

## International Union of Operating Engineers Local 877

## **Application for Training**

## Please complete the following and return to IUOE Local 877:

MAIL: 89 Access Rd,Unit 4, Norwood, MA 02062
FAX: 781-769-2165 EMAIL: avassalotti@local877.org

	Applicant Information				
Last Name	First Name		M.I.		
Street Address	City	State	Zip		
Home Phone:	Mobile Phone:	Date of Birth:			
Email:	Regi	ster#			
Are you a citizen of the United	d States or legally authorized to work in the United States?	(Circle One)	Yes	No	
	Enrollment Details				
Course Name:					
Course Start Date:					
	Current Employment Information				
	current Employment mormation				
Current Employer & jobsite:	Date	of Hire			
ob Title:					
		ent Shift (days and hours)			
	Training History / Interests				
Current License(s) (if any):					
Courses and/or training completed:					
courses and or training completed.					
Other Local 877 Training Program interes	sts:				
Please read the	below requirement regarding payment before sub	omitting your applicat	ion.		
Any course that is part of the HVAC P	please be sure to submit, with this completed applicatio Program requires a \$500 non-refundable deposit. It with this application in order to confirm your enrollmen		ayment.		
Applicant Name:					
Applicant Signature:		Date:			