



OPERATOR TRAINEE APPLICATION

APPLICANT INFORMATION

Full Name: Date:

Last *First* *M.I.*

Address:

Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Phone: () - Email:

IBEW Local #: **CARD#** **CURRENT CLASSIFICATION:**

PRIOR EXPERIENCE

Have you attended any vocational technical training, or any other schooling related to this trade? Y N

Explain

Do you have any previous experience in this trade? Y N

ATTESTATION

I am physically/mentally able to safely perform/learn to perform the work of this trade: Y N

I now warrant that all information provided on this form is true and accurate to the best of my knowledge. I hereby apply for a Trainee position

Signature: _____ Date: _____

COMPLETE THIS APPLICATION AND EMAIL TO: info@ibew111.org