OF WORTH AMERICA

APPLICATION FOR EMPLOYMENT LABORER'S LOCAL NO. 16

7				
D				
PLEASE PRINT:				
FULL NAME				******
ADDRESS				
CITY		ZIP	CODE	••••••
SS#		EMAIL	•••••	•••••
DATE OF BIRTH	AGE	U.S CITIZEN?	YES NO	
PHONE NO	C	CELL NO		•••••
VALID DRIVER'S LIC	ENSE ? YES	NOSTATE	*******************************	*******
FOR EMPLOYM	IENT PURPOSES DRUG TI	ESTING IS REQUIRED BY TH	IE CONTRACTO)R
PREVIOUS I	EMPLOYMENT RECO	RD DURING THE PAST T	HREE YEARS	
	OOF OF EMPLOYMENT AND	REFERENCES MAY BE REQUI	RED)	
CONTACT PERSON AND REFERENCE PHONE NO	NAME OF EMPL	OYER AND ADDRESS	FROM	то
PHONE NO.				
LIST THE NUMBER	OF YEARS EXPERIEN	ICE IN THE FOLLOWING	G CLASSIFICA	TIONS
		······································		
		Landscaper		er
Worker Asphalt Rakers	Handling Fence Builder	Lead Base Paint Removal	Certified Scaffold worke	r
Carpenter Tenders	Fire Watch	Man Lift Operator	Scaler	
C.D.L. Driver	Flagman	Pest Technician	Scissor Lift Ce	rtified
Cement Mason	Fly Ash Vacuum	(Licensed) Control Pest &	Shop Helper	
Tenders	Operator	Rodent Technician	Stakedriver	
Chainman	Fork Lift Certified	Pipelayer (includes water	Stone Mason T	
Chipping Hammer	Operator	pipe, sewer pipe,	Tool Room Per	
Operator	General Labor	drainage pipe, pvc, & all	Toxic, Hazardo	us Waste
Clean-up	Grade Checker	tile, pipe)	Removal Work	er
Concrete Saw Operator	Guardrail Builder	Plasterers Hodcarriers	Trencher Opera	
Concrete Specialist	Gunite Nozzlemen	Plaster Tenders	Unloading of F	
Concrete Workers	Industrial and Plant	Radiation Worker II	and Fixtures	
Core Driller	Laborers	Rigger, Certified	Vibrator Opera	
Cutting Torch Burner	Jack Hammer	Signal Man	Window Clean	er
Demolition Worker	Journeyman-Shaft	Rodmen		
Drywall/Sheetrock	& Tunnel Worker	Sandblasters (potmen)		

Job Applicant's Signature

Date____

REGISTRATION AND MEMBERSHIP INFORMATION FOR ALL NEW APPLICANTS

Print Name:	Last	First	Middle Initial
111 (7)			A !!
Address (Street N	umber and Name)		Apt. #
City		State	Zip Code
Date of Birth(Month/Day/Year)			Social Security #
Place of Birth			Citizen of what Country

- <u>Union Requirements</u> Registration Fee \$21.00(cash or money order only no checks accepted for registration fee) Registration is good for thirty days.
- 10 Hour OSHA, 3 Hour Haz-Com, 8 Hour Journeyman, MSHA Classes required prior to employment.
- Two forms of identification valid Driver License, ID, Social Security card.
- Employer Requirements Drug and alcohol screening and physical when referred to work.
- An applicant must have a valid Driver's License or ID, and Social Security card. If you are a citizen of another country you must provide proof your INS Documentation
- Must have basic tools prior to reporting to work hard hat, work shoes, hammer, tape measurer, pliers, utility knife, tool pouch, and rubber boots (required for concrete pouring).
- <u>Initiation Fees</u> Applicants are required to join the union after seven days of work
- Initiation fee is \$300.00 and will be deducted in four weekly payments of \$75.00 each
- Working dues are 4% of your gross wages per week
- Monthly membership dues are \$28.00 per month
- It is your responsibility to pay monthly membership dues if the contractor is not deducting it from your paycheck and during periods of lay-off
- When laid off you must re-register in person on the out of work list to be referred to another job
- Member ship dues are due the first day of every month and no latter than the last day of the second month. Your membership will automatically be suspended on the first day of the third month, and a reinstatement fee will be charged if you wish to continue your membership with Laborers' Local Union #16.
- Training Safety Training classes are available to all applicants and members at no cost
- Contact Julian Cordova of the New Mexico Laborers' Training and Apprenticeship Trust Fund at (505)243-3175 for additional information and class schedules.
- Certifications obtained from taking classes may be very helpful with your search for employment.

