

I.B.E.W. Local Union No. 8 – Personal Contact Sheet

Full Name _____ Date ___/___/___

Address _____

City _____ State _____ Zip _____

S.S. # _____ Date of birth ___/___/___

Race: White ___ Black ___ Hispanic ___ Asian ___ Native American ___
Pacific Islander ___ Other ___

Gender: Male ___ Female ___

Current Phone # _____

E-Mail Address _____

Emergency Contact (Name/Phone Number/Relationship) _____

Years of Electrical Experience: Residential ___ Commercial ___ Industrial ___

Education: H.S. Diploma? ___ GED? ___ Algebra (1yr.)? ___

Have you ever been a member of the IBEW? _____ If yes, Local # _____

Have you ever applied for Local 8's Apprenticeship? _____ When? _____

Do you hold any Licenses or Certificates? Check all that apply.

_____ Ohio Fire Alarm _____ City of Toledo _____ State of Michigan _____ CPR/1st Aid

_____ OSHA 10/15/30 (Circle which apply) _____ Welding _____ Apprentice Certificate

Current Employer: _____

Wage Rate: _____ Health Insurance? _____ Pension? _____

Do you have a current and valid driver's license? _____

Do you have reliable transportation? _____

How did you hear about the Program? _____

Any falsification of the above information will automatically disqualify you from the program.

***DO NOT CALL THIS OFFICE – IF AN OPPORTUNITY BECOMES AVAILABLE,
WE WILL CALL YOU.***

FOR LOCAL UNION USE ONLY.

Comments:

Classification Determined by the Local Union: _____

Organizer: _____ Date: ___ / ___ / ___