



LOCAL 1669

CARPENTERS UNION

Section 1 – Application Information		
Name:		
Current address:		
City:	Country:	Postal Code:
Phone1:	Phone2:	Email:
Section 2 – Application for Apprenticeship Program		
Please select type of Apprenticeship you are interested in: _____		
	___ General Carpentry 403 A	
	___ Drywall, Acoustics and Lathing Applicator 451 A	
	___ Floor Covering Installer 448 A	
Highest level of school completed: ___ High School Diploma ___ College Diploma/Certificate ___ University		
Section 3 – Employment History		
Please check if you have Journeyperson Status (C of Q) in: _____		
	___ General Carpentry 403A	
	___ Drywall, Acoustics and Lathing Applicator 451A	
	___ Flooring Covering Installer 448 A	
	___ Other _____	
Do you have Welding Certifications, please state? _____		
Have you previously served an apprenticeship? ___ YES ___ NO		
Apprenticeship Classification: _____		
Do you have WHMIS training? ___ YES ___ NO, Date completed: _____		Please provide documentation.
Do you have Confined Space training? ___ YES ___ NO, Date completed: _____		Please provide documentation.
Do you have "Working at Heights" training? ___ YES ___ NO, Date completed: _____		Please provide documentation.
Other industry related trade certificates, please list: 		
Other related industry skills: 		
How were you referred to our Union: ___ Contractor, please provide name of Contractor? _____		
___ Member, please provide name of member: _____		
___ Other, please provide name or contact: _____		
Have applied to become a member of Local 1669 before: ___ YES ___ NO		
Are you presently employed? ___ YES ___ NO Name of Employer: _____		
Can we contact your employer? ___ YES ___ NO		
If yes, please provide contact information: _____		
Do you have a Driver's License? ___ YES ___ NO		
Is transportation available to get to work on time every day: ___ YES ___ NO		
Have you served in the Canadian Military? ___ YES ___ NO		
Section - 4 Check List of Required Documents		
ATTENTION: Copies of the following MUST be attached to your application at the time of applying.		
___ Cover letter and resume		
___ Copy of high school transcript and apprenticeship contract if registered(only if you are applying for an apprenticeship)		
___ Copy of your Certificate of Qualification/Red Seal Certificate (only if applying as a journeyperson)		
___ Copy of WHMIS and Working at Heights training certificates (if not valid contact coordinator to set up training)		
___ Proof of additional related training and certificates or as outlined in resume		
___ Copy or Certification of Completion for "Worker Health and Safety Awareness in 4 Steps" program		

References		
Employer: Contact Person:	Address:	Phone:
Employer: Contact Person:	Address:	Phone:
Employer: Contact Person:	Address:	Phone:
I authorize the Carpenters Local 1669 representatives to contact my references: ___ YES ___ NO		
Authorization Signature: _____ Date: _____		
<i>All applicants are not guaranteed acceptance into the Carpenters Local 1669. Only successful applicants will be contacted by the Carpenters Local 1669 representatives. Upon successful acceptance in the Carpenters Local 1669, applicant will have to serve a probationary period.</i>		
<i>I hereby declare the information provided and any additional attached documents to be true and correct to the best of my knowledge. I also acknowledge and understand that any false or willful dishonesty my result in refusal of the application or removal from the Carpenters Local 1669.</i>		
Applicant Signature:		Date:
Carpenters Local 1669 Receiving Staff Member:		Date:

The Carpenters Local 1669 will hold onto your application package for 6 months. If you have not been contacted within the six-month period, we kindly ask individuals to resubmit their application package.