Payments sent by US Mail should be made payable to: Laborers' Local Union #16 (check or money order only)

Albuquerque	Espanola	Farmington	Las Cruces	
1030 San Pedro Dr. NE	P.O. Drawer 9	801 E. Murray Rd.	632 N. Almendra	
Albuquerque, NM 87110	Espanola, NM 87532	Farmington, NM 87401	Las Cruces, NM 88001	
Name (Print)	Signature		Date	-

AUTHORIZATION FOR REPRESENTATION – AUTHORIZAR PARA REPRESENTAR Under the National Labor Relations Act

I, the undersigned employee of – Yo, el firmando empleado de
All card kept confidential by the LIUNA Local Union No. 16 and U.S. Government.

Toda tarjeta firmada es confidencial de la Union y de el govierno

Check box if you are interested in serving on the organizing committee. \square

SOUTHERN CALIFORNIA DISTRICT COUNCIL & LOCAL 16 1030 San Pedro Dr. NE · Albuquerque, NM 87110

	1050 5411 1 0410 151. 1115	Tribuquoiquo, Titti 07110
Name – Nombre _		SS#
Address – Domicil	lo	
Home Phone - Cas	a Telephono	
Date – Fecha	Signature – Sue Firma	l
District Council an and all other condit other Employers for voluntary recogniti notice to the Union	d Local Union #16 thereof to be my collective bargai tions of employment. This authorization shall apply to be whom I may become employed after this date. To tion and negotiation of rights with my Employer and	nal Union of North America AFL-CIO, and its affiliated Southern California ning agent in matter wages, fringe benefits, organizing, hours of employment to the Employer for whom I am employed or referred to on this date and to all his authorization is signed by me for the purpose of securing for the Union with any future Employer. It may be revoked only by me, through written ed only by me, through written notice to the Union by certified return receipt woked.
	DUES CHECK-OFF AUTHO	RIZATION AND ASSIGNMENT
		o. 16 affiliated with
	THE LABORERS' INTERNATIONAL	UNION OF NORTH AMERICA, AFL-CIO
dues (from gross established for its deduct amounts from bargaining agreem collective bargaining, through writte authorization shall agreement between not less than 10 day with the above renthereafter until revright or the choice	AFL-CIO, Local Union #16, such amounts from my wages), initiation fees, readmission fees, organizing members from time to time. My Employer, including om my gross wages and pay the same to the local usent in existence between the Union and my Employer and agreement entered into between my Employer and the union and my employer by certified be automatically renewed and shall be irrevocable for my Employer and the Union. Written notice must gays prior to the expiration of each period of one (1) shewal and revocation provisions irrespective of my moked. For the effective period of the check-off author to resign my union membership. Union dues are decreased.	(print), do hereby assign to Laborers' International Union gross wages as shall be required to pay an amount equivalent to membership fees, and New Mexico Laborers Political League to the union as may be ing my present Employer and any future Employer, is hereby authorized to union and/or its authorized representative, in accordance with the collective or. This authorization shall become operative upon the effective date of each did the Union. This authorization shall be irrevocable unless revoked only by return receipt mail in the month of December. I agree and direct that this ir successive periods of one (1) year each, or for the period of any subsequent given by me to my Employer and the local union not more than 20 days and year. Furthermore, this check-off authorization shall continue in accordance membership in the Union. If not revoked it shall continue from year to year ization and assignment, and to the extent permitted by law, I hereby have the ductible for federal income tax purposes. Local dues may qualify as business sect to various restrictions imposed by the Internal Revenue Service.
		OFF AUTHORIZATION
work to deduct fro Political League (" signing of this aut employer, that I have receives to make perely a suggested Union cannot favo through written no certified return received."	reement with the Laborers' International Union of N m my paycheck () for each hour worker'NMLPL") at such time as other remittances are made thorization and the making of payments to NMLPL ave a right to refuse to sign this authorization and to coolitical expenditures and contributions in connection and guideline, that I am free to contribute more or less for or disadvantage me because of the amount of my coolitice to the Union. This authorization shall be irrevoked it shall continue from year the writing. Contributions to the New Mexico Laborers	LERS' POLITICAL LEAGUE (print), do hereby authorize and direct each employer orth America AFL-CIO, Local Union #16 or any of its affiliates for whom I are devery pay period and to remit such amount to the New Mexico Laborers' to the Union. This authorization is voluntarily made. I understand that the are not conditions of membership in the Union or of employment with any contribute to NMLPL without reprisal and that NMLPL will use the money it with federal, state and local elections. I also understand that this amount is than this amount by any lawful means other than this check-off and that the portributions or my decision not to contribute. It may be revoked only by me, ocable unless revoked only by me, through written notice to the Union by one year thereafter until revoked. This authorization shall remain in effect until the Political League are not deductible as charitable contributions for federal
Date:	Signature:	SS#:
	(Initial indicates copy received)	White-Union · Yellow-Sub Office · Pink-Employee · Tag-Union

