

Warehouse Dispatch information / out-of-work-sign-up

PLEASE PRINT	Today's Date	Time:	
NAME:		SS#	
ADDRESS:			
CITY	ZIP E	E-Mail Address	
Phone number(s):	Home	Cell	
Check $(\sqrt{\ })$ the box	(s) with <u>your</u> WORK EX	PERIENCE:	
☐ FORKLIFT [ORDER SELECTION	☐ LUMBER/ PLUMBING	YARD
☐ GENERAL WA	REHOUSE SHIPPI	NG & RECEIVING DA	IRY
☐ MANUFACTUI	RE / FACTORY WORK	☐ CONSTRUCTION	
⇒ SPECIAL LIC	ENSES & TYPE:		
⇒ CERTIFICATI	ES or SCHOOLING TY	PE:	
Is your current Cal	ifornia Drivers License V	alid? ☐ Yes or ☐ No	
The last place I w	vorked was @:		
I wish to work	in the:	y	ther side
1.			
Office use On	ly		↓
Circle which list- Monthly U	A / B / C nion Dues / Out-of-work (mo	Fee's Painthly fee) / Hiring hall fee	d \$
4			
5			