

IBEW LOCAL UNION 55 REGISTRATION FORM FOR OUT-OF-WORK LIST

(Please Print Legibly)

Check here if any of your information has changed.

First Name: _____ Mi: _____ Last Name: _____ Suffix _____

S. S. #: _____ -- _____ -- _____ D.O.B. : _____ / _____ / _____ Optional : Sex : Male Female

Race: American Indian/Alaskan Asian/Pacific Islander Black Hispanic White/Caucasian Other/Declined

Perm. Address: _____ City: _____ ST: _____ Zip Code: _____

Temp. Address: _____ City: _____ ST: _____ Zip Code: _____

Is your permanent home in the State of Iowa? YES NO IF YES: How Long? _____ Yrs. County _____

Primary Phone (_____) _____ Secondary Phone: (_____) _____

PRESENT MEMBER OF IBEW LOCAL UNION #: _____ **Classification:** _____ **Card#:** _____

I AM SIGNING THE FOLLOWING BOOKS: *Journeyman Tech* *Operator* *Groundsman*

Email: _____ Current DOT Physical YES NO

Class of CDL/Endorsements/Restrictions _____ D.L. #: _____ State Issued: _____ Exp. Date: _____

I will accept: *Distribution Work:* YES NO *Transmission Work:* YES NO *Substation Work:* YES NO

URD Agreement Work: YES NO **Short Term Work (1 week or less):** YES NO

EQUIPMENT AND/OR FIELD-RELATED EXPERIENCE: Place a check by each piece of equipment you can run well and/or field-related experience you have. If you cannot operate a listed piece of equipment efficiently or do not have the work experience listed, **DO NOT CHECK IT!!** List other equipment or field-related experience on back of form.

- | | | |
|--|--|--|
| <input type="checkbox"/> Backhoe | <input type="checkbox"/> Lead Cable Splicing | <input type="checkbox"/> Wind Turbine Exp |
| <input type="checkbox"/> Bucket Trk/Aerial Device | <input type="checkbox"/> Line Clearance | <input type="checkbox"/> Traffic Control Wiring |
| <input type="checkbox"/> Cable Plow | <input type="checkbox"/> Low Drill | <input type="checkbox"/> Substation Panel/Power House Wiring |
| <input type="checkbox"/> CATV-Overhead | <input type="checkbox"/> Other (<i>List on back</i>) | |
| <input type="checkbox"/> CATV-Underground | <input type="checkbox"/> Rebar | |
| <input type="checkbox"/> Climbing (Will Accept Climbing Work) | <input type="checkbox"/> Restoration | |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Skidsteer | |
| <input type="checkbox"/> Crane 21 Ton or < | <input type="checkbox"/> Street Lighting | <input type="checkbox"/> CPR Card Exp Date: _____ |
| <input type="checkbox"/> Crane 21 Ton or > | <input type="checkbox"/> Stringing Equipment (<i>List on back</i>) | <input type="checkbox"/> First Aid Card Exp Date: _____ |
| <input type="checkbox"/> Digger Derrick | <input type="checkbox"/> Substation Exp. | <input type="checkbox"/> Osha T&D 10 |
| <input type="checkbox"/> HD Drilling(<i>List on back</i>) | <input type="checkbox"/> Suckvac/Potholing | |
| <input type="checkbox"/> Dozer Type/Size (<i>List on back</i>) | <input type="checkbox"/> Texoma/Williams Digger | <input type="checkbox"/> CDL/Med Card |
| <input type="checkbox"/> Excavator | <input type="checkbox"/> Trencher Type/Size (<i>List on back</i>) | <input type="checkbox"/> Confined Spaces |
| <input type="checkbox"/> Flagging/Traffic Control | <input type="checkbox"/> Clam Shell | <input type="checkbox"/> CIC/CIA |
| <input type="checkbox"/> Foreman | <input type="checkbox"/> Track Equipment | <input type="checkbox"/> Flagging/Traffic Control |
| <input type="checkbox"/> Footer Exp. | <input type="checkbox"/> Helicopter Exp (<i>List on back</i>) | <input type="checkbox"/> Welder (<i>List on back</i>) |
| <input type="checkbox"/> General Forman | <input type="checkbox"/> Underground Vault Exp | <input type="checkbox"/> Helicopter (<i>List on Back</i>) |
| <input type="checkbox"/> Hi Volt Cable Splic 34.5KV> | <input type="checkbox"/> URD Installer | <input type="checkbox"/> Hand Signal/Rigger |
| | | <input type="checkbox"/> NCCCO |
| | | <input type="checkbox"/> Splicing (<i>List on back</i>) |
| | | <input type="checkbox"/> Tech College Grad |
| | | <input type="checkbox"/> (Elec Power Dist) YR _____ |

CERTIFICATIONS/ENDORSEMENTS

HD Drilling Type/Size _____

Dozer Type/Size _____

Stringing Equipment _____

Trencher Type/Size _____

Helicopter Exp. _____

Other _____

CERTIFICATIONS/ENDORSEMENTS

Welder _____

Helicopter _____

Splicing _____

Other _____

List contractors you will not / can not work for _____

HAVE YOU EVER WORKED FOR A NON-UNION ELECTRICAL, GAS, OR UTILITY LINE CONSTRUCTION OR UNDERGROUND CONTRACTOR? YES NO If yes, which contractor? _____

If yes, would you be willing to assist in organizing a Union at your current/former non-union employer? ___Yes ___No

ARE YOU REGISTERED TO VOTE? YES NO

I have read and understand the Employment Referral Procedures in Conjunction with the Local Union 55 By-Laws Agreement. I, the undersigned, agree to abide by the posted referral procedures of IBEW Local Union 55. **I also agree that if any of the above statements are found to be incorrect, it will be just cause for removing my name from the Out-of-Work List.**

Signed: _____

Date: _____

IBEW Local 55
(This section shall serve as your receipt for signing)

Name: _____

Date: _____

Staff Signature: _____

Time: _____