PLEASE READ ALL OF THIS

NOTICE
Teamster Construction Driver Apprentice Program

The AGC/Teamster Apprenticeship Committee will accept applications for its program on a year round basis. Application forms are available at the following locations:

Teamster Local #160
405 1/2 South Broadway
Rochester, MN 55904
Hours: 9:00 am - 4:00 pm

Teamsters Drivers Local #120
9422 Ulysses St NE
Blaine, MN 55434
Hours: 9:00 am - 4:00 pm

Teamsters Local #346
2802 W First Street
Duluth, MN 55806
Hours: 9:00 am - 4:00 pm

Each applicant must meet the following minimum qualifications:

1. The applicant shall be a minimum of 18 years of age.

2. The applicant shall be a high school graduate or the equivalent and shall include, with the completed applications, a transcript of high school records or GED diploma.

3. The applicant must be physically fit to perform the work of the trade and must pass a physical examination, which will include a drug and alcohol screen test upon acceptance into the program.

4. The applicant must possess a valid MINNESOTA/WISCONSIN DRIVER’S LICENSE and shall include with the completed application, a copy of the license and a copy of the applicant’s driving record for the previous 3 years, or, if less, the entire period during which the applicant has had a driver’s license.

5. The applicant shall possess interest, motivation, character, cooperation, good judgment and such other similar qualities that will indicate successful completion of the apprenticeship program and success as a journey person. The qualities shall be determined in a fair and impartial interview with the joint committee.
Applications received unsigned, incomplete or without the necessary documentation (copy of high school transcript or diploma or GED diploma, copy of valid Minnesota/Wisconsin driver’s license, a copy of previous three year driving history) will not be considered.

All applicants meeting the above minimum qualifications for admission will be notified and placed in the eligibility pool. Each eligible applicant will be interviewed, evaluated and scored by the committee. During the evaluation, the committee will determine the level of experience and competence and may require an applicant to have up to fifty hours of training from an authorized technical college approved by the committee.

The number of new apprentices to be accepted shall be determined before starting interviews. The number will be based on the needs of the industry.

The names of the apprentices selected by this process shall be based on the numerical rating obtained from the interview evaluation and posted immediately following the selection process at the program sponsor’s place of business. Applicants will be placed in apprenticeship positions in ranking order according to the list created after the review process.

All eligible applicants not selected for entry into apprenticeship after the interview will be registered in an eligibility pool according to their ranking. They will remain in this pool for a period of two years from the time of interview and will be included in all subsequent selection procedures for trial period.

The recruitment, selection, and employment of apprentices by the Apprenticeship Committee is made without discrimination because of race, age, religion, national origin, sex, sexual preference or disability.

You will be informed if you get an interview.

QUESTIONS CONCERNING THE PROGRAM CAN BE DIRECTED AND ALL APPLICATIONS HAVE TO BE SENT TO:

George McMahon
Apprentice Coordinator
P.O. Box 48157
Coon Rapids, MN 55448
Office: 763-754-7878
Cell: 612-581-3430
IMPORTANT FACTS ABOUT INFORMATION ON YOUR APPLICATION

This application is to assist in the process of referring you to employers for possible employment. Certain information requested on the application is private, that is, it may be released only to you or to government agencies.

<table>
<thead>
<tr>
<th>Private Data</th>
<th>Why we ask for it</th>
<th>Are you legally obligated to provide it?</th>
<th>What may happen if you don’t provide it?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number</td>
<td>To distinguish you from all other applicants and to make processing more efficient.</td>
<td>No</td>
<td>You will be assigned an individual identification number in order to insure that your records will not be confused with those of another applicant. You will have to use the number when contacting the committee concerning any of your records.</td>
</tr>
<tr>
<td>Name/Address</td>
<td>To distinguish you from all other applicants; to be able to send you notices.</td>
<td>Yes</td>
<td>Failure to provide information may be cause for rejecting an application.</td>
</tr>
<tr>
<td>Home Telephone</td>
<td>To be able to contact you to determine availability for interview</td>
<td>No</td>
<td>We may not be able to employ you in certain jobs where you may be required to come to work on short notice.</td>
</tr>
<tr>
<td>Sex, Racial/Ethnic*</td>
<td>To be able to make Equal Opportunity reports as required by law and to provide affirmative action in apprenticeship</td>
<td>No</td>
<td>We will not be able to determine whether our selection processes result in unfair discrimination or to take affirmative action in our hiring.</td>
</tr>
<tr>
<td>Group, Handicapped Status**</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: Minn. Stat. 254A.02. Subd. 11 defines American Indian as: “American Indian means a person of one quarter of more Indian blood.”

**Note: “Disability/handicap” is defined as “a handicapping condition which substantially limits one of life’s major activities such as walking, caring for yourself, seeing, hearing, speaking, performing manual tasks, breathing, learning, working. Do not answer “Yes” to this question if, for example, you have a visual problem corrected by glasses.

