

Northeast Regional Council of Carpenters
CARPENTER WORK/SKILL QUESTIONNAIRE

Send to: NRCC, Raritan Plaza II, 2nd Floor, 91 Fieldcrest Avenue, Edison, NJ 08837

Fax: 732-417-0301

PLEASE PRINT LEGIBLY! Mark X below.

I am a:

Journeyman carpenter

Apprentice carpenter

Year _____

Name _____ Date _____

UBC ID# _____ UBC Local # _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____ Email _____

Primary Phone # _____ Alternate Phone # _____

Ethnicity (Optional):

Asian Hispanic or Latino White Black or African American Other

YOU HAVE EXPERIENCE TO ACCEPT WORK IN THE FOLLOWING:

(Mark with an X below.)

Ceilings Concrete Doors & Hardware

Drywall Drywall Finishing Metal Framing

Fixtures-Furniture Wood Flooring (Nail,Glue) Vinyl Tile

Trim & Millwork Wood Framing Welding

Carpet Flooring Lather Foreman

Cabinetry Bridges/Highway Siding/Roofing

Nuclear Facilities Will work with Heights Scaffolding

Piledriving Heavy Highway Computer Floor

Store Front Computer Floor Solid Surface

Drug-Tested Jobs

MARK THE COUNTIES WHERE YOU ARE WILLING TO WORK.

(Mark with an X below)

New Jersey

Atlantic

Camden

Essex

Hunterdon

Bergen

Cape May

Gloucester

Mercer

Burlington

Cumberland

Hudson

Middlesex

- Monmouth
- Passaic
- Sussex

- Morris
- Salem
- Union

- Ocean
- Somerset
- Warren

New York

- Albany
- Cattaraugus
- Chemung
- Columbia
- Dutchess
- Franklin
- Greene
- Jefferson
- Madison
- Nassau
- Onondaga
- Orleans
- Rensselaer
- Saratoga
- Schuyler
- Suffolk
- Tompkins
- Washington
- Wyoming

- Allegany
- Cayuga
- Chenango
- Cortland
- Erie
- Fulton
- Hamilton
- Lewis
- Monroe
- Niagara
- Ontario
- Otsego
- Rockland
- Schenectady
- Seneca
- Sullivan
- Ulster
- Wayne
- Yates

- Broome
- Chautauqua
- Clinton
- Delaware
- Essex
- Genesee
- Herkimer
- Livingston
- Montgomery
- Oneida
- Orange
- Putnam
- St. Lawrence
- Schoharie
- Steuben
- Tioga
- Warren
- Westchester
- Oswego

YOU ARE TRAINED / CERTIFIED IN THE FOLLOWING:
(Mark with an X below.)

- | | | |
|--|--|---|
| <input type="checkbox"/> Boom Truck Cert | <input type="checkbox"/> Certified Welder | <input type="checkbox"/> Cleanroom Class |
| <input type="checkbox"/> Door Hardware | <input type="checkbox"/> Firestop Class | <input type="checkbox"/> First Aid / CPR Cert |
| <input type="checkbox"/> Foreman A Class | <input type="checkbox"/> Forklift Industrial | <input type="checkbox"/> Forklift Rough Terrain |
| <input type="checkbox"/> HAZMAT | <input type="checkbox"/> Light Gauge Weld | <input type="checkbox"/> OSHA 10 |
| <input type="checkbox"/> OSHA 30 | <input type="checkbox"/> Certified Locksmith | <input type="checkbox"/> Powder Actuated Tool |
| <input type="checkbox"/> Rebar Stick Weld | <input type="checkbox"/> Rebar Wire Weld | <input type="checkbox"/> Rigging |
| <input type="checkbox"/> ROV Operator | <input type="checkbox"/> Scaffold Erector | <input type="checkbox"/> Scaffold User |
| <input type="checkbox"/> Solid Surface Installer Class | <input type="checkbox"/> Certified Steward | <input type="checkbox"/> Stick Cert Weld |
| <input type="checkbox"/> STP Cert | <input type="checkbox"/> TIG Cert Weld | <input type="checkbox"/> TWIC Card |
| <input type="checkbox"/> WABO Cert | <input type="checkbox"/> Wire Cert Weld | <input type="checkbox"/> INSTALL Cert |
| <input type="checkbox"/> Asbestos Abatement | <input type="checkbox"/> Confined Space | <input type="checkbox"/> MSDS |
| <input type="checkbox"/> Fall Protection | <input type="checkbox"/> Laser Level | <input type="checkbox"/> Blueprint Reading |
| <input type="checkbox"/> Ceiling Certification | <input type="checkbox"/> Hazardous Waste 40 Hour | <input type="checkbox"/> Nuclear Plant Access |

COMMENTS:

I _____ (**Print Name**), assign to the Northeast Regional Council of Carpenters, from my earnings, a sum equal to the Union's membership dues, assessments, and initiation fee (the Union will notify my Employer of the current amount). I authorize and direct my Employer to deduct such sum and remit the money to the Union monthly. This assignment is irrevocable for one (1) year from this date or until the termination of the Labor Agreement, whichever occurs first. This assignment shall be renewed automatically, for successive 12 month periods, unless the Union and my employer receive my written notice of termination of this assignment not more than twenty (20) days and not less than ten (10) days prior to renewal of the assignment. This authorization is effective regardless of my status as a member, non-member, or "financial core" payer and applies regardless of any future resignation of membership on my part.

I hereby authorize the NORTHEAST REGIONAL COUNCIL OF CARPENTERS to act as my collective bargaining agent in dealing with my employer in regard to wages, hours, and other conditions of employment. All previous authorizations made by me are revoked.

Signature _____ Date _____