

Apprenticeship Application Form

Millwright Union Local 1916
300 Fennell Avenue East
Hamilton, ON L9A 1T2
905-385-2462

PLEASE PRINT CLEARLY

COMPLETE ALL SECTIONS

Name _____
Surname First Middle

Address _____
Number Street Apartment

_____ City Province Postal Code

Phone
Number () _____ () _____ () _____
Home Business Cell

Email _____

Driver's Licence # _____

Social Insurance # _____

In case of accident please notify the following:

Name _____

Relationship _____

Phone () _____

EMPLOYMENT

Employer _____ () _____
Name of Present or Last Telephone

Address _____
Number Street City Province

Dates _____
From To

Job Description _____

Reason for Leaving _____

Employer _____ () _____
Name of Previous Telephone

Address _____
Number Street City Province

Dates _____
From To

Job Description _____

Reason for Leaving _____

Employer _____ () _____
Name of Previous Telephone

Address _____
Number Street City Province

Dates _____
From To

Job Description _____

Reason for Leaving _____

May we contact your present employer? Yes _____ No _____

Previous Employer(s)? Yes _____ No _____

EDUCATION

Secondary _____
Name School

Dates _____
From To

Diploma _____
Diploma, Degree, or Certificate Granted

Courses Studied _____
Program

Community College _____
Name of School

Dates _____
From To

Diploma _____
Diploma, Degree, or Certificate Granted

Courses Studied _____
Program

University _____
Name of School

Dates _____
From To

Diploma _____
Diploma, Degree, or Certificate Granted

Courses Studied _____
Program

Other _____
Name of School

Dates _____
From To

Diploma _____
Diploma, Degree, or Certificate Granted

Courses Studied _____
Program

How did you hear about Millwright Union Local 1916? _____

Hobbies / Activities _____

Please check any valid training certificates that you may have:

First Aid	_____	CPR	_____	Fall Arrest	_____
WHIMIS	_____	Forklift	_____	Propane	_____
Welding	_____	Rigging	_____	Confined Space	_____

Power Elevated Work Platforms _____

Other _____ Specify _____

Before this application can be considered, you must attach an official transcript of your high school records.

I hereby declare the above information to be true and accurate.

Signature

Date

For Office Use Only