



NAME: _____

Job Control #: _____

**Supplemental Questionnaire
Program Representative Series**

Complete the fields below for any relevant licenses or registrations issued by the Bureau of Automotive Repair which you currently hold:

License Type	License/Registration Number	Expiration Date
Smog Check Inspector		
Smog Check Repair Technician		
Brake Adjuster		
Lamp Adjuster		
Automotive Repair Dealer		

Check the boxes below for any current Automotive Service Excellence (ASE) certifications you hold:

- | | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> A1 | <input type="checkbox"/> A6 | <input type="checkbox"/> B3 | <input type="checkbox"/> G1 | <input type="checkbox"/> T1 | <input type="checkbox"/> T6 |
| <input type="checkbox"/> A2 | <input type="checkbox"/> A7 | <input type="checkbox"/> B4 | <input type="checkbox"/> F1 | <input type="checkbox"/> T2 | <input type="checkbox"/> T7 |
| <input type="checkbox"/> A3 | <input type="checkbox"/> A8 | <input type="checkbox"/> B5 | <input type="checkbox"/> L1 | <input type="checkbox"/> T3 | <input type="checkbox"/> T8 |
| <input type="checkbox"/> A4 | <input type="checkbox"/> A9 | <input type="checkbox"/> B6 | <input type="checkbox"/> L2 | <input type="checkbox"/> T4 | <input type="checkbox"/> X1 |
| <input type="checkbox"/> A5 | <input type="checkbox"/> B2 | <input type="checkbox"/> C1 | <input type="checkbox"/> L3 | <input type="checkbox"/> T5 | |

- Automobile Master Technician (A1 – A8)
- Collision Repair Master Technician (B2 – B5)
- Medium-Heavy Duty Truck Master Technician (T2 – T7)
- Undercar Specialist (A4, A5, X1)

Complete the fields below for any relevant college degree/certificate you hold:

School Name	Course of Study	Units Completed (Semester)	Units Completed (Quarter)	Diploma, Degree or Certificate Obtained	Date Completed

Complete the fields below for any other relevant licenses/certifications you currently hold (including Manufacturer or other state certifications):

License/Certificate	Expiration Date