

NCSRCC MEMBER INFORMATION EXCHANGE AUTOMATED LINE 855-456-2141.

Calls and text messages from Mix 2020 will come from 651-240-2140.



North Central States Regional Council of Carpenters

MILLWRIGHT 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"/> Bilingual - Spanish (SPANISH) | <input type="checkbox"/> Regular Dial Alignment (DIALALGN) |
| <input type="checkbox"/> Conveyor Experience (CONVEYOR) | <input type="checkbox"/> Roto (Laser) Alignment (LASER) |
| <input type="checkbox"/> ECCS (ECCS) | <input type="checkbox"/> Tappi Safe (TAPPISAF) |
| <input type="checkbox"/> Foreman (COMFOR) | <input type="checkbox"/> TWIC card holder (TWIC) |
| <input type="checkbox"/> Machinist (MACHINIST) | <input type="checkbox"/> UPM Blandin Safety Cert (UPM) |
| <input type="checkbox"/> Mining Experience (MINING) | Turbine Experience |
| <input type="checkbox"/> Paper Machine Experience (PAPER) | <input type="checkbox"/> Gas (TURBGAS) |
| <input type="checkbox"/> Precision Optics (POPTIC) | <input type="checkbox"/> Hydro (TURBHYDRO) |
| <input type="checkbox"/> Pump Repair (PUMPRPR) | <input type="checkbox"/> Nuclear Worker Experience (NUKE) |
| <input type="checkbox"/> Refinery Experience (REFINERY) | <input type="checkbox"/> Steam (TURBSTM) |
| | <input type="checkbox"/> Wind (TURBWND) |

YOU ARE TRAINED/CERTIFIED IN THE FOLLOWING:

(Mark with a check ✓ below.)

- | | |
|---|---|
| <input type="checkbox"/> Fall Protection (FALLP) | <input type="checkbox"/> MW Optical Align (MWOPTIC) |
| <input type="checkbox"/> First Aid/CPR (FIRSTAID) | <input type="checkbox"/> MW Qualification (MWQUAL) |
| <input type="checkbox"/> GE Turbine (GEQUAL) | <input type="checkbox"/> Pump Repair (FLSV1) |
| <input type="checkbox"/> Hazardous Waste Worker (HAZWW) | <input type="checkbox"/> Tower Rescue 1 (TOWRRES1) |
| <input type="checkbox"/> HYTORC Bolting Tech (HYTORC) | <input type="checkbox"/> Tower Rescue 2 (TOWRRES2) |
| <input type="checkbox"/> Machinery Align (MACHALGN) | <input type="checkbox"/> Occupied Facilities: Controlled Contaminants |
| <input type="checkbox"/> Mechatronics (MECATRON) | |

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

- | | |
|----------------------------------|----------------------------------|
| <input type="checkbox"/> Area 66 | <input type="checkbox"/> Area 70 |
| <input type="checkbox"/> Area 67 | <input type="checkbox"/> Area 71 |
| <input type="checkbox"/> Area 68 | <input type="checkbox"/> Area 72 |
| <input type="checkbox"/> Area 69 | <input type="checkbox"/> Area 73 |

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 66 | <input type="checkbox"/> Area 70 |
| <input type="checkbox"/> Area 67 | <input type="checkbox"/> Area 71 |
| <input type="checkbox"/> Area 68 | <input type="checkbox"/> Area 72 |
| <input type="checkbox"/> Area 69 | <input type="checkbox"/> Area 73 |

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

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

PLEASE INDICATE THE WELDING ABILITY YOU HOLD:

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

Welding Experience:

- ☐ AIR/ARC
☐ ARC/STICK
☐ MIG
☐ TIG

WELDING CERTIFICATE:

- ☐ ARC/STICK
☐ MIG
☐ TIG

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.

SEPTEMBER 2019

