

**INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL 2330
APPRENTICE APPLICATION**

**1082 THORBURN RD TEL: 709-895-3764
PORTUGAL COVE/ST. PHILLIPS FAX: 709-895-3790
NEWFOUNDLAND A1M 1V8**

APPLICATION MUST BE FULLY COMPLETED & RESUME ATTACHED TO BE CONSIDERED FOR MEMBERSHIP

Date: _____

Name: _____

Date of Birth: _____

Address: _____

SIN: _____

City: _____

Province: _____

Postal Code: _____

Phone #: _____

Have you ever been a member of the IBEW?

Yes _____ No _____

Travel Card: _____

If so, where _____

Where did you receive your pre employment training: _____

Any other courses you may have taken: _____

Please Attach Proof of Pre Employment and or Apprenticeship Marks.

Year of Apprenticeship: 1st. _____ 2nd. _____ 3rd. _____ 4th. _____

IMP: Are you presently employed? _____ If so, where _____

List your former employers: _____

Reason why you want to become part of the IBEW _____

If you were an IBEW member, please state reason for leaving: _____

If called for an interview, are there days that may not be available? _____

Must be completed fully to be considered for acceptance, attach a resume.

Received:

Signature: _____