



North Central States Regional Council of Carpenters

**PILE DRIVER SKILL SHEET**

Dispatch Office: 1-855-987-2020 Email: skills@ncsrcc.org

Send to: Dispatch, NCSRCC, 10761 Virginia Plaza, Suite 100, Papillion, NE 68128  
**PLEASE PRINT LEGIBLY!**

Name \_\_\_\_\_ UBC ID# \_\_\_\_\_ UBC Local # \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
(Please include area code) Cell [ ] YES [ ] NO

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Are you a veteran? [ ] YES [ ] NO

Ethnicity: [ ] Asian [ ] Hispanic [ ] Caucasian [ ] African-American  
[ ] Native American [ ] Other \_\_\_\_\_

**YOU HAVE EXPERIENCE TO ACCEPT WORK IN THE FOLLOWING:**

*(Mark with a check ✓ below.)*

- |  |  |
|--|--|
| <input type="checkbox"/> Auger Cast (AUGER)                          | <input type="checkbox"/> Front End Man (FRONTEND)        |
| <input type="checkbox"/> Bilingual - Spanish (SPANISH)               | <input type="checkbox"/> Layout (COMLAY)                 |
| <input type="checkbox"/> Concrete Forms (FORMS)                      | <input type="checkbox"/> Marine Floating Rig (MARINEFLT) |
| <input type="checkbox"/> Diver (DIVER)                               | <input type="checkbox"/> Pin Pile (PINPILE)              |
| <input type="checkbox"/> Drilling Casons/micropile/rockdrill (DRILL) | <input type="checkbox"/> Sheet Piling (SHEETPILE)        |
| <input type="checkbox"/> Foreman (COMFOR)                            | <input type="checkbox"/> Timber Work (TIMBERWK)          |

**YOU ARE TRAINED/CERTIFIED IN THE FOLLOWING:**

*(Mark with a check ✓ below.)*

- |   |   |
|---|---|
| <input type="checkbox"/> Fall protection (FALLP)        | <input type="checkbox"/> MSHA (MSHA)    |
| <input type="checkbox"/> First Aid/CPR (FIRSTAID)       | <input type="checkbox"/> Pro 10 (PRO10) |
| <input type="checkbox"/> Hazardous Waste Worker (HAZWW) |   |

*The following qualifications/certifications ARE AUTOMATICALLY UPDATED through the TRAIN educational system. Please make sure your records are up-to-date.*

- |   |                      |
|---|----------------------|
| Aerial Lift (AERLIFT)                   | ICRA 24 (BPHEALTH)   |
| Confined Space (CONFINED)               | Millwright 16 (MW16) |
| Construction Fall Protection (CONSFALL) | OSHA 10 (OSHA10)     |
| Forklift - Industrial (PITOIND)         | OSHA 30 (OSHA30)     |
| Forklift - Rough Terrain (PITORT)       | Rigging (RIGGING)    |

**PLEASE INDICATE THE WELDING ABILITY YOU HOLD:**

*Please make sure your records are up-to-date. (Mark with a check ✓ below.)*

- |                                    |                                    |
|------------------------------------|------------------------------------|
| Welding Experience:                | <b>WELDING CERTIFICATE:</b>        |
| <input type="checkbox"/> AIR/ARC   | <input type="checkbox"/> ARC/STICK |
| <input type="checkbox"/> ARC/STICK | <input type="checkbox"/> MIG       |
| <input type="checkbox"/> MIG       | <input type="checkbox"/> TIG       |
| <input type="checkbox"/> TIG       |                                    |

**Check ✓ your PRIMARY work area. Check ONLY ONE: Refer to the enclosed area map.**

- |                                  |                                  |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> Area 45 | <input type="checkbox"/> Area 56 |
| <input type="checkbox"/> Area 46 | <input type="checkbox"/> Area 57 |
| <input type="checkbox"/> Area 47 | <input type="checkbox"/> Area 58 |
| <input type="checkbox"/> Area 48 | <input type="checkbox"/> Area 59 |
| <input type="checkbox"/> Area 49 | <input type="checkbox"/> Area 60 |
| <input type="checkbox"/> Area 50 | <input type="checkbox"/> Area 61 |
| <input type="checkbox"/> Area 51 | <input type="checkbox"/> Area 62 |
| <input type="checkbox"/> Area 52 | <input type="checkbox"/> Area 63 |
| <input type="checkbox"/> Area 53 | <input type="checkbox"/> Area 64 |
| <input type="checkbox"/> Area 54 | <input type="checkbox"/> Area 65 |
| <input type="checkbox"/> Area 55 |                                  |

**Check ✓ any other areas where you are willing to work.**

**Check as many as apply. Refer to the enclosed area map.**

- |                                  |                                  |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> Area 45 | <input type="checkbox"/> Area 56 |
| <input type="checkbox"/> Area 46 | <input type="checkbox"/> Area 57 |
| <input type="checkbox"/> Area 47 | <input type="checkbox"/> Area 58 |
| <input type="checkbox"/> Area 48 | <input type="checkbox"/> Area 59 |
| <input type="checkbox"/> Area 49 | <input type="checkbox"/> Area 60 |
| <input type="checkbox"/> Area 50 | <input type="checkbox"/> Area 61 |
| <input type="checkbox"/> Area 51 | <input type="checkbox"/> Area 62 |
| <input type="checkbox"/> Area 52 | <input type="checkbox"/> Area 63 |
| <input type="checkbox"/> Area 53 | <input type="checkbox"/> Area 64 |
| <input type="checkbox"/> Area 54 | <input type="checkbox"/> Area 65 |
| <input type="checkbox"/> Area 55 |                                  |

