## **CITY OF TWO HARBORS**

## JOURNEY LINEWORKER

## **Required Supplemental Application Form**

Applicant Na	me:	Date:		
YOU MUST COMPLETE AND RETURN THIS FORM TO BE CONSIDERED AS AN APPLICANT.  Please note:  This supplemental form will be used to rank applicants, so please be complete and accurate in your responses.				
1.	Do you posse equivalent? (	ss a valid Minnesota driver's license and CDL Driver's License or choose one)		
	YES	NO		
	If yes, what type of CDL do you have?			
	If no, do you have the ability to obtain these licenses within 6 months of hire? <i>(choose one)</i>			
	YES	NO		
2.	2. Do you possess a high school diploma or GED? (choose one)			
	YES	NO		
3.	Do you have technical college training in electrical distribution/maintenance of apprenticeships or related work experience? <i>(choose one)</i>			
	YES	NO		
4.	Pickup-truck, equipment, hy sticks, clamp	skill in operation all of the following tools and equipment: dump truck, man-lift, digger derrick, backhoe, chipper, pole climbing vdraulic press, wire cutters, heat sensors, electrical testing equipment, hot sticks, generator, chain saw, line tracer, ladders, forklift, locaters, various er tools, and portable or mobile radios? <i>(choose one)</i>		

**YES** 

NO

5.	Do you have	skill in the application of first aid methods and CPR? (choose one)
	YES	NO
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that any misre addendum wi	presentation or ll be grounds f smissal from	vers contained in this application are true and I agree and understand comission of facts contained in my application for employment or this for disqualification for employment, or in the event of employment, employment upon later discovery of any omission of facts or
		n, I hereby acknowledge that I have read and understood the above application forms may result in rejection of your application.
Applicant's si	gnature:	
Date:		