Carpenters Local Union 349

Application for Membership-Pending Apprentice Applicants This application is for informational purposes only for Local 349.

This application will not replace any applications you have completed with the Apprenticeship.

PLEASE PRINT CLEARLY

Name:	Date:			
Address:				
City:				
Telephone: () Alternate I	Phone: ()			
Email Address:	Do you have Facebook? Yes 🗌 No 🗌			
UBC#: U Date of Birtl	h/			
Name of School:				
Location of School:				
Trade/Major:				
SKILLS AND ABILITIES:				
LICENSES, CERTIFICATES, etc. (ex. 10 hour OSHA/Scaffolding, etc.):				
Do you have any experience in working construction?				
Why do you think you would like to be an apprentice carpenter?				
How did you find out about the Carpenters Union? (list current member	ers names if applicable)			

Are you currently employed? Yes No No						
WORK EXPERIENCE (List most recent position first):						
Most Recent Employer	Dates Employed	Work Performed				
	From:					
	То:					
Address	Supervisor					
Job Title	Reason for Leaving					
Employer	Dates Employed	Work Performed				
	From:					
	To:					
Address	Supervisor					
Job Title	Reason for Leaving					
Employer	Dates Employed	Work Performed				
	From:	North Gramma				
	To:					
Address	Supervisor					
Address	Cupervisor					
11.79						
Job Title	Reason for Leaving					
	<u> </u>					
PLEASE ANSWER THE FOLLOWING	QUESTIONS:					
Are you able to perform carpentry wor	k safely? Yes No No					
Are you able to perform carpentry work safely with respect to other employees at a job site? Yes No						
Do you have a valid driver's license? Yes No Do you own an automobile? Yes No No No No No No No N						
Do you have access to transportation to job sites? Yes No						

FOR OFFICE USE ONLY: Interviewed/Accepted: First Employer: Indenture Date:	Start Date	Score:	Level: Location:	
		Score:	Laval:	
Apprentice Applicant Signature			Date	
I understand that should membership offer be ex Constitution of the United Brotherhood of Carpen understand that neither the policies, rules, regula implied membership offer.	ters, New England Regional Coun-	cil of Carpenters Bylaws, ar	nd Carpenters Local 349's Bylaws. However	ver, I further
APPLICANT'S CERTIFICATION AND AGREEMENT I hereby certify that the facts set forth in the above membership application are true and complete to the best of my knowledge and authorize Carpenters Local Union 349 to verify their accuracy and to obtain reference information on my work performance. I hereby release Carpenters Local 349 from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having a membership decision based on such information.				
Please list any additional information	about yourself that you fe	eel Local 349 should	be aware of:	
Democrat	Independent	Republican	Unaffiliated	
If yes, please check one:				
Are you registered to vote? Yes	No 🗌			
Do you understand that Local 349 is union signatory contractors. Yes	•	ying you or securing	work for you? You will be empl	loyed by

Interior Systems Local 349

EQUAL OPPORTUNITY VOLUNTARY SELF-DISCLOSURE

COMPLETING THIS FORM IS VOLUNTARY AND IS NOT A REQUIREMENT

This information will be used solely for affirmative action purposes and will be kept confidential. You are not required to provide this information, but if you do, the information will help us to meet our affirmative action goals.

Name:	Date:			
Address:				
City:				
Telephone: () Alternate Phone:				
Email Address:				
SSN#: Date	e of Birth/			
GENDER: Female Male VE	TERAN: Yes No			
RACE/ETHNICITY DATA (Please check one or more from the question	ons below):			
1) Do you consider yourself Hispanic or Latino?	S NO			
A person of Cuban, Mexican, Puerto Rican, South or Central American, or	r other Spanish culture or origin, regardless of race.			
2) In addition, please select one or more of the following	g categories with which you identify:			
American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.				
Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.				
Black or African American: A person having origins in any of the black racial groups of Africa.				
Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.				
White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa				
ARE YOU A US CITIZEN? Yes No No				
WHAT IS YOUR PRIMARY SPOKEN LANGUAGE? English	Spanish			
Other 🔲 F	Please list			
WHAT OTHER LANGUAGES DO YOU SPEAK FLUENTLY?				