

Pipeline Training

APPLICATION 2017-2018

Return to: IUOE NPTF-Elizabeth Malley
 1125 17th Street NW
 Washington, D.C. 20036
 Toll-free: 855-711-6783
 Fax: 202-778-2630
EMAIL TO: Nptf@iuoe.org (Preferred)

3 Week Intermediate class

Name:		Male: <input type="checkbox"/>	Female: <input type="checkbox"/>
Address:			
City:	State:	Zip Code:	
Phone: () ()	Cell Phone: () ()	E-mail:	Date of Birth:

List the following information as it appears on your union card/dues receipt

Local:	Registration #	Initiation Date:
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Have you worked in the pipeline industry in the past? Yes _____ No _____
 Approximately how many pipeline hours did you work in the last year? _____
 List your last pipeline employer:
 Employer: _____ Date: _____ Location: _____

Have you taken a pipeline training course in the past? Yes: _____ No: _____
 Date: _____ Location: _____
 Equipment trained on: _____

Which pieces of equipment can you skillfully operate? Indicate your skill level on a scale of 1 (lowest) to 10 (highest).

____ Excavator ____ Angle Dozer ____ Sideboom

Please check the class you are applying for (select only one class):

Intermediate class (3 weeks)

____ **Excavator** ____ **Angle Dozer** ____ **Sideboom**

Are you willing to work outside the jurisdiction of your local union? Yes _____ No _____

 Signature of Applicant

 Signature of Business Manager

By accepting training from the Training Fund, you agree to provide the Fund with updated information about your pipeline employment over the next two years.

Class Date: _____ Class Location: _____