

# Contractor Employment Notification Form For the Statewide Limited Energy JATC

Please complete and fax to 763-571-5928. Call 763-571-5922 with questions.

## EMPLOYEE INFORMATION

NAME: \_\_\_\_\_ Social Security #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP

CELL & PAGER: \_\_\_\_\_

### CIRCLE ONE LOCAL UNION ONLY

BIRTH DATE: \_\_\_\_\_

LOCAL: 110 242 292 343

HAS NOTICE BEEN FAXED TO UNION: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

EXPIRATION DATE  
OF PLT OR UNLICENSED REG: \_\_\_\_\_

POWER LIMITED TECHNICIAN LICENSE #: \_\_\_\_\_

OR UNLICENSED REGISTRATION #: \_\_\_\_\_

## FILL IN THIS SECTION FOR ALL NEW HIRES

DATE OF NOTIFICATION SENT TO JATC: \_\_\_\_\_

EMPLOYMENT START DATE: \_\_\_\_\_

### CIRCLE ONE CLASSIFICATION ONLY

INSTALLER 1 2 3 4 5 6 JI  
TECHNICIAN SENIOR TECH JOURNEYMAN TECH

HOURLY RATE \$ \_\_\_\_\_

## FILL IN THIS SECTION FOR ALL SEPARATIONS ONLY

EMPLOYMENT END DATE: \_\_\_\_\_

### REASON FOR TERMINATION

\_\_\_ VOLUNTARY QUIT \_\_\_ DISCHARGE FOR CAUSE

\_\_\_ Reduction In Force \_\_\_ Probation Period

\_\_\_ REFUSAL OF WORK \_\_\_ LABOR DISPUTE

PROVIDE DOCUMENTATION SUPPORTING DISCHARGE FOR CAUSE (ONLY FOR APPRENTICES) \_\_\_\_\_

## EMPLOYER INFORMATION

EMPLOYING CONTRACTOR: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

## JATC OFFICE USE ONLY

50 DAY EVALUATION SENT: \_\_\_\_\_ RETURNED: \_\_\_\_\_ 100 DAY: \_\_\_\_\_

DATE RECOMMENDED: \_\_\_\_\_ TERMINATION DATE, IF NOT RECOMMENDED: \_\_\_\_\_

APTITUDE TEST SCHEDULED: \_\_\_\_\_ TEST RESULTS: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ INDENTURED: \_\_\_\_\_

**CONTRACTORS** Please note, the Statewide Limited Energy JATC is maintaining "Out of Work" and "Eligible for Hire" reports for the benefit of Contractors and IBEW Members. Please send notification to JATC on ALL hires and terminations so reports can remain accurate.

★ If you are looking to hire, don't forget to call for the "Out of Work" & "Eligible for Hire" reports!