

OE3 JATC

Application for Employment

Operating Engineers Local 3 JATC is an Equal Opportunity Employer. Race, color, religion, age, sex, dis-ability, 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:

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

Has your driver's license ever been revoked or suspended?	lumber
Contact me	Telephone Email Tumber (if the above position requires it) Position No When? Position
Contact me	Telephone Email Tumber (if the above position requires it) Position No When? Position
Primary Telephone (include area code) Secondary To Do you have a valid driver's license?	lumber
Have you previously applied to or worked for O3 Yes How did you hear about this position? Are you related (including in-law) to any current employee?	(if the above position requires it) If yes, explain the circumstances No When? Position
■ Have you previously applied to or worked for O3	No When? Position
How did you hear about this position? I Are you related (including in-law) to any current employee?	
ATC? How did you hear about this position? Are you related (including in-law) to any current employee?	
Are you related (including in-law) to any current employee? yes, describe relationship	∕es □ No
yes, describe relationship	∕es □ No
Have you ever plead "guilty" or "no contest" to or been convicted excluding any sealed or expunged convictions) If "yes," explain:	of a felony?
OTE: A criminal background check will be performed for applicants being comployment solely on the grounds of a conviction of a criminal offense. The representation of a criminal offense in the position (solution) is a criminal offense to the position (solution).	nature of the offense, the date of the offense, the
Have you ever been discharged from any employment or been as "yes," please explain. Attach additional sheets or use the back of t	

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Employment History

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the back of this	s page, if necessary. This section mus	ng with your most recent position. Attach additional sheets or use it be completed in full even if you are attaching a resume.		
Name of Comp	any			
Name of Super	visor			
Address				
	Street Address	City-State-ZIP		
	Telephone (include area code)	Other (such as cell number or email)		
Position & dutie	es:			
Dates of emplo	pyment			
Starting rate of	f pay	Ending rate of pay		
Reason for leav	ving			
Name of Comp	any			
Address				
	Street Address	City-State-ZIP		
Contact	Telephone (include area code)	Other (such as cell number or email)		
Position & dutie	es:			
Dates of emplo	pyment			
Starting rate of pay		Ending rate of pay		
Reason for leav	ving			

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

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■ Are you currently a member of an	Operating Engineers Local Union?	☐ Yes ☐ No ■ If yes, please provide:
- Date initiated in Operating Engi	neers Local Noon (date) _	
As of today, I have been in continution years and		ineers Local Union No
	enses incidental to my first assignme	office. I understand that, if ent, and for any subsequent transfers at my
■ I have been <i>employed</i> in the follo	wing classifications or work covered	by Local 3 agreements:
■ I have been an employer employi	ng the following classification of wor	k covered by Local 3 agreements:
■ I have been a member of the follow	ving Unions (if none, so state):	
Showing Local 3 activities first, list safety committee member, bylaws combusiness representative, etc.	information regarding your participa mmittee member, grievance commit	ation in Union activities as a job steward, tee member, executive board member,
Union	Date(s)	Activity
	References	
■ Give the name, address, and phone excluding relatives and employers.		ences as to your character and ability,
Name	Address	Telephone

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 star	■ 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 (<i>e.g.</i> , 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			☐ Yes ☐ No
Community College			Date:
Trade School			Date:
College / University			Date:
Seminars / Other			Date:
Military Experience			Date:
			Date:
			Date:
			Date:

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	ad and INITIAL each paragraph below. If there is any part of thi before signing.	s page you do not understand, please ask
	I hereby authorize OE 3 JATC to investigate my reference matters related to my suitability for employment. I employers to disclose to OE 3 JATC any and all letter, reporting employment with them without giving me prior not hereby release OE 3 JATC, my current and former employ partnerships, and associations from any and all claims, any way related to such investigation or disclosure.	also authorize my current and forme orts, and other information pertain-ing to otice of such disclosure. In addition, vers, and all other persons, corporations
	I understand that if offered employment, the offer may be ment drug screen and a pre-employment physical. By signi submit to a pre-employment drug screen and pre-employn that failure to pass the drug screen and/or physical will result	ing this application, I voluntarily agree t nent physical upon request. I understan
	If hired, I also agree to submit to drug testing as a condition JATC may conduct drug screening at its sole discretion with refusal to submit to a drug screening will be considered a version of the considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to drug testing as a condition of the considered as a submit to drug testing as a condition of the considered as a submit to drug testing as a condition of the considered as a submit to drug testing as a condition of the considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit to a drug screening will be considered as a submit	or without notice. I also understand tha
	I understand that nothing contained in this application or comay be granted is intended to create an employment cont OE 3 JATC. In addition, I understand and agree that relationship with OE 3 JATC is strictly voluntary and a employed, my employment is for no definite period and rewithout prior notice, with or without case or reason, at the and that no promises or representations con-trary to the formade in writing and signed jointly by the Director and myse	ract, implied or explicit, between me an t, if I am employed, my employmer t our mutual will. I understand that, may be terminated at any time, with one option of either myself or OE 3 JATC regoing are binding on OE 3 JATC unles
	_ I understand that if offered employment, I will, as a conditi proof of my identity and legal right to work in the United Sta	
	If the position applied for requires driving in the course of we possess a current and valid driver's license and understand my official driving record and proof of insurance. I also us is contingent on my ability to be covered by OE 3 JATC auto	that I will be required to provide a copy ounderstand that any offer of employmen
	I hereby certify that I have not knowingly withheld any inforchances for employment and that the answers given by m knowledge. I further certify that I, the undersigned applicantion. I understand that any omission of misstatement on this secure employment shall be grounds for rejection of this appendiction, regardless of the time elapsed before discovery.	e are true and correct to the best of m t, have personally completed this applica s application or on any documents used t
	I certify that I have read and understand this enti- conditions outlined in this document.	re page and agree to the terms and
OTE: you i	must initial all boxes on this page before submitting.	
	PRINT Name	 Date