

EXAMINING BOARD STANDARDS

MATERIAL EXPEDITER

These standards, which are in addition to the requirements set forth in Article 4, Section 4.05, of the Collective Bargaining Outside Agreement and Inside Agreement are as follows:

GROUP I

1. Resident as defined in Article 4, Section 4.08, in good standing, and has been employed in the trade for at least one year in the last four years in the geographical area covered by the collective bargaining agreement.
2. Current Certification of First Aid, CPR, and Bloodborne Pathogens (submit documentation).
3. Completion of OSHA 10 (submit documentation).
4. Completion of COMET (submit documentation).
5. Completion of Code of Excellence (submit documentation).
6. Proof of 2,000 hours minimum in GROUP II (submit documentation).
7. Completion of Anti-Harassment (submit documentation).

GROUP II

1. Must be 18 years of age or older.
2. Must have a valid Driver's License.

EXAMINING BOARD QUARTERLY EXAMINATION PROCEDURES

1. The Examining Board of Local Union 1186, IBEW, will hold regular meetings on the first Wednesday in March, June, September and December at 5:00 p.m. at the Hawaii Electricians Pension Building for the primary purpose of reviewing applications.
2. The Examining Board must receive the applicant's fully completed Application for Employment and Classification Rating form not later than 30 days prior to its regularly scheduled meeting date to be considered for the next upcoming exam. For example, the Examining Board must receive an applicant's application 30 days prior to its June meeting or by early May. Applications not received in a timely manner will be considered for the next scheduled examination date.
3. The purpose of the Examining Board is contained in Article 4, Section 4.09, of the existing collective bargaining agreement.

APPLICATION FOR CLASSIFICATION RATING
MATERIAL EXPEDITER

Name _____ Date _____

Mailing Address _____ Phone _____

City _____ State _____ Zip Code _____ SSN XXX-XX-_____

Current Classification _____ Current Book _____ Book Applying For _____

1. Do you have a CDL License? Y / N (Circle one) Type A / B (Circle one)
Restrictions _____
Attach copy of license

2. Do you possess any specialized skills? Y / N (Circle one) Please list the skill(s) _____

In what manner did you obtain these skills? List classes/school(s) attended: _____

Please attach certificate/letter(s) as proof of completion.

COMPLETE BOTH SIDES & SIGN

FOR EXAMINING BOARD USE ONLY

_____ Hours in current Book _____ COMET/COE

_____ First Aid/CPR _____ Anti-Harassment

_____ Blood Borne Pathogens _____

_____ OSHA 10 / 30

EXAMINING BOARD ACTIONS

_____ Approved _____ Approved Pending _____ Rejected

Board Action: _____

Board Member Initials: _____ _____ _____ _____ _____

Chairman's Signature _____

Work Experience. To include the last ten (10) years of employment; beginning with the most current position held. Please be as detailed in your description.

Name of employer _____ Address _____
Position held _____ Immediate supervisor _____
Date started _____ Date ending _____
Work performed _____

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Position held _____ Immediate supervisor _____
Date started _____ Date ending _____
Work performed _____

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Position held _____ Immediate supervisor _____
Date started _____ Date ending _____
Work performed _____

Name of employer _____ Address _____
Position held _____ Immediate supervisor _____
Date started _____ Date ending _____
Work performed _____

I certify that all statements on this application are true, complete, correct to the best of my knowledge, and made in good faith.

_____ Date _____
Applicants Signature