**To update an existing skill sheet, email skills@ncsrcc.org Please include the changes, additions or deletions to be made along with your Member ID #, Local #, first and last name. Skills will not be removed unless specifically directed to do so.**

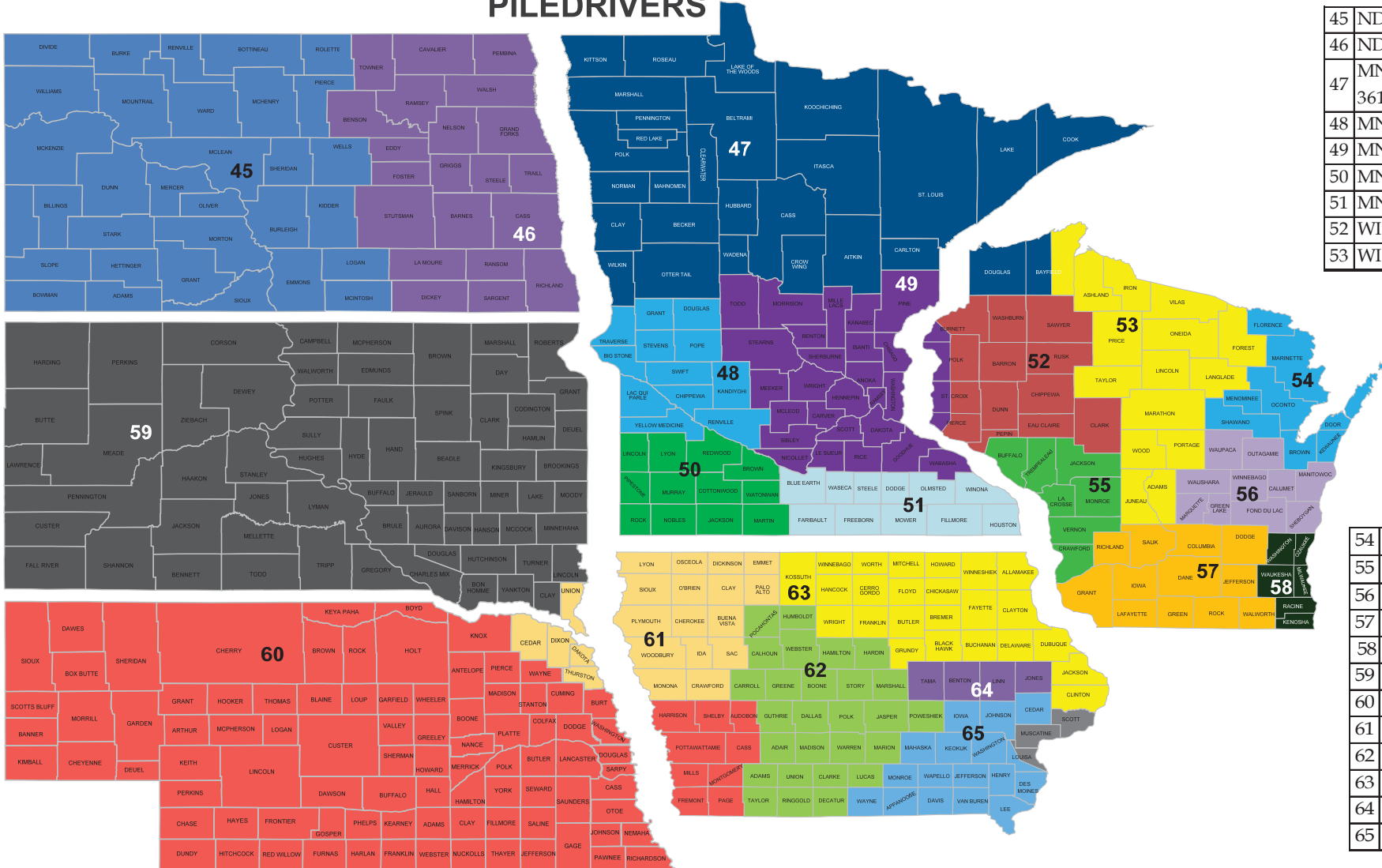
By signing below I, \_\_\_\_\_ (print name), consent to be contacted via telephone, email, cell phone or text message by the United Brotherhood of Carpenters and Joiners of America and its affiliates, including by auto-dialed or pre-recorded calls. (Please note message and data rates may apply.) I agree that this authorization is in effect until I provide written revocation to NCSRCC, 700 Olive Street, Saint Paul, MN 55130. In addition, I declare that the above skills information is correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Filling out and submitting a skill sheet does not automatically place you on the Out of Work List.**

**Please call the MEMBER INFORMATION EXCHANGE AUTOMATED LINE at 1-855-456-2141, and follow the prompts to place yourself on the Out of Work List.**

# PILEDRIVERS



45	ND - LOCAL 1091
46	ND - LOCAL 1176
47	MN - LOCAL 361/606/1934
48	MN - LOCAL 1847 - 1
49	MN - LOCAL 1847 - 2
50	MN - LOCAL 1847 - 3
51	MN - LOCAL 1847 - 4
52	WI - LOCAL 1074
53	WI - LOCAL 310/804

54	WI - LOCAL 1146
55	WI - LOCAL 1143
56	WI - LOCAL 731/955
57	WI - LOCAL 314
58	WI - LOCAL 2337
59	SD - LOCAL 587
60	NE - LOCAL 427
61	IA - LOCAL 948
62	IA - LOCAL 106
63	IA - LOCAL 678
64	IA - LOCAL 308
65	IA - LOCAL 1260