



# OE 3 JATC

## Application for Employment

Operating Engineers Local 3 JATC is an Equal Opportunity Employer. Race, color, religion, age, sex, disability, marital or veteran status, place of national origin, and other categories protected by law are not factors in employment, promotion, compensation, or working conditions.

**Instructions: there are 3 methods to submit your completed application, the 1st option being the most preferred:**

1. Complete application and e-mail to Tammy Castillo, Director of Apprenticeship, at tcastillo@oe3jac.org
2. Mail completed application to OE 3 JATC, 14738 Cantova Way, Sloughhouse, CA 95683
3. Fax completed application to (916) 354-1126

**NOTE: you must initial all boxes on the last page before submitting.**

■ Position applying for \_\_\_\_\_ Location \_\_\_\_\_ Date of Application \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street Address City-State-ZIP

Contact me \_\_\_\_\_  
Primary Telephone (include area code) Secondary Telephone Email

■ Do you have a valid driver's license?  Yes  No Number \_\_\_\_\_

■ Has your driver's license ever been revoked or suspended?  Yes  No *(if the above position requires it)*  
If yes, explain the circumstances:

■ Have you previously applied to or worked for O3 JATC?  Yes  No When? \_\_\_\_\_ Position \_\_\_\_\_

■ How did you hear about this position? \_\_\_\_\_

■ Are you related (including in-law) to any current employee?  Yes  No

If yes, describe relationship \_\_\_\_\_

■ Have you ever plead "guilty" or "no contest" to or been convicted of a felony?  Yes  No  
(Excluding any sealed or expunged convictions) If "yes," explain:

**NOTE:** A criminal background check will be performed for applicants being considered for employment. No applicant will be denied employment solely on the grounds of a conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) being applied for may, however, be considered.

■ Have you ever been discharged from any employment or been asked to resign?  Yes  No  
If "yes," please explain. Attach additional sheets or use the back of this page, if necessary.

**Employment History**

■ List the last ten (10) years of employment, starting with your most recent position. Attach additional sheets or use the back of this page, if necessary. This section must be completed in full even if you are attaching a resume.

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Name of Company \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Address \_\_\_\_\_

*Street Address* *City-State-ZIP*

Contact \_\_\_\_\_

*Telephone (include area code)* *Other (such as cell number or email)*

Position & duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of employment \_\_\_\_\_

Starting rate of pay \_\_\_\_\_ Ending rate of pay \_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Name of Company \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Address \_\_\_\_\_

*Street Address* *City-State-ZIP*

Contact \_\_\_\_\_

*Telephone (include area code)* *Other (such as cell number or email)*

Position & duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of employment \_\_\_\_\_

Starting rate of pay \_\_\_\_\_ Ending rate of pay \_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Additional Information required for Applicants for the Positions of  
Instructor, Field Foreman, or Coordinator**

■ Are you currently a member of an Operating Engineers Local Union?  Yes  No ■ If yes, please provide:

- Date initiated in Operating Engineers Local No. \_\_\_\_\_ on (date) \_\_\_\_\_

■ As of today, I have been in continuous good standing in Operating Engineers Local Union No. \_\_\_\_\_  
for \_\_\_\_\_ years and \_\_\_\_\_ months

■ If I am hired, I would prefer to work out of the \_\_\_\_\_ office. I understand that, if  
hired, transportation and moving expenses incidental to my first assignment, and for any subsequent transfers at my  
request, will NOT be paid by OE 3 JATC. \_\_\_\_\_ (*initials*)

■ I have been **employed** in the following classifications or work covered by Local 3 agreements:

\_\_\_\_\_  
\_\_\_\_\_

■ I have been an **employer** employing the following classification of work covered by Local 3 agreements:

\_\_\_\_\_  
\_\_\_\_\_

■ I have been a member of the following Unions (if none, so state):

\_\_\_\_\_  
\_\_\_\_\_

■ Showing Local 3 activities first, list information regarding your participation in Union activities as a job steward,  
safety committee member, bylaws committee member, grievance committee member, executive board member,  
business representative, etc.

Union	Date(s)	Activity
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**References**

■ Give the name, address, and phone number of four (4) personal references as to your character and ability,  
excluding relatives and employers.

Name	Address	Telephone
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**General Information about Employment Desired**

■ Are you available to work Saturdays?  Yes  No    ■ Are you available to work Sundays?  Yes  No

■ Are you available to work holidays?  Yes  No    ■ Are you available to work nights?  Yes  No

■ Are you available to be on-call?  Yes  No    ■ Are you available to work overtime?  Yes  No

■ If hired, on what date could you start work? \_\_\_\_\_

■ Are you able to travel on JATC business?  Yes  No    ■ % time willing to travel? \_\_\_\_\_

■ Describe any limitations to travel (e.g., number of days or specific days).  
 \_\_\_\_\_  
 \_\_\_\_\_

■ Do you need any accommodations for the performance of your duties?  Yes  No    ■ If yes, please describe  
 \_\_\_\_\_  
 \_\_\_\_\_

**Education and Training (include on-the-job training)**

Type of Education	Name of Institution	Course of Study	Completed?
High School or GED			<input type="checkbox"/> Yes <input type="checkbox"/> No
Community College			Date: _____
Trade School			Date: _____
College / University			Date: _____
Seminars / Other			Date: _____
Military Experience			Date: _____
			Date: _____
			Date: _____
			Date: _____

■ PRINT Name \_\_\_\_\_

Please read and INITIAL each paragraph below. If there is any part of this page you do not understand, please ask about it before signing.

\_\_\_\_\_ I hereby authorize OE 3 JATC to investigate my references, work records, education, and other matters related to my suitability for employment. I also authorize my current and former employers to disclose to OE 3 JATC any and all letter, reports, and other information pertaining to my employment with them without giving me prior notice of such disclosure. In addition, I hereby release OE 3 JATC, my current and former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_ I understand that if offered employment, the offer may be contingent on my passing a pre-employment drug screen and a pre-employment physical. By signing this application, I voluntarily agree to submit to a pre-employment drug screen and pre-employment physical upon request. I understand that failure to pass the drug screen and/or physical will result in withdrawal of the employment offer.

\_\_\_\_\_ If hired, I also agree to submit to drug testing as a condition of employment. I agree that OE 3 JATC may conduct drug screening at its sole discretion with or without notice. I also understand that refusal to submit to a drug screening will be considered a voluntary resignation of employment.

\_\_\_\_\_ I understand that nothing contained in this application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between me and OE 3 JATC. In addition, I understand and agree that, if I am employed, my employment relationship with OE 3 JATC is strictly voluntary and at our mutual will. I understand that, if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself or OE 3 JATC , and that no promises or representations contrary to the foregoing are binding on OE 3 JATC unless made in writing and signed jointly by the Director and myself.

\_\_\_\_\_ I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States by my third day of employment.

\_\_\_\_\_ If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance. I also understand that any offer of employment is contingent on my ability to be covered by OE 3 JATC auto insurance, if re-quired by my position.

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission of misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ **I certify that I have read and understand this entire page and agree to the terms and conditions outlined in this document.**

**NOTE: you must initial all boxes on this page before submitting.**

\_\_\_\_\_ *PRINT Name*

\_\_\_\_\_ *Date*