

MANPOWER REQUEST FORM

Contractor/Company: _____ Job Site: _____

Address: _____ County: _____

Contact Name & PH#: _____ Dispatch fax or Email: _____

Requested By: _____ & Contact Phone #: _____

Report Date: _____ Report Time: _____ DAYS OR NIGHTS (CIRCLE ONE)

Length of Job: _____ Days per week: _____ Hours per day: _____

BRIEF DESCRIPTION OF JOB:

CLASSIFICATION/ SKILLS REQUESTED:

PLATE WELDERS _____

TUBE WELDERS _____

SS WELDERS _____

WIRE FEED _____

MECHANICS _____

RIGGERS _____

APPRENTICES _____

HELPERS _____

SPECIAL Training / Requirements

OSHA _____

OR Boiler Lic _____

Site Specific Training _____

Clean Shaven _____

COMMENTS:

Requests: Name and Classification

(do not include in above #'s)

1 _____

2 _____

3 _____

4 _____

5 _____

SUPERVISION REQUESTS

(do not include in above #'s)

FAX COMPLETED FORM TO: 509 484-5731 or EMAIL TO: bm242@aol.com
BOILERMAKERS LOCAL #242