

STATE OF OREGON

SC-14

SKILL CODE SHEET
Complete and Attach to Your Application
For the Following Job:

4180 Armory Operations Technician 1

4181 Armory Operations Technician 2

Listed below are job skills which will provide additional assistance to state agencies in filling the jobs listed above. Attach this completed form to your application (PD 100). Do not check skills that you are not willing to use on the job. If you fail to submit this information, your application may be rejected. Keep a copy for your records.

Check the following skills in which you are fully proficient and have actually performed the duties as noted in your work history (job #) on your pd100:

- Job # Check (BLD) Building Maintenance
(CPY) Carpentry - at a non-journeyman level
(OFC) General Office Work
(GRD) Grounds Maintenance
(ICD) Industrial Custodial
(IVY) Inventory of Supplies
(LWK) Lead work over others
(LKG) Lock & Door Repair
(MAS) Masonry/Concrete Repair
(MRW) Mechanical Equipment Maintenance (Non-journey Level)
(PAT) Painting
(PBG) Plumbing - at non-journeyman level
(PLA) Sheetrock Repair
(PUR) Purchasing Procedures
(ROF) Roofing Repairs
(LTP) Typing/Word Processing

Check the following skills which you have applied as a REGULAR PART of your job:

- (HAZ) Cleaning Chemicals, Fertilizers and Pesticides
(OSH) State and Federal Safety Rules and Regulations

Driver's License Number: State:

YOU MUST SIGN AND DATE BELOW:

Any oral or written statement that is false, fraudulent, or misleading contained in this application and attached materials or made in the course of any related employment process, whether made by me or by others at my requests, will result in rejection of my application, denial of employment, dismissal from state service if discovered after employment, and in many circumstances, prosecution.

I certify and affirm that I have read and understand the above notice. I further certify that I personally completed this application and attached materials or requested its completion and that all statements contained herein are true and complete to the best of my knowledge.

NAME (Please Print) Social Security Number

Signature Date