vocational high school curriculum? If so, describe the program or curriculum.	<input type="checkbox"/>	<input type="checkbox"/>	
11. Have you had training in other technical areas such as in the military, private contractor, etc? If so, describe the type of training received.	<input type="checkbox"/>	<input type="checkbox"/>	

Name _____

Element 3 – Dexterity and Safety			
Question	Yes	No	Description
1. Have you worked for an employer with an established formal safety program (i.e., published safety manuals, procedures, etc.)? If so, please briefly describe the program.	<input type="checkbox"/>	<input type="checkbox"/>	
2. Have you ever received an award or other recognition for your ability to work safely?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Have you had any safety related training (CPR, first aid, work procedures, etc.). If so, please describe the type of training, approximate dates, and number of hours.	<input type="checkbox"/>	<input type="checkbox"/>	
4. Have you, in the last 5 years, had an on-the-job accident or injury, which resulted in you missing work or school? If so, give dates of accident(s)/injuries, details of the circumstances that caused the accident/injury.	<input type="checkbox"/>	<input type="checkbox"/>	
5. Have you had a job that required you to work from heights and/or have you worked from heights in a non-job related activity? If so, describe in detail the type of work or non-job related activity, <u>including the approximate heights</u> from which you have worked.	<input type="checkbox"/>	<input type="checkbox"/>	

Name _____

Element 4 – Ability to use prints and drawings			
Have you used the following drawings/ diagrams	Yes	No	Describe how you have “used” the drawings/diagrams and for what purpose. If you have completed courses/training, indicate the title of the course (no course codes), type of school/training (e.g., trade school, military, correspondence, etc.) course length (number of hours), course description, and if you successfully completed the course.
1. Electrical wiring diagrams	<input type="checkbox"/>	<input type="checkbox"/>	
2. Schematic diagrams	<input type="checkbox"/>	<input type="checkbox"/>	
3. Electronic drawings	<input type="checkbox"/>	<input type="checkbox"/>	
4. One-line diagrams	<input type="checkbox"/>	<input type="checkbox"/>	
5. Mechanical/Construction blueprints	<input type="checkbox"/>	<input type="checkbox"/>	
6. Maps (road, topographic, physical, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
Have you taken courses in the following?	Yes	No	If you have completed courses/training, indicate the title of the course (no course codes), type of school/training (e.g., trade school, military, correspondence, etc.) course length (number of hours), course description, and if you successfully completed the course.
7. AC Theory	<input type="checkbox"/>	<input type="checkbox"/>	
8. DC Theory	<input type="checkbox"/>	<input type="checkbox"/>	

Name _____

Element 5 – Ability to Use Tools (Part A)

Instructions: Check the box next to any of the following hand tools that you have used.

<input type="checkbox"/>	1. Screw Drivers	<input type="checkbox"/>	10. Hand Saws	<input type="checkbox"/>	19. Rakes	<input type="checkbox"/>	28. Hand Drill
<input type="checkbox"/>	2. Hammers	<input type="checkbox"/>	11. Pipe Wrench	<input type="checkbox"/>	20. Axe or Hatchet	<input type="checkbox"/>	29. Hand Sander
<input type="checkbox"/>	3. Pliers	<input type="checkbox"/>	12. Vise/Clamps	<input type="checkbox"/>	21. Taps and Dies	<input type="checkbox"/>	30. Files/Rasps
<input type="checkbox"/>	4. Open-end wrenches	<input type="checkbox"/>	13. Paint Brushes	<input type="checkbox"/>	22. Side Cutters	<input type="checkbox"/>	31. Tin Snips
<input type="checkbox"/>	5. Socket wrenches	<input type="checkbox"/>	14. Paint Rollers	<input type="checkbox"/>	23. Rulers	<input type="checkbox"/>	32. Hot Glue Gun
<input type="checkbox"/>	6. Chisels/Punches	<input type="checkbox"/>	15. Ladders	<input type="checkbox"/>	24. Levels	<input type="checkbox"/>	33. Staple Gun
<input type="checkbox"/>	7. Tape Measure	<input type="checkbox"/>	16. Design Templates	<input type="checkbox"/>	25. Knife Sharpener	<input type="checkbox"/>	34. Miter Box
<input type="checkbox"/>	8. Adjustable Wrenches	<input type="checkbox"/>	17. Drawing Compass	<input type="checkbox"/>	26. Scribes/Awls		
<input type="checkbox"/>	9. Squares	<input type="checkbox"/>	18. Shovels	<input type="checkbox"/>	27. Chalk Line		

Part A – Section 2: Describe two or three tasks or projects where you have used some of the tools you've checked in Part A above.

