BPA VACANCY ANNOUNCEMENT (#004831-07)
ELECTRICAL APPRENTICESHIP

U.S. DEPARTMENT OF ENERGY
BONNEVILLE POWER ADMINISTRATION

POSITIONS: Power System Electrician Apprentice, BB-2810, Lineman Apprentice, BB-2810, Substation Operator Apprentice, BB-5407

LOCATIONS: Washington, Oregon, Montana, Idaho (More than one selection will be made)

OPENING DATE	CLOSING DATE	HOURLY PAY RATE
09/24/07	11/16/07	$22.48

Selections at Bonneville Power Administration (BPA) are based on merit and are accomplished without regard to political, religious, or union affiliation or non-affiliation, marital status, race, color, national origin, sex, sexual orientation, age, or non–disqualifying physical disability; nor will such action be based upon any personal relationship, patronage, or nepotism.

WHO MAY APPLY: Career and Career Conditional Employees of Bonneville Power Administration, Transfer Eligibles, Reinstatement Eligibles, 30% or more Disabled Veterans, Veterans eligible to apply under VRA, Veterans eligible to apply under the Veterans Employment Act of 1998, and CTAP/ITCAP Eligibles.

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

WHAT 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.

SELECTIVE PLACEMENT FACTOR: These positions have a selective factor that 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. (See details in the "Am I Qualified?" section of the announcement, below).

NOTES:

- In addition to the wage rate, BPA pays a supplement equal to 4.4% of the wage rate to permanent employees for each hour of straight-time wages that are paid.
- This agency provides reasonable accommodations to applicants with disabilities. If you need a reasonable accommodation for any part of the application and hiring process, please notify the agency. The decision on granting reasonable accommodation will be on a case-by-case basis.
- Candidates that are determined as best-qualified may be further evaluated (e.g., interview panel) by BPA Apprenticeship Craft Committee(s) for each craft, as required.

CONDITIONS OF EMPLOYMENT:

- 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. ******
- If selected, you will be required to pass a pre-employment physical examination and drug test at BPA's expense.
- If selected, you will be required to pass a pre-employment background investigation.
- In accordance with Department of Energy Order 3792.3, this position is subject to random drug testing. Failure to pass subsequent tests may result in disciplinary action, including removal from the Federal service.
- 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 following your apprenticeship training for a period ranging from two to three years after 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 of 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.

APPRENTICE EXAMINATION INFORMATION:

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 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 that you are eligible to test. This notice will list all testing dates, locations and times. Appointments 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. (Applicants who travel to take the Apprentice Exam do so at their own expense).

Apprentice exams are scheduled for **December 1 and 8, 2007 in Vancouver, Washington, and December 1, 2007 in Spokane, Washington.**

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.
- Obtain, possess and maintain a valid commercial driver's license.
- 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 call to work at any time.
- 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.

APPLICATION AND PROCESS TENTATIVE TIMELINE:

1. September – Announcement Opens
2. November – Announcement Closes
3. December – Apprentice written exams
4. Jan/Feb– Craft Specific Application Rating
5. March – Apprentice Interviews
6. April – Selections
7. June – Hire Date (June 15, 2008)

AM I QUALIFIED?

SELECTIVE PLACEMENT FACTOR: These positions have a selective factor that 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 show 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 as they relate to the elements listed below. 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 the attached Supplemental Questionnaire for Electrical Apprenticeships. Candidates considered best qualified on the above-mentioned job elements may be further evaluated by an interview with the Apprentice Craft Committee for the applicable craft(s).

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. Electrical apprentices can expect to be in a travel status a substantial amount of time (varies depending on craft) since 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.

HOW TO APPLY:

BPA's Application Package Checklist and Frequently Asked Questions (FAQ's) will assist you in preparing and ensuring your application package is complete. The checklist is for your personal use only (please do not submit it with your application).

You can access BPA's Apprentice Website for more information about the Apprentice Program. The link is: Apprentice Program.

Submit your application with the supplemental information listed below:

- Submit your resume, Optional Application for Federal Employment (OF-612), or other written application format of your choice that fully describes your education and experience.
- Employment Driving record abstract for past three (3) years (obtained from the Dept. of Motor Vehicles or equivalent State agency, dated within the last 3 months). **(REQUIRED**)
- 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)
- Completed Supplemental Questionnaire for Electrical Apprenticeships is **REQUIRED**. Be sure that you indicate which apprenticeship position(s) you are applying for on the 1st page of the supplemental. An electronic form can be downloaded from the following location www.jobs.bpa.gov/How_To_Apply/Electrical Apprentice Supplemental Questionnaire.doc
- All non-BPA applicants are encouraged to complete and submit BPA F 3330-11e, Applicant Disability, Race/National Origin and Gender Identification form (attached).
- Copy of Notification of Personnel Action (SF-50). **REQUIRED** if you are a current or former Federal employee

***All application materials MUST be submitted by the closing date of the announcement - we will not contact you for missing information and will assess your application based only on information received by the closing date. Please retain a copy of your application as BPA does not return applications or provide copies.**

REQUIRED INFORMATION ON RESUMES:**

1. Announcement number, title, and grade of the position for which you are applying. **PLEASE CHECK WHICH APPRENTICE POSITION(S) YOU ARE APPLYING FOR (ON THE FIRST PAGE OF THE ATTACHED SUPPLEMENTAL QUESTIONNAIRE FOR APPRENTICESHIP POSITIONS).**
2. Your full name, mailing address, day and evening telephone number, and e-mail address.
3. Country of citizenship.
4. 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).
5. Indicate if we may contact your current supervisor.
6. 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.
7. 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 the information requested in the vacancy announcement, you may lose consideration.**

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 503-230-3810, 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./

If you have questions, you may call the Employment Center at 503-230-3810, or 1-877-975-4272.

