

IUOE Local 115 Application Form – Industrial Workplaces

This application form, when completed and submitted to **jobs@iuoe115.ca**, will be kept on file. An application may lead to an interview, a training offer, or a job offer.

Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address – Street and City/Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Second Occupation if any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Union Member? Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_ If yes, which union? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Nations? Yes\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_

If Yes, which First Nation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are not a member of a First Nation, are you part of an equity seeking group? Check if appropriate:

\_\_\_\_\_\_\_\_\_ Non-status Indigenous heritage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Women

\_\_\_\_\_\_\_\_\_ Newcomer to Canada \_\_\_\_\_\_\_\_\_\_\_ Disability or another barrier to employment

Industrial equipment or vehicles you have experience in operating, repairing or maintaining:

Type of equipment or vehicle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years of experience \_\_\_\_\_\_\_\_\_

Type of equipment or vehicle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years of experience \_\_\_\_\_\_\_\_\_

Type of equipment or vehicle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years of experience \_\_\_\_\_\_\_\_\_

Product that you may have experience in manufacturing, servicing or transporting:

Are you currently registered in a BC apprenticeship program? Yes \_\_\_\_\_ No \_\_\_\_\_\_

If Yes, which trade? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apprenticeship level \_\_\_\_\_\_\_\_\_\_\_

If you are not currently registered, have you ever been part of a Canadian apprenticeship program in the past? Yes \_\_\_ No \_\_\_\_ If Yes, which trade? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province? \_\_\_\_ Apprenticeship level reached \_\_\_\_\_

List any work-related certificates or endorsements you have earned through training, including skilled trades certifications and endorsements or other courses.

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Do you have any other industrial, mechanical or construction experience not mentioned above?

What kind of work do you want to do?

Are you currently registered with an employment service such as a WorkBC office or a First Nations employment office? Yes \_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_

Name of employment office and case manager (optional)

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IUOE Notes (Office Use Only)

Consider for training \_\_\_\_\_ upgrading\_\_\_\_\_ assessment \_\_\_\_\_\_\_\_\_ Journeyperson? Y \_\_\_