



# Springfield Contractors Association Construction Employment Service REGISTRY FORM



(Not an application for employment)

Today's Date \_\_\_\_\_

**Black Ink Only**

Referred By \_\_\_\_\_

**REGISTRATION WILL NOT BE PROCESSED WITHOUT ALL TELEPHONE NUMBERS**

<b>THIS BOX MUST BE COMPLETELY FILLED IN TO BE REGISTERED</b>			
Name _____		E-mail Address _____	
Address _____		City _____	State _____ Zip _____
Phone _____		Cell Phone _____	SSN# _____
Do you have a valid CDL? Yes _____ No _____ Type A _____ B _____ C _____			
Education & date graduated: High School _____ College _____ Other _____			
Hourly wage expected: _____			
Type of work you are looking for: 1st Choice _____			
2nd Choice _____			
3rd Choice _____			

**TRAINING**

Have you had formal (classroom) craft training? \_\_\_\_\_ How much? \_\_\_\_\_

Have you had on-the-job training? \_\_\_\_\_ How much? \_\_\_\_\_

**LICENSES/CERTIFICATIONS**

Drivers license number \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_ Type \_\_\_\_\_

DOT certified? \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_

First Aid-Red Cross: Standard \_\_\_\_\_ Advanced \_\_\_\_\_ Other \_\_\_\_\_ Renewal \_\_\_\_\_

Have you ever registered with this office before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you ever secured employment through this office? \_\_\_\_\_

If yes, when and with what company? \_\_\_\_\_

Area willing to work: Local \_\_\_\_\_ State \_\_\_\_\_ Anywhere \_\_\_\_\_

Able to work: Part Time \_\_\_\_\_ Full Time \_\_\_\_\_ Temporary \_\_\_\_\_

Are you over 18 years old? \_\_\_\_\_ If not, can you furnish a work permit if required? \_\_\_\_\_

Do you have reliable transportation? \_\_\_\_\_ Can you travel if the job requires it? \_\_\_\_\_

Are you now employed? \_\_\_\_\_ May we contact your present employer? \_\_\_\_\_

Are you on layoff or subject to recall? \_\_\_\_\_ On what date are you available for work? \_\_\_\_\_

Can you provide proof of citizenship upon employment? \_\_\_\_\_

Have you been convicted of a felony in the last 7 years? \_\_\_\_\_

If yes, please explain fully \_\_\_\_\_

**EMPLOYMENT HISTORY**

Initial Here \_\_\_\_\_

Start with your present or last job. Include military service assignments or volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin. Failure to complete all information requested can hinder the processing of this registration. NOTE: Be certain your previous employment history reflects the construction related skills you have acquired and plan to mark on the next page.

(1) EMPLOYER _____ _____ ADDRESS _____ PHONE _____ JOB TITLE _____ SUPERVISOR _____ REASON FOR LEAVING _____ _____	DATES EMPLOYED FROM TO _____ _____ HOURLY RATE/SALARY STARTING FINISH _____ _____	WORK PERFORMED _____ _____ _____ _____ _____ _____ _____ _____
(2) EMPLOYER _____ _____ ADDRESS _____ PHONE _____ JOB TITLE _____ SUPERVISOR _____ REASON FOR LEAVING _____ _____	DATES EMPLOYED FROM TO _____ _____ HOURLY RATE/SALARY STARTING FINISH _____ _____	WORK PERFORMED _____ _____ _____ _____ _____ _____ _____ _____
(3) EMPLOYER _____ _____ ADDRESS _____ PHONE _____ JOB TITLE _____ SUPERVISOR _____ REASON FOR LEAVING _____ _____	DATES EMPLOYED FROM TO _____ _____ HOURLY RATE/SALARY STARTING FINISH _____ _____	WORK PERFORMED _____ _____ _____ _____ _____ _____ _____ _____
(4) EMPLOYER _____ _____ ADDRESS _____ PHONE _____ JOB TITLE _____ SUPERVISOR _____ REASON FOR LEAVING _____ _____	DATES EMPLOYED FROM TO _____ _____ HOURLY RATE/SALARY STARTING FINISH _____ _____	WORK PERFORMED _____ _____ _____ _____ _____ _____ _____ _____

**REFERENCES:**

Initial Here \_\_\_\_\_

List below the names of three persons not related to you whom you have known for at least one year.

<u>Name</u>	<u>Business</u>	<u>Address/Phone</u>	<u>Years Acquainted</u>
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

**SKILLS SHEET:**

Please indicate your major trades with an "M" (those being your desired employment). Check (X) any additional trades you are experienced in with the number of years experience in each. These skills acquired must be able to be verified with previous employers.

