



# APPLICATION FOR REFERRAL HALL CASUAL WORK

**PLEASE PRINT**

**DATE** \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Birthday \_\_\_\_\_ Home Phone # (include area code) \_\_\_\_\_ Pager/Cell # \_\_\_\_\_

Are you a Teamster Member? YES \_\_\_ NO \_\_\_ Current Employer \_\_\_\_\_ Laid Off? YES \_\_\_ NO \_\_\_

Member of another Union? YES \_\_\_ NO \_\_\_ If yes, which Union? \_\_\_\_\_ Local Union No. \_\_\_\_\_

**WHAT KIND OF JOB(S) ARE YOU APPLYING FOR? (CHECK ALL YOU ARE APPLYING FOR)**

Construction \_\_\_ Convention \_\_\_ Movie/Video \_\_\_ Pipeline \_\_\_ Carhaul Driveout \_\_\_

List experience or submit a resume: \_\_\_\_\_

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

**APPLYING FOR A DRIVERS POSITION, PLEASE ANSWER THE FOLLOWING QUESTIONS**

Do you possess a commercial drivers license (CDL) YES \_\_\_ NO \_\_\_ Class \_\_\_\_\_ Stringing Driver Y/N \_\_\_\_\_

State \_\_\_\_\_ Operator Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Endorsements: Air Brake Test-All Drivers \_\_\_\_\_ Combination Vehicles Test-All Drivers \_\_\_\_\_

The Hazardous Material Test-All Drivers \_\_\_\_\_ Doubles/Triples Test-All Drivers \_\_\_\_\_ Tank Test \_\_\_\_\_

Passenger Endorsements \_\_\_ Additional Endorsements \_\_\_\_\_ Forklift Certified Y/N \_\_\_\_\_

Has your drivers license been suspended or revoked in the last 5 years? YES \_\_\_ NO \_\_\_ If YES, explain:

Most recent moving violation: Date \_\_\_\_\_ Violation \_\_\_\_\_ State of incident \_\_\_\_\_

Date available for work \_\_\_\_\_

I understand that by signing below, any falsification of this application is grounds for removal of my name from the Referral Procedure. I acknowledge receipt of the referral Hall Rules.

**PRINT NAME** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_