REQUEST FOR APPRENTICE MANPOWER

NOTE: Calls are dispatched between 8:00 AM and 10:00 AM.
Any request received after 9:45 AM will be filled the next business day.
REQUESTS MUST BE SUBMITTED BY FAX TO THE MINNEAPOLIS ELECTRICAL JATC AT 763-497-0076.

DATE: ___________________________ TIME: ___________________________

EMPLOYER: ______________________ CONTACT PERSON(S): ______________________

# OF EMPLOYEES REQUESTED: ____________

CLASSIFICATION:
** PLEASE FAX 1 SHEET PER CLASSIFICATION REQUESTED**

COMMERCIAL APPRENTICE: ____________

RESIDENTIAL APPRENTICE: ____________

12 COUNTY APPRENTICE: ____________

12 COUNTY PAYSCALE: HIGH ___ LOW ___

JOB LOCATION:

NORTH: ________ EAST: ________ SHORT CALL: ________________

SOUTH: ________ WEST: ________ INDEFINITE CALL: ________________

DOWNTOWN: ________________

START DATE: ________________ START TIME: ________________ REPORT TO: ______________________

(FOREMAN - JOURNEYMAN)

PLACE TO REPORT (JOB OR SHOP):

ADDRESS OF JOB SITE:

SPECIAL DIRECTIONS TO JOB SITE:

SIGNATURE OF EMPLOYER: ____________________________

ADDRESS OF EMPLOYER: ____________________________

(PLEASE MAKE NOTATION OF ANY CHANGE OF COMPANY ADDRESS OR PHONE)

PHONE OF EMPLOYER: ____________________ FAX OF EMPLOYER: ____________________

JOB SITE PHONE: ____________________

**PLEASE MAKE COPIES OF THIS FORM FOR FUTURE USE**

REVISED - tf -01/12/10 opeiu12, afi-clo