Carpenter (General) _____ ____ Years _____	Pipe Fitter _____ ____ Years _____
Carpenter (Form Work) _____ Metal _____ Wood _____ ____ Years _____	Mason _____ ____ Years _____
Carpenter (Finish) _____ ____ Years _____	Carpet Layer _____ ____ Years _____
Carpenter (Framing) _____ Metal _____ Wood _____ ____ Years _____	Millwright _____ ____ Years _____
Drywall _____ Finish _____ Taping _____ ____ Years _____	Roofer (Type) _____ ____ Years _____
Ironworker _____ Structural _____ Re-Bar _____ ____ Years _____	Glazier _____ ____ Years _____
Laborer _____ Unskilled _____ Skilled _____ ____ Years _____	Welder (Certified) _____ Yes _____ No _____ ____ Years _____
Landscaper _____ ____ Years _____	Insulator _____ ____ Years _____
Cement _____ Form _____ Finish _____ ____ Years _____	Sheet Metal _____ HVAC _____ PEMB _____ ____ Years _____
Electrician _____ ____ Years _____	Plumber _____ ____ Years _____
Painter _____ ____ Years _____	Air-Conditioning Mechanic _____ ____ Years _____
Equipment Operator (Crane Size) _____ ____ Years _____	Supervisory Experience _____ Lead _____ Foreman _____ ____ Years _____
Equipment Operator _____ ____ Years _____	Drafting _____ Blueprint _____ Layout _____ ____ Years _____
Equipment Mechanic (Type) _____ ____ Years _____	Drilling & Blasting _____ ____ Years _____
Acoustical Ceilings _____ ____ Years _____	Other (Describe) _____ ____ Years _____

**WHICH OF THE FOLLOWING EQUIPMENT HAVE YOU OPERATED**

___ FORK LIFT	___ CABLE CRANE	___ BOOM TRUCK
___ ASPHALT PAVER	___ FRONT LOADER	___ LOADER/HOE
___ HAND AIR TOOLS	___ SMALL BULLDOZER	___ SKID LOADER
___ DUMP TRUCK	___ MEDIUM BULLDOZER	___ BACKHOE
___ LARGE BULLDOZER	___ HYDRAULIC CRANE	___ GRADER
___ TRACTOR TRAILER	___ OTHER (LIST)	
___ ROLLER	___ SCRAPER	

Do you have reliable transportation and tools? If so, please list the tools you would be willing to provide for your own use on the job: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**AGREEMENT BY JOB REGISTRANT WITH  
SCA MEMBER OR SCA JOB REFERRAL SERVICE**

TO BE READ AND SIGNED BY JOB REGISTRANT – IN RETURN FOR THE  
OPPORTUNITY TO USE THE SCA JOB OFFER REFERRAL SERVICE, OR THE  
OPPORTUNITY TO BE CONSIDERED AS AN EMPLOYEE BY MY EMPLOYER WHO  
IS AN SCA MEMBER FIRM, I AGREE AS FOLLOWS:

It is agreed and understood that any misrepresentation of information given within my registration for employment filed with any member of the Springfield Contractors Association (SCA), or with the SCA Job Referral Service, shall be considered an act of dishonesty and be grounds for my immediate dismissal or for rejection of my job registration.

I hereby give my Employer or prospective Employer and the SCA as a representative on its behalf, the right to make a thorough investigation of my past employment, education, and activities, and I release from liability all persons, companies and their agents supplying that information. I release and will indemnify and save and hold harmless any said Employer member of the SCA or the SCA itself, or their agents and representatives and employees, against any liability that might result from making any an investigation.

My signature below verifies that I have read the terms stated herein, that I understand these terms and agree to them, and that my registration for employment was completed by me and all entries and information included therein are true and complete to the best of my knowledge.

I understand that the SCA and its participating SCA employers have promised they will consider all qualified job registrations without regard to Race, Color, Religion, National Origin, Sex, Age, Handicap, Disabled Veterans from the Vietnam Era, membership or non-membership in any labor organization, or other protected status under the law.

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 Signature

Social Security No.

Date

OPTIONAL – ADR AGREEMENT

In order to resolve any legal questions which I may want to raise concerning any alleged violation of my rights under Federal or State laws or regulations, I understand that the SCA Grievance and Arbitration Procedures are available for all employees and job registrants, and may be utilized by me for prompt resolution of any claims by me that my rights have been violated under law by the SCA or any of its member firms. As a registrant for employment using the SCA Job Referral Service or applying for employment with any participating SCA member, I agree that I will utilize the SCA Grievance and Arbitration Procedure as the exclusive procedure to promptly raise any legal questions that I may desire to raise or to assert any legal claims against the SCA or any participating SCA Employer or their agents or employees or representatives. I understand that I may receive a copy of the grievance policies and procedure from the SCA Job Referral Office (SCA ADR Form No. 2) upon request or such policies will be posted for my information at the SCA office or at my Employer's office. I will abide by whatever arbitration policy that said Employer or the SCA may adopt from time to time, it being understood that the procedures will need to be modified from time to time to adjust to new developments or legal requirements.

**BY SIGNING THIS FORM, AND IN RETURN FOR THE SCA AGREEING TO PROVIDE ADR PROCEDURES TO PROMPTLY RESOLVE DISPUTES, I HAVE ENTERED INTO A CONTRACT WITH THE SCA AND THE SCA PARTICIPATING EMPLOYER TO UTILIZE THE GRIEVANCE AND THE ARBITRATION PROCEDURES OF THE SCA, AND I UNDERSTAND THAT: THIS CONTRACT CONTAINS A BINDING ARBITRATION PROVISION WHICH MAY BE ENFORCED BY THE PARTIES – INCLUDING THE SCA AND ITS PARTICIPATING SCA EMPLOYER.**

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 Signature

Date