



Sub-Contractor Qualifications

Rev. Date :
8-1-09

If you have problems with the "SUBMIT" button, please fax form to 941-922-3108 or email form to: employment@cadworks.us

There is no right or wrong answer to these questions. This is simply to make sure we disperse the job to the right person with the matching credentials. We don't want a sub to get a 3D Architectural Rendering project if his qualifications are with 2D Electrical. This is how we sort your qualifications with the matching projects. Any additional information you would like us to know about, please attach a piece of paper describing your ideas or comments.

Contact Info

This section is needed for all methods of getting in touch with you. Check the boxes to indicate your primary business contact information.

Company Name if applicable	<input type="checkbox"/>	Address 1		
Name	City	State	Zip	
<input type="checkbox"/> Office Phone	<input type="checkbox"/>	Address 2		
<input type="checkbox"/> Cell Phone	City	State	Zip	
<input type="checkbox"/> Home Phone	Main E-mail Address		<input type="checkbox"/>	Secondary E-mail Address
Fax	Other E-mail Address		I.M. Address	

Software Experience

This section summarizes all CAD software knowledge. "Years" refers to the length of time you have been working with the software product. (1-10) is asking how well you know the software from 1 - 10? 1= Little Knowledge, 10 = Excellent Knowledge. If you are the owner of the software, please check the box where you list the software name under the "Own" column. If you have multiple versions of one product, please put the most recent version down with the number of years in the years column that you have been using the software.

Own	Software with Version	Years	(1-10)	Own	Software with Version	Years	(1-10)
<input type="checkbox"/>				<input type="checkbox"/>			
<input type="checkbox"/>				<input type="checkbox"/>			
<input type="checkbox"/>				<input type="checkbox"/>			
<input type="checkbox"/>				<input type="checkbox"/>			

Technical Background

This section is a summarization of all technical experiences. Check all boxes according to your experiences. (1-10) is asking the how well you know that particular field if its selected. Here, you must select from each column - Industry, Titles & Production (All selections should be listed by priority from the top)

Industry Disciplines			Job Titles			Production		
Discipline	Years	(1-10)	Titles	Years	(1-10)	Production	Years	(1-10)

Goals & Expectations

This section is to list all of your intended goals & expectations working with CADworks. Check all that apply.

Time & Income	Additional Notes or Comments	Days & Times Available					
		Day	Start	End	Day	Start	End
		<input type="checkbox"/>	Monday		<input type="checkbox"/>	Thursday	
		<input type="checkbox"/>	Tuesday		<input type="checkbox"/>	Friday	
		<input type="checkbox"/>	Wednesday		<input type="checkbox"/>	Saturday	
Position	Career Goals by Priority				Requested Hourly Rate		
	1	5	6	7	8	Minimum Hourly Rate	_____
	2					Ideal Hourly Rate	_____
	3						
	4						

