

Name: \_\_\_\_\_ High School: \_\_\_\_\_

**Related High School Classes** (Mainly Tech Ed Courses: Welding, Machining, Construction, Engineering, Drafting, etc.)

Class Name	Grade	Most memorable project or skill attained
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Related Technical College Classes** (Welding, Machining, Construction, Engineering, Computer etc.)

Class Name	Grade	Most memorable project or skill attained
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Other trainings you attended or clubs you were/ are involved with:**

Name	Most memorable project or skill attained
_____	_____
_____	_____
_____	_____

WELDING	NEVER USED THE MACHINE BEFORE	VERY LITTLE PRACTICE WITH THE MACHINE	SOME PRACTICE WITH THE MACHINE
Stainless Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fitting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lining	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mig	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heliarc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tig	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tip Tig	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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MACHINING	NEVER USED THE MACHINE BEFORE	VERY LITTLE PRACTICE WITH THE MACHINE	SOME PRACTICE WITH THE MACHINE
Boring Bar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drill Press	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CNC Machine (What type of CNC Machine?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine Lathe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Milling Machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waterjet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brake Press	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shears	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Additional Comments:**

**Answer the following questions.**

1. If you had a choice between a more hands on class (you get to make something) or a class where you are tested on paper, which class would you select and why? (Answer in two-to-three complete sentences.)

2. List three characteristics of a strong employee.

3. What is the best class you have taken in high school or technical college? What did you like about the class? (Answer in two-to-three complete sentences.)

4. What do you like to do outside of school or work? Ex: hunting, reading, camping, sports you play or watch, drawing, etc. (Answer in two-to-three complete sentences.)