



**ENVIROBATE®**

Date: \_\_\_\_\_

**Application - Laborers**

**Asbestos position**     **Demo position**

**Personal Information**

Applicant Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street /Apt. # City State Zip Code

Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

New Hire     Re-Hire    Year Last Worked for EnviroBate: \_\_\_\_\_

How did you hear about EnviroBate: \_\_\_\_\_

**Union Information**

Union #: \_\_\_\_\_ **OR**  Not Signed up with a Union

Union Level (check box that applies):

Journeyman

Apprentice

Level 1

Level 2

Level 3

I have NOT joined the Union



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**Experience**

Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street /Apt. # City State Zip Code

Total Length of Service: \_\_\_\_\_ Last Year of Service: \_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street /Apt. # City State Zip Code

Total Length of Service: \_\_\_\_\_ Last Year of Service: \_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street /Apt. # City State Zip Code

Total Length of Service: \_\_\_\_\_ Last Year of Service: \_\_\_\_\_

**References**

Reference Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_



# ENVIROBATE®

**Acknowledgments** (check each box that applies)

- I have a **CURRENT** Asbestos Certification and Hard Card (Asbestos workers only)
- If not already a union member, I will sign up with the union within 7 days of hire date.
- I have a **CURRENT** Medical – Physicians Exam and Findings

OR

- I will take a Pre-placement and Hazmat Exam upon hire (paid for by EnviroBate)
- I have or will have upon hire the required Tool Box Checklist as follows:
  - Hard soled work boots or shoes
  - Rubber boots
  - Utility knife
  - Hammer – standard 10oz
  - Screw driver – standard and Phillips

**Authorization** (check each box that applies)

- I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.
- I understand that the employer retains the right to terminate its employee at any time for