ALL OTHER INFORMATION ON THE APPLICATION IS PUBLIC, THAT IS, IT MAY BE GIVEN TO ANYONE FOR ANY PURPOSE.
APPLICATION FOR APPRENTICESHIP TRAINING FOR THE TRADE OF:

Truck Driver (Construction)

NOTICE TO APPLICANT: The information you provide to complete this page is for affirmative action tracking purposes. See the reverse of this page for data explanations:

1. Last Name

First

Middle Initial

2. Street Address

Apt or Box #

3. City

County

State

Zip

4. Social Security Number

5. Are you 18 years of older? (circle one)

Yes

No

6. Sex

Female

Male

7. Racial/Ethnic Group

□ American Indian/Alaskan Native

□ Asian

□ Black

□ Caucasian

□ Hispanic

□ ___________________________ Ethnic Group if none of the above

8. Have you applied for this training before?

□ No

□ Yes

If yes, when?

9. Are you disable/handicapped?*

□ Yes

□ No

*Disability/handicap is defined as "a handicapping condition which substantially limits one of life's major activities such as walking, caring for yourself, seeing, hearing, speaking, performing manual tasks, breathing, learning, working." Do not answer "Yes" to this question if, for example, you have a visual problem corrected by glasses.

10. Telephone number

Area Code

11. Alternate number at which you can be reached

Area Code

12. Are you a United States Citizen or legally authorized to work in the United States?

□ Yes

□ No
## APPRENTICESHIP APPLICATION

### SECTION 1 - EDUCATION

<table>
<thead>
<tr>
<th>Name of School</th>
<th>City, State</th>
<th>Degree or Diploma</th>
<th>G.E.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td></td>
<td></td>
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<tr>
<td>Vo-tech</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>College</td>
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</table>

*Attach copies of course completion certificates or transcripts of course credits. Your application is not complete without this information.

### SECTION 2 – JOB RELATED SKILLS OBTAINED THROUGH OTHER SOURCES:

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### SECTION 3 – EMPLOYMENT HISTORY

<table>
<thead>
<tr>
<th>Organization</th>
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<th>Length of Experience</th>
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<td></td>
<td>From</td>
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<tr>
<td>Position</td>
<td>Supervisor</td>
<td>% of time</td>
</tr>
<tr>
<td>Major Activities: 1.</td>
<td></td>
<td></td>
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<tr>
<td>2.</td>
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<tr>
<td>3.</td>
<td></td>
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<td>Why Did You Leave?</td>
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EMPLOYMENT CONDITIONS

1. You should be aware that in this construction trade, you must travel to various construction projects located within numerous counties covered by this Joint Apprenticeship Committee’s jurisdiction. You must have reliable means of transportation to travel to these projects.

2. A requirement of this or any registered apprentice program is attendance of at least 144 hours per year of related training outside your normal working hours. You will be required to attend these related training classes without monetary compensation.

3. Employment in this trade may not be full time and there may be periods of unemployment due to weather, economic conditions, and other circumstances.

4. Apprentices start at a percentage of the journeyman rate and receive periodic increases. These increases are not automatic but depend on the progress made by the apprentice in on-the-job training and related training.

5. This occupation could involve the lifting of heavy objects, working in confined areas and high places.

6. When an offer of employment has been made, the applicant may be required to submit to a physical examination, which may include drug testing.

7. Also Random drug testing can occur when you are indentured in the Apprenticeship Program.

8. I understand that I will have to reimburse all of the fees for the drug testing and D.O.T physical if I do not complete the program because of my own choice.

9. I understand that my C.D.L could be rescinded if I do not complete the program. (Only if I received the C.D.L with the Teamster Apprenticeship program.)

10. I understand the Union labor agreement supercedes the State of Minnesota Apprenticeship contract. That I will be registered to with the State Of Minnesota with an Apprenticeship contract. That the apprenticeship program will enter me in.

I HAVE READ AND UNDERSTAND THESE EMPLOYMENT CONDITIONS AS REQUIRED BY THE OCCUPATION.

_________________________   __________________________
Signature                        Date

Email Address: ____________________________
ATTACH ADDITIONAL SHEETS IF NECESSARY. BE SURE TO INCLUDE ALL INFORMATION REQUESTED ABOVE.

IMPORTANT

I declare that any statement in this application or information provided is true and complete and hereby acknowledge that I have read and understand the information below.

Signature (do not print) ______________________________ Date ________________

The Committee reserves the right to verify information provided in the application.

In connection with this application for employment I authorize the APPRENTICESHIP Committee to conduct an inquiry into any job related information contained in this application, but not limited to, my records maintained by an educational institution relating to academic performance such as transcripts. Moreover, I hereby release the committee from any and all liability of whatsoever nature by requesting such information from any person.

( ) Yes ( ) Yes, but not present employer until job offered.

( ) No, (we may be unable to hire you without this information)

Name and phone number of current or immediately previous supervisor who may be contacted as an employment reference.