

APPRENTICE APPLICANTS

PLEASE READ THE FOLLOWING BEFORE STARTING YOUR APPLICATION

Ironworkers Local # 451 would like to “thank-you” for your interest in joining the Local #451 Apprenticeship program. The Ironworkers Local #451 Apprenticeship and Training Program is a State of Delaware (DoL) Registered program consisting of three years (paid) on-the-job training (basically Monday-Friday, eight hours a day) and two evenings per week of (unpaid) classroom instruction.

The Ironworkers Local #451 is an ‘equal opportunity employer’ that invests a lot of time, money, and effort into all of our Apprentices! This is a career opportunity offering EXCELLENT wages (scheduled increases) and benefits. However, you must be willing to put forth your best efforts to make the necessary commitments to become an EXCELLENT Journeyman Ironworker and a loyal asset to the Local #451.

Please be aware that we accept applications YEAR ROUND but we only have openings once a year according to work opportunities and space availability.

Please follow the directions listed below to submit your application for enrollment in the next Local #451 Apprenticeship Class.

Minimum Qualifications:

1. Must be at least 18 years of age.
2. Must be High school graduate or GED
3. Must have a Valid Drivers License and Transportation

Directions:

1. Print off the application (below) and complete it to the best of your knowledge.
2. Come to the Union hall located at 203 S. Old DuPont Rd. Wilmington, DE 19804 between the hours of 9 am – 2 pm, with the following items. (You must have all of the following to apply)
 - a. Original/Certified Copy (Photocopies not accepted)
 - i. Birth Certificate
 - ii. HS Diploma/GED (with transcript of grades)
 - iii. Valid Drivers License
 - iv. Social Security Card
 - b. Application for Apprenticeship
3. Your Application is complete and you will be notified via certified mail when the next Apprenticeship Applicant Evaluation is scheduled. (Please remember, once you submit your application, if your phone number or address change please inform the Union hall so that we will be able to contact you.)

If you have any questions concerning the application process please call Local #451 between the hours of 9 am – 2 pm, Monday thru Friday.

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for _____ Date of application ____/____/____

Referral Source Advertisement Employee Relative Government Employment Agency
 Walk-in Private Employment Agency Other _____

Name of source (if applicable) _____

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

Telephone # () _____ Mobile/Beeper/Other Phone # () _____ Social Security # _____

If necessary, best time to call you at home is ?..... : _____ AM
PM

May we contact you at work?..... Yes No

If yes, work number and best time to call () : _____ AM
PM

If you are under 18 and it is required, can you furnish a work permit? Yes No

If no, please explain _____

Have you submitted an application here before? Yes No

If yes, give date(s) / /

Have you ever been employed here before? Yes No

If yes, give dates From ____/____/____ To ____/____/____

Are you legally eligible for employment in this country? Yes No

Date available for work / /

Type of employment desired Full-Time Part-Time Temporary Seasonal Educational Co-Op

Will you relocate if job requires it? Yes No Will you travel if job requires it? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime if required? Yes No

If no, please explain _____

Have you ever been bonded? Yes No

Have you been convicted of a crime in the last seven (7) years? Yes No

If yes, please explain _____

Driver's license number if driving is an essential job function _____ State _____

EMPLOYMENT HISTORY

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

| | | | | |
|-----------------------------------------------------------------------------------------------------------------------|------------------|----------------------|-----|---------------------------------------------------------------|
| EMPLOYER | TELEPHONE () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| ADDRESS | | FROM | TO | |
| JOB TITLE | | HOURLY RATE / SALARY | | |
| IMMEDIATE SUPERVISOR AND TITLE | | STARTING | | |
| REASON FOR LEAVING | | \$ | PER | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | HOURLY RATE / SALARY | | |
| | | FINAL | | |
| | | \$ | PER | |
| EMPLOYER | TELEPHONE () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| ADDRESS | | FROM | TO | |
| JOB TITLE | | HOURLY RATE / SALARY | | |
| IMMEDIATE SUPERVISOR AND TITLE | | STARTING | | |
| REASON FOR LEAVING | | \$ | PER | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | HOURLY RATE / SALARY | | |
| | | FINAL | | |
| | | \$ | PER | |
| EMPLOYER | TELEPHONE () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
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| REASON FOR LEAVING | | \$ | PER | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | HOURLY RATE / SALARY | | |
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| REASON FOR LEAVING | | \$ | PER | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | HOURLY RATE / SALARY | | |
| | | FINAL | | |
| | | \$ | PER | |

COMMENTS

Include explanation of any gaps in employment. _____

SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. _____

EDUCATIONAL BACKGROUND IF JOB RELATED

A. List last three (3) schools attended, starting with most recent. **B.** List number of years completed. **C.** Indicate degree or diploma earned, if any. **D.** Grade Point Average or Class Rank. **E.** Major field of study (if applicable).

| A. SCHOOL | B. YEARS COMPLETED | C. DEGREE DIPLOMA | D. GPA CLASS RANK | E. MAJOR | F. MINOR |
|-----------|--------------------|-------------------|-------------------|----------|----------|
| | | | | | |
| | | | | | |
| | | | | | |

REFERENCES

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

| NAME | TELEPHONE | YEARS KNOWN |
|------|-----------|-------------|
| | () | |
| | () | |
| | () | |

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and any offices held. Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status.

| ORGANIZATION | OFFICES HELD |
|--------------|--------------|
| | |
| | |
| | |
| | |

List special accomplishments, publications, awards, etc

EXCLUDE INFORMATION WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR OTHER PROTECTED STATUS. _____

List any additional information you would like us to consider. _____

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its re or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

The application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

PHYSICAL EXAMINATION AND RELEASE OF INFORMATION

I understand that for acceptance into Ironworkers Local #451 Apprentice Program satisfactory completion of a physical examination and drug screening are mandatory, and I agree to take same immediately upon request. I agree to pay for any required examination/testing, with the understanding that said cost will be reimbursed to me (paid receipt required) upon satisfactory completion of my probationary period (90 days) and joining Local Union #451. Additionally; upon acceptance, I understand/agree that Ironworkers Local #451 may request any/all personal/business references pertaining to my character, work ethic, physical health and any other pertinent information at any time during my association with Ironworkers Local #451. I authorize release of any/all information for all items contained in this paragraph to an authorized Ironworkers Local #451 representative; and release from liability all parties involved in seeking, gathering, furnishing, receiving and using said information.

APPRENTICESHIP REQUIREMENTS

I understand that it is a MANDATORY requirement that I have a valid/current driver's license and reliable transportation at all times; and that failure to comply with these requirements is grounds for IMMEDIATE dismissal/termination from Ironworkers Local #451.

Finally, Ironworkers Local #451 has a "-0- tolerance for illegal/invalid drugs"; therefore, I understand/agree that any refusal to take/failure of required drug testing is IMMEDIATE grounds for dismissal/termination from Ironworkers Local #451.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date ____ / ____ / ____