



UNITED ASSOCIATION

of Journeymen and Apprentices of the
Plumbing and Pipe Fitting Industry of
the United States and Canada

William P. Hite
General President
Patrick R. Perno
General Secretary-Treasurer
Stephen F. Kelly
Assistant General President

UA Local Union 345

Landscape/Irrigation, Sewer & Storm
Underground Industrial Piping Industry

MEMBERSHIP APPLICATION

UA Local Union 345 is an Equal Opportunity Labor Union committed to excellence through diversity. Offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

PLEASE TYPE OR PRINT. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.")

APPLICANT INFORMATION					
Re-Initiation:		Initiation Fee:			
Classification:	<input type="checkbox"/> Journeyman	<input type="checkbox"/> Apprentice		<input type="checkbox"/> Tradesman	
Name:					
Date of Birth:		Social Security #:		Email:	
Home Phone:		Cell:			
Current Address:					
Present Employer:		Start Date:			
Have you ever been a Member of the United Association?	<input type="checkbox"/> Yes <input type="checkbox"/> No			If Yes, which Local No.:	
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No			If No, what is your current age:	
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you have Dependable Transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Marital Status:	<input type="checkbox"/> Single	<input type="checkbox"/> Married		<input type="checkbox"/> Divorced	
THE FEDERAL GOVERNMENT REQUEST THIS INFORMATION					
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female			
RACE					
<input type="checkbox"/> African American	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Mexican American and other <input type="checkbox"/> Other
RESIDENCY					
<input type="checkbox"/>	A citizen of the United States?				
<input type="checkbox"/>	A noncitizen national of the United States				
<input type="checkbox"/>	A lawful permanent resident (Alien #)				
<input type="checkbox"/>	An alien authorized to work until (Alien # or Admission #) _____ until (expiration date) _____				
EDUCATION					
Name of School	City/State	Did you graduate?	if yes, date of graduation	Degree Received	Major
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
MILITARY SERVICE					
<input type="checkbox"/> Yes (please specify)					<input type="checkbox"/> No

EXPERIENCE/SKILLS

(Please list technical skills, if you have any certifications; please submit with pre-application)

Questions: (Please check all that apply)

PRINCIPLES	
Clean Trenches	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lateral Lines	<input type="checkbox"/> Yes <input type="checkbox"/> No
Main Lines	<input type="checkbox"/> Yes <input type="checkbox"/> No
Solvent Weld.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Solder Weld	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gasket / Ring tight	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gasket / Flange	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pipe Restrains	<input type="checkbox"/> Yes <input type="checkbox"/> No
Threaded/Mill	<input type="checkbox"/> Yes <input type="checkbox"/> No
Compression	<input type="checkbox"/> Yes <input type="checkbox"/> No
Electro Fusion	<input type="checkbox"/> Yes <input type="checkbox"/> No

PIPE	
P.V.C	<input type="checkbox"/> Yes <input type="checkbox"/> No
N.D.S	<input type="checkbox"/> Yes <input type="checkbox"/> No
A.B.S	<input type="checkbox"/> Yes <input type="checkbox"/> No
Perforated	<input type="checkbox"/> Yes <input type="checkbox"/> No
Corrugated	<input type="checkbox"/> Yes <input type="checkbox"/> No
Poly	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sched. 40/80	<input type="checkbox"/> Yes <input type="checkbox"/> No
Class 200/315	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cement Lined	<input type="checkbox"/> Yes <input type="checkbox"/> No

FITTING	
PVC, NDS, ABS	<input type="checkbox"/> Yes <input type="checkbox"/> No
90°, 45°, 120°, Tees	<input type="checkbox"/> Yes <input type="checkbox"/> No
SxSxS or TxTxT	<input type="checkbox"/> Yes <input type="checkbox"/> No

WIRE	
Single Strand	<input type="checkbox"/> Yes <input type="checkbox"/> No
Multi Strand	<input type="checkbox"/> Yes <input type="checkbox"/> No
Direct Burial	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fiber Optics	<input type="checkbox"/> Yes <input type="checkbox"/> No
Communication	<input type="checkbox"/> Yes <input type="checkbox"/> No
Conduit	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gage	<input type="checkbox"/> Yes <input type="checkbox"/> No

IRRIGATION SYSTEMS	
Overhead Spray	<input type="checkbox"/> Yes <input type="checkbox"/> No
Impacts	<input type="checkbox"/> Yes <input type="checkbox"/> No
Rotors	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bubblers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Drips	<input type="checkbox"/> Yes <input type="checkbox"/> No
Microjet	<input type="checkbox"/> Yes <input type="checkbox"/> No
Triangulated	<input type="checkbox"/> Yes <input type="checkbox"/> No
Square	<input type="checkbox"/> Yes <input type="checkbox"/> No

DETAILS	
Legend	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specs	<input type="checkbox"/> Yes <input type="checkbox"/> No
Codes	<input type="checkbox"/> Yes <input type="checkbox"/> No
Scale	<input type="checkbox"/> Yes <input type="checkbox"/> No
Take Offs	<input type="checkbox"/> Yes <input type="checkbox"/> No
Plot Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No
Submittals	<input type="checkbox"/> Yes <input type="checkbox"/> No

HOW DID YOU LEARN ABOUT UA LOCAL UNION 345

(please check all that apply)

<input type="checkbox"/> Company		<input type="checkbox"/> Radio: (which station)	
<input type="checkbox"/> Representative/ Organizer		<input type="checkbox"/> Flyer/ Job Bulletin:	
<input type="checkbox"/> Referral by Friend/Family		<input type="checkbox"/> Race Track	
<input type="checkbox"/> DC 16 (webpage)		<input type="checkbox"/> School	
<input type="checkbox"/> EDD		<input type="checkbox"/> Dept. of Labor	

SIGNATURE

(California Labor Code, CH4, Division 3, Section 151) Any misstatements or omissions of material facts in this application may be cause for dismissal. I certify the above information is correct to the best of my knowledge.

I, the undersigned, do hereby designate and authorized United Association Local Union 345 AFL-CIO, to act as my collective bargaining representative with my present and future employers.

Signature of applicant:	Date:
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(OFFICE USE ONLY)

ORGANIZED BY:

<input type="checkbox"/> Company	<input type="checkbox"/> Vincent Diaz, Business Manager	<input type="checkbox"/> Ricardo Perez, Business Rep./Org.
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INTERVIEWED BY:

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Oral interview subjects considered and ratings:

Attitude	20%	_____ %
Stability	20%	_____ %
Motivation	20%	_____ %
Dependability	20%	_____ %
Oral Response	20%	_____ %

NOTES:
