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OKLAHOMA CITY
OKLAHOMA 73108

customer service
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administration
405.297.1331

embarkok.com



MECHANIC SUPPLEMENTAL QUESTIONNAIRE

Applicant Name: _____
Date: _____

1. Are you an honorably discharged veteran of the United States Armed Forces? If yes, ensure you provide a copy of your DD-Form 214 indicating character of discharge to the Personnel Department prior to the closing date for this vacancy announcement.

YES NO N/A

2. Are you willing to work evening or overnight shifts including weekends and holidays? If needed, please use the comment box below to elaborate on any responses.

YES NO

3. Do you have a valid ASE **Master Mechanic Certification**? If yes, indicate license number, date of issue and state of issue here and in the licenses and certifications section of this application.

YES NO

COMMENTS: _____

4. Do you have any valid ASE certifications? If yes, you must indicate these certifications the comments section and/or in your resume text.

YES NO

COMMENTS: _____

5. Please indicate your current **driver's license** type.

None. Class D. Class C CDL. Class B CDL. Class A CDL.