Blank area for describing tasks or projects.

Element 5 – Ability to Use Tools (Part B)**Instructions:** Check the box next to any of the following power tools or equipment that you have used.

<input type="checkbox"/>	1. Circular Saw	<input type="checkbox"/>	7. Power Drill	<input type="checkbox"/>	13. Bench Grinder	<input type="checkbox"/>	19. Lawn Mower
<input type="checkbox"/>	2. Table Saw	<input type="checkbox"/>	8. Drill Press	<input type="checkbox"/>	14. Arc Welders	<input type="checkbox"/>	20. Weed Trimmer
<input type="checkbox"/>	3. Band Saw	<input type="checkbox"/>	9. Hydraulic Presses	<input type="checkbox"/>	15. Oxyacetylene (gas) welders	<input type="checkbox"/>	21. Tiller
<input type="checkbox"/>	4. Chain Saw	<input type="checkbox"/>	10. Wood/Metal Lathe	<input type="checkbox"/>	16. Soldering Iron	<input type="checkbox"/>	22. Personal Computer
<input type="checkbox"/>	5. Jig Saw	<input type="checkbox"/>	11. Dremel Tools	<input type="checkbox"/>	17. Sewing Machine		
<input type="checkbox"/>	6. Power Sander	<input type="checkbox"/>	12. Router	<input type="checkbox"/>	18. Vacuum Cleaner		

Part B – Section 2: Describe two or three tasks and/or projects where you have used some of the tools described in Part B above.

Name _____

Continuation Sheet		
Element	Question	

APPLICANT DISABILITY, RACE/NATIONAL ORIGIN AND GENDER IDENTIFICATION
(Please read the instructions and Privacy Act Statement before completing this form)

PRIVACY ACT STATEMENT

This data is being collected to plan and evaluate the agency's recruitment of persons with disabilities, minorities and women, and to help ensure that agency personnel practices meet the requirements of Federal law and regulation. The data you supply will be used for statistical analysis only. **SUBMISSION OF THIS INFORMATION IS VOLUNTARY.** Failure to provide this information will have no effect on the processing of your application for Federal employment. Individual personnel selections are not made based on this information.

Authority: Sections 1302, 3301, 3302, 3304 and 7201 of Title 5 of the U.S. Code, Section 2000e of Title 42 of the U.S. Code; and Section 791 of Title 29 of the U.S. Code.

1. Vacancy Announcement Number

2. Position Title, Series, Grade

3. Name (Last, First, Middle Initial)

5. Gender Male Female

6. SECTION A. DISABILITY STATUS

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A person is disabled if he or she has a physical or mental impairment, which substantially limits one or more major life activities. Please read the disability descriptions below and then write the two-digit numeric code in the box above which best describes your disability, if any. If you have more than one disability, choose the one which results in the most substantial limitation.

01. I do not wish to identify my handicap status.

05. I do not have a disability

SPEECH/HEARING/VISION IMPAIRMENTS

13. Severe speech malfunction or inability to speak; hearing is normal (Examples: defects of articulation [unclear language sounds]; stuttering; aphasia [impaired language function]; laryngectomy [removal of the "voice box"]).

15. Hard of hearing (Total deafness in one ear or inability to hear ordinary conversation, correctable with a hearing aid).

16. Total deafness in both ears, with understandable speech.

17. Total deafness in both ears, and unable to speak clearly.

22. Ability to read ordinary size print with glasses, but with loss of peripheral (side) vision (Restriction of the visual field to the extent that mobility is affected – "Tunnel vision").

