

NEVADA STATE CONTRACTORS BOARD

5390 KIETZKE LANE, SUITE 102, RENO, NV, 89511 (775) 688-1141 FAX (775) 688-1271, INVESTIGATIONS (775) 688-1150 8400 WEST SUNSET ROAD, SUITE 150, LAS VEGAS, NV, 89113 (702) 486-1100 FAX (702) 486-1190, INVESTIGATIONS (702) 486-1110 www.nscb.nv.gov

RESUME OF EXPERIENCE

EXPERIENCE RECOI	RD OF:(Print nam	ne of qualified indiv	idual)
Employer's Name			Phone:
Address:			
Address	(Street, City, State, Zip)		L-IIIaII
Date of Employment:	From: To: To:	(month/day/year)	Full-Time Part-Time (specify aggregate total) Years Months
Check <u>all</u> jobs held fo Journeyman	or this employer: Foreman Supervisor	Contractor	Self-Employed Other:
	DESCRIBE IN DETAIL THE SP	ECIFIC TYPE AND	OR SCOPE OF WORK PERFORMED
imployer's Name:			
Address:	(Street, City, State, Zip)		E-mail:
Date of Employment:	From: To: _	(month/day/year)	Full-Time Part-Time (specify aggregate total) Years Months
Check <u>all</u> jobs held for Journeyman	or this employer: Foreman Supervisor	Contractor	Self-Employed Other:
	DESCRIBE IN DETAIL THE SP	ECIFIC TIPE ANI	D/OR SCOPE OF WORK PERFORMED
Employer's Name:			Phone:
Address:			E-mail:
	(Street, City, State, Zip)		
Date of Employment:	From: To: To:	(month/day/year)	Full-Time Part-Time (specify aggregate total) Years Months
Check <u>all</u> jobs held fo Journeyman	or this employer: Foreman Supervisor	Contractor	Self-Employed Other:
	DESCRIBE IN DETAIL THE SE	PECIFIC TYPE AND	D/OR SCOPE OF WORK PERFORMED