Applicants should retain a copy of their application as BPA does not return applications or provide copies.

WHERE TO APPLY: If **mailing** your application, please send to the following address: Bonneville Power Administration, ATTN: Human Resources, Employment Center – NHR-1, PO Box 3621, Portland, OR, 97208-3621. If applications are delivered in person, they can be delivered to: Bonneville Power Administration, Human Resources, Employment Center,

NHR-1, 905 NE 11th Avenue, Portland, OR 97232. ***Please note that if you do not currently have a building access pass, and are hand delivering your application, you will not be able to gain access into the building after 6 p.m.***

RECEIPT OF APPLICATION:
Your complete application must be received no later than 12 midnight Pacific Time (PT) of the closing date to be accepted. Applications received by fax or e-mail must be time/date stamped or electronically postmarked at point of origin no later than 12 midnight PT.

Applicants will be notified of receipt of their application package.

FAX APPLICATIONS:
Faxed applications should be sent to 503-230-3149. Applicants are responsible for ensuring that application materials transmit successfully.

EMAIL APPLICATIONS:
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).

THE BONNEVILLE POWER ADMINISTRATION IS A HARASSMENT FREE WORKPLACE.

www.va.gov	http://www.jobs.bpa.gov/	www.usajobs.opm.gov	http://www.opm.gov/qualifications/index.htm
Veterans	Bonneville Power	Office of Personnel	Office of Personnel Management
Administration	Administration	Management Jobs	

OMB Approval
#1910-1100
07/04

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

Electrical Apprenticeships

Name _____

Street Address/P.O. Box _____

City/State _____ **Zip Code** _____

Telephone *(Day)* _____ *(Evening/Cellular)* _____ **Electronic-mail address** _____

Please check the box(s) for all electrical apprenticeship positions for which you are applying:
☐ **Apprentice Electrician** ☐ **Apprentice Substation Operator**
☐ **Apprentice Lineman**

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. Please fully complete the entire questionnaire answering each question completely and accurately. Your responses must reflect your actual knowledge and skills. You can obtain an electronic version (can be completed using a personal computer) of this form on BPA's jobs web page at http://www.jobs.bpa.gov/How_To_Apply/forms.cfm. If completing the question electronically, it is recommended that you do NOT use all capital letters since this will significantly reduce the amount of space available for you to record your answers.

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.

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
☐	☐	Work with frequent overnight travel (11 or more nights per month)	☐	☐	Work from high places (15 feet and above)
☐	☐	Work when subject to emergency call-outs (i.e., call to perform emergency work outside normal working hours)	☐	☐	Work around hazardous materials (i.e., solvents, PCB's, chemicals, etc.)
☐	☐	Work extended periods of overtime, including working weekends.	☐	☐	Work around herbicides/pesticides
☐	☐	Work under varying climatic (rain, snow, ice, high winds, etc.) conditions	☐	☐	Work with a team or as a member of a crew
☐	☐	Work around energized high voltage (above 12.5kv) equipment.	☐	☐	Work in close and confined places
☐	☐	Work around moving machinery	☐	☐	Work with respirator or full face mask
☐	☐	Work from ladders and scaffolds	☐	☐	Work alone in isolated locations

_____

Name

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?	☐	☐	
2. Have you ever participated in a work or other activity where the use of specialized terminology was required?	☐	☐	
3. Have you been responsible for cleaning and maintaining tools or shop equipment?	☐	☐	
4. Have you ever participated in any activity that required you to perform a sequence of tasks as directed by another individual or entity?	☐	☐	
5. Have you performed inventory or been responsible for supply stock?	☐	☐	
6. Have you had to perform detailed planning and investigation to complete a job or other activity?	☐	☐	

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?	☐	☐	
8. Have you been responsible for compiling and maintaining records?	☐	☐	
9. Have you used instruction books or manuals to complete tasks?	☐	☐	

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.	☐	☐	
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.	☐	☐	

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.	☐	☐	
2. Have you ever received an award or other recognition for your ability to work safely?	☐	☐	
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.	☐	☐	
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.	☐	☐	
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.	☐	☐	

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	☐	☐	
2. Schematic diagrams	☐	☐	
3. Electronic drawings	☐	☐	
4. One-line diagrams	☐	☐	
5. Mechanical/Construction blueprints	☐	☐	
6. Maps (road, topographic, physical,etc.)	☐	☐	

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	☐	☐	
8. DC Theory	☐	☐	

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.

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

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.

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

BPA Form F3330-11e
10/06

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 [ ][ ]

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**
☐ American Indian or Alaska Native	A person having origins in any of the original peoples of North and South America *(including Central America)*, and who maintains tribal affiliation or community attachment.
☐ 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.
☐ Black or African American	A person having origins in any of the black racial groups of Africa
☐ Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
☐ White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.