23. Inability to read ordinary size print, not correctable by glasses (can read oversize print or use assisting devices such as glass or projector modifier).

24. Blind in one eye

25. Blind in both eyes (no usable vision, may have some light perception)

MISSING EXTREMITIES

27. One hand

28. One arm

29. One foot

32. One leg

33. Both hands or arms

34. Both feet or legs

35. One hand or arm and one foot or leg

36. One hand or arm and both feet or legs

37. Both hands or arms and one foot or leg

38. Missing both hands or arms and both feet or legs.

NONPARALYTIC ORTHOPEDIC IMPAIRMENTS (Because of chronic pain, stillness, or weakness in bones or joints, there is some loss of ability to move or use a part or parts of the body.)

44. One or both hands

45. One or both feet

46. One or both arms

47. one or both legs

48. Hip or pelvis

49. Back

57. Any combination of two or more parts of the body

PARTIAL PARALYSIS (Because of a brain, nerve, or muscle problem, including palsy and cerebral palsy, there is some loss of ability to move or use a part of the body, including legs, arms, and/or trunk.)

61. One hand

62. One arm, any part

63. One leg, any part

64. Both hands

65. Both legs, any part

66. Both arms, any part

67. One side of the body, including one arm and one leg.

68. Three or more major parts of the body (arms and legs)

7. COMPLETE PARALYSIS (Because of a brain, nerve, or muscle problem, including palsy and cerebral palsy, there is complete loss of ability to move or use a part of the body, including legs, arms, and/or trunk.)

70. One hand

71. Both hands

72. One arm

73. Both arms

- 74. One leg
- 75. Both legs
- 76. Lower half of body, including legs
- 77. One side of body, including one arm and one leg
- 78. Three or more major parts of body (arms and legs)

OTHER IMPAIRMENTS

- 80. Heart disease with no restriction or limitation of activity (*History of heart problems with complete recovery.*)
 - 81. Heart disease with restriction or limitation of activity
 - 82. Convulsive disorder (*e.g. epilepsy*)
 - 83. Blood disease (*e.g. sickle cell anemia, leukemia, hemophilia*)
 - 84. Diabetes
 - 86. Pulmonary or respiratory disorders (*e.g. tuberculosis, emphysema, asthma*)
 - 87. Kidney dysfunction (*e.g. if dialysis [Use of an artificial kidney machine is required]*)
 - 88. Cancer (*a history of cancer with complete recovery*)
 - 82. Cancer (*undergoing surgical and/or medical treatment*)
 - 90. Mental retardation (*Chronic and lifelong condition involving a limited ability to learn, to be educated, and to be trained for useful productive employment as certified by a State Vocational Rehabilitation agency under section 213.3102(t) of Schedule A.*)
 - 91. Mental or emotional illness (*A history of treatment for mental or emotional problems.*)
 - 92. Severe distortion of limbs and/or spine (*e.g. dwarfism, severe distortion of the back*)
 - 93. Disfigurement of face, hands, or feet (*e.g. distortion of features on skin, such as those caused by burns, gunshot injuries, and birth defects [gross facial birthmarks, club feet, etc.]*)
 - 94. Learning disability (*A disorder in one or more of the processes involved in understanding, perceiving, or using language Or concepts [spoken or written]; e.g. dyslexia.*)
- 06. I have a disability, but it is not listed above: Describe below:

SECTION B. ETHNICITY AND RACE IDENTIFICATION: Specific Instructions: The two questions below are designed to identify your ethnicity and race. **Regardless of your answer to question 1, go to question 2.**

Question 1. Are you Hispanic or Latino? (*A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.*)

- Yes No

Question 2. Please select the racial category or categories with which you most closely identify by placing an "X" in the appropriate box(s). Check as many as apply.

RACIAL CATEGORY (Check as many as apply)	DEFINITION OF CATEGORY
<input type="checkbox"/> American Indian or Alaska Native	A person having origins in any of the original peoples of North and South America (<i>including Central America</i>), and who maintains tribal affiliation or community attachment.
<input type="checkbox"/> Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
<input type="checkbox"/> Black or African American	A person having origins in any of the black racial groups of Africa
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.