

# United Brotherhood of Carpenters and Joiners of America



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722C

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## Apprenticeship Application Form for Piledrivers & Divers Local 2520

Application Number \_\_\_\_\_

Last \_\_\_\_\_

Date of application \_\_\_\_\_

First \_\_\_\_\_

Middle \_\_\_\_\_

Social Security Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone ( \_\_\_\_\_ ) \_\_\_\_\_ Other phone ( \_\_\_\_\_ ) \_\_\_\_\_

Name Change: please provide the name that will appear on documents or transcripts that you submit, if it is different than your present name.

Last \_\_\_\_\_ First \_\_\_\_\_

The recruitment, selection, employment and training of apprentices during their apprenticeship shall be without discrimination because of race, color, religion, national origin, sex or age- except the applicant must be at least 18 years of age at time of indenture. Women and minorities are encouraged to apply. The sponsor will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required under applicable law and lawful regulations issued there under.

Applicants who meet all basic requirements may be interviewed by the JATC. Apprentices will be selected in order of their final ranking.



To meet minimum qualifications for apprenticeship, applicants must:

(Please initial each line)

- a. \_\_\_\_\_ Be a minimum of 18 years of age.
- b. \_\_\_\_\_ Be a high school graduate or have a GED.
- c. \_\_\_\_\_ Provide an official transcript for high school education. All GED records must be submitted if applicable.
- d. \_\_\_\_\_ Submit a DD-214 to verify military training and/or experience if they are a veteran and wish to receive consideration for such training/experience.
- e. \_\_\_\_\_ Possess or have the ability to attain a valid Alaska Drivers License
- f. \_\_\_\_\_ Prior to being indentured, applicants selected from the pool of interviewed applicants will be required to provide results of a physical examination and a drug test as decided by the JATC.
- g. \_\_\_\_\_ Must be physically fit and able to lift and carry 50 pounds.
- h. \_\_\_\_\_ Provide proof of Alaska residency for a minimum of one year.

Mark the appropriate statement(s) below to indicate how you qualify for interview and/or evaluation for acceptance into the Piledrivers apprenticeship program:

\_\_\_\_\_ I qualify for evaluation and entry because I meet all minimum qualifications for the apprenticeship.

\_\_\_\_\_ I qualify for evaluation and entry into apprenticeship because I work for a contractor who became signatory (indicate the name of the contractor) \_\_\_\_\_

# APPLICANT

## **A. Introductory Questions**

1. What brought you to Alaska? Please explain.

## **B. Interest in the Piledriving Trade**

1. What caused you to be interested in the Piledriving trade? Please explain.
2. Are there any aspects of the Piledriving trade that you do not like?

## **C. Ability to Accept Direction/Supervision**

1. If we contacted your previous employer, what would he say about you?
2. How should a supervisor handle a problem employee on the job? Pick a problem you've experienced and explain how you would have handled the problem.
3. What are the most important things a supervisor should do in dealing with people?

## **D. Ability to Work with Others**

1. Have you ever worked on teams, committees, or in other organizations? Please explain.

2. What are your interests away from your employment or school?
3. Do you prefer work on a crew or would you prefer working alone? Why?
4. How do other people feel about working with you? Please explain.

**E. Understanding of the Obligations of an Apprenticeship**

1. Can you think of any restrictions on your working in remote sites? Include any responsibilities that may preclude you from doing so.
2. Do you have any difficulty performing hard physical labor?
3. Do you foresee any problems with committing yourself to the program for the full 4 years, 5200 hours and working under direct supervision of this Committee?
4. Are you aware that there may be down times in the economy and that you may be unemployed at times? How do you intend to cope with this problem? Please explain.
5. Will you be able to take jobs that require you to be out of town for a period of weeks/months?

## EDUCATION

1. Circle the number of years of formal education you have completed:

10 11 12 13 14 15 16 17 18

2. Are you a high school graduate?                      Yes\_\_\_ No\_\_\_

2A) if no, do you have a GED?                      Yes\_\_\_ No\_\_\_

3. List degrees you have earned (PRINT information)

Degree 1 \_\_\_\_\_

Major 1 \_\_\_\_\_

School 1 \_\_\_\_\_

Degree 2 \_\_\_\_\_

Major 2 \_\_\_\_\_

School 2 \_\_\_\_\_

4. Did you ever participate in any kind of vocational technical training during or after high school?                      Yes\_\_\_ No\_\_\_

