Town of LaFayette Highway Department Skill Assessment List

Name _____ Date _____

Please list and describe any experience or knowledge that you have in the following areas:

GENERAL MECHANICAL ABILITY

AUTOMOTIVE MECHANICAL ABILITY

SMALL EQUIPMENT MECHANICAL ABILITY

DIESEL OR HYDRAULIC ABILITY

Please list your operation of any of the following:

Commercial Vehicles, Heavy Equipment, Construction or other Equipment

Please list any other knowledge or skills applicable for this position: