

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

\_\_\_\_\_ Inside \_\_\_\_\_ Residential \_\_\_\_\_ VDV \_\_\_\_\_ CE/CW

(Check the program you are interested in)

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:

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Classification Determined by the Local Union: \_\_\_\_\_

Organizer: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_