4A. If yes, how long was the program (months)

4B. Describe the program:

\_\_\_\_\_

\_\_\_\_\_

4C. Did you complete the program?                      Yes\_\_\_ No\_\_\_

5. Did you participate in any kind of school-to-work (co-op education) while you were in high school?                      Yes\_\_\_ No\_\_\_

5A. If yes, describe the program:

\_\_\_\_\_

\_\_\_\_\_

## BACKGROUND

6. Have you served in the U.S. military?                      Yes\_\_\_ No\_\_\_

6A. If yes, how long? (months) \_\_\_\_\_

6B. Which branch? \_\_\_\_\_

6C. Which military training schools did you complete, if any?

\_\_\_\_\_

7. Have you ever been convicted of a felony? (Conviction will not automatically disqualify you.) Yes\_\_\_ No\_\_\_

7A. If yes, explain the conviction:

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8. Do you have construction work experience? Yes \_\_\_ No\_\_\_

9. If yes, please explain: \_\_\_\_\_

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9. Have you applied with this apprenticeship program before? Yes\_\_\_ No\_\_\_

9A. If yes, how many times? \_\_\_\_\_

9B. If yes, what year(s)? \_\_\_\_\_

10. Have you applied for apprenticeship in any other trade or occupation? Yes\_\_\_No\_\_\_

11. Have you participated in an apprenticeship of any kind? Yes\_\_\_ No\_\_\_

11A. If yes, in what? \_\_\_\_\_

12. Are you currently serving an apprenticeship? Yes\_\_\_ No\_\_\_

12A. If yes, list the employer or apprenticeship sponsor: \_\_\_\_\_

13. Do you have a valid driver's license? Yes\_\_\_ No\_\_\_

14. Do you have a commercial driver's license (CDL)? Yes\_\_\_ No\_\_\_

14A. If yes, what class CDL do you have? \_\_\_\_\_

### **INTEREST AND ABILITY**

15. List some reasons why you are applying for this apprenticeship program:

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16. Give a brief description of the kind of work you think is involved with this trade: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Are you physically and mentally able to safely perform or learn to safely perform the work of this trade, either with or without reasonable accommodations? Yes\_\_\_ No\_\_\_

18. Are you able to get to and from work at various job sites anywhere within the geographical area that this apprenticeship program covers (the state of Alaska)?  
Yes\_\_\_ No\_\_\_

19. Are you able and willing to attend all related classroom training as required to complete your apprenticeship? Yes\_\_\_ No\_\_\_

20. Are you able to climb and work from ladders, scaffolds, poles or towers of various heights? Yes\_\_\_ No\_\_\_

22. Can you crawl and work in confined spaces? Yes \_\_\_ No\_\_\_

23. Are you able to read and understand English? Yes \_\_\_ No\_\_\_

24. Are you able to hear and understand verbal instructions and warnings given in English? Yes \_\_\_ No \_\_\_

**WORK HISTORY**

\*\*\*You must complete and return with this application, a work **history** summary sheet, indicating your present and previous employers. \*\*\*

25. Are you presently employed? Yes\_\_\_ No \_\_\_

25A. If yes, do you request that we do NOT contact your present employer? Yes \_\_\_ No\_\_\_

26. Do you have the legal right to work in the United States of America? Yes \_\_\_ No \_\_\_

**EMPLOYER REFERENCES**

**Employer:** \_\_\_\_\_ **Contact person:** \_\_\_\_\_

**Date work began:** \_\_\_\_\_ **Date work ended:** \_\_\_\_\_

**Duties performed:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

\_\_\_\_\_

**Employer:** \_\_\_\_\_ **Contact person:** \_\_\_\_\_

**Date work began:** \_\_\_\_\_ **Date work ended:** \_\_\_\_\_

**Duties performed:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

\_\_\_\_\_

**Employer:** \_\_\_\_\_ **Contact person:** \_\_\_\_\_

**Date work began:** \_\_\_\_\_ **Date work ended:** \_\_\_\_\_

**Duties performed:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

\_\_\_\_\_



## STATEMENTS OF UNDERSTANDING

**\*\*\*PLEASE INITIAL EACH OF THE STATEMENTS (A THRU L) BELOW TO INDICATE YOUR KNOWLEDGE AND UNDERSTANDING.**

**NOTE: IF YOU NEED CLARIFICATION ON ANY ITEM DO NOT HESITATE TO ASK.**

- A. \_\_\_\_\_ I am aware that it is my responsibility to keep this program informed of any change in my address or phone number.
- B. \_\_\_\_\_ I have read and understand the basic qualifications for entry into the program.
- C. \_\_\_\_\_ I understand that I must furnish documentation to provide evidence that I do meet the qualifications required for entry into the pool of eligible candidates for this apprenticeship.
- D. \_\_\_\_\_ I understand that it is my responsibility to see that all OFFICIAL transcripts and other required documents are provided in a timely manner in order to complete my application.
- E. \_\_\_\_\_ I understand that if I fail to submit ALL of the required information within the specified time frame, my application may be considered incomplete.
- F. \_\_\_\_\_ I understand that I cannot qualify for interview until I have met the minimum basic qualifications and have provided the necessary transcripts and documents as required.
- G. \_\_\_\_\_ I hereby acknowledge that I bear the sole responsibility for completing my application following the instructions provided.
- H. \_\_\_\_\_ I understand that any intentional false information or statements that I have provided on this application form or on other documents shall be cause for termination or indenture, should I be selected for the program.
- I. \_\_\_\_\_ I understand that an incomplete or unsigned application form will NOT be processed.
- J. \_\_\_\_\_ I understand that only the original application form will be processed, and that photocopies are not acceptable.
- K. \_\_\_\_\_ I understand that if selected, I will be required to complete the selection process by qualifying on any examination, including a physical examination or drug testing, if required by the sponsor: either before or after signing an indenture.
- L. \_\_\_\_\_ I understand that if selected I will be required to attend class once every year, at my own expense, as directed by the JATC for 4 consecutive years.

I have initialed all of the above (A thru L) to indicate my understanding, and state that, to the best of my knowledge, all information provided on this form is true and accurate. I hereby grant permission to all former employers and references listed to disclose any information concerning my past employment and/or qualifications. I agree that any false statements made by me in this application shall constitute grounds for disqualification of my selection or grounds for my discharge, if false information is discovered after being selected for the apprenticeship.

I hereby apply for an apprenticeship indenture with this sponsor and agree that if selected, I will abide by all standards, rules and policies covered by the indenture (Apprenticeship Agreement).

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**Apprenticeship Application EEOC Supplemental Information Form**

THIS APPRENTICESHIP SPONSOR IS COMMITTED TO EQUAL OPPORTUNITY FOR ALL APPLICANTS. THE RECRUITMENT, SELECTION, EMPLOYMENT AND TRAINING OF APPRENTICES DURING THEIR APPRENTICESHIP, SHALL BE WITHOUT DISCRIMINATION BECAUSE OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX OR AGE- EXCEPT THE APPLICANT MUST BE 18 YEARS OF AGE. WE RESPECTFULLY REQUEST THAT YOU RETURN THIS FORM ALONG WITH YOUR COMPLETED APPLICATION FORM FOR APPRENTICESHIP.

**\*\*\*\*PLEASE COMPLETE THE FOLLOWING\*\*\*\***

THE INFORMATION VOLUNTARILY PROVIDED BELOW IS SIMPLY FOR EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) PURPOSES. THIS INFORMATION WILL ASSIST US IN OUR EFFORTS TO PROVIDE ACCURATE INFORMATION IN COMPLIANCE WITH EEOC REGULATIONS AND REQUIREMENTS.

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth \_\_\_\_\_

Sex:    \_\_\_ Male \_\_\_ Female

Race: \*\*Choose Only One\*\*

Ethnic Group: \*\*Choose Only One\*\*

\_\_\_ American Indian or Alaskan

\_\_\_ Hispanic Origin

\_\_\_ Asian or Pacific Islander

\_\_\_ Not of Hispanic Origin

\_\_\_ African American

\_\_\_ White

How did you become aware of this apprenticeship opportunity?

\_\_\_ Word of Mouth

\_\_\_ Outreach Organization

\_\_\_ Television

\_\_\_ Radio

\_\_\_ Career Day

\_\_\_ Posted Announcement

\_\_\_ Guidance Counselor

\_\_\_ Other \_\_\_\_\_

\_\_\_ Newspaper (Name of Newspaper) \_\_\_\_\_

**THIS FORM WILL NOT BECOME PART OF YOUR PERSONAL FILE. IT WILL BE MAINTAINED IN A SEPARATE FILE, USED ONLY FOR EEOC REPORTING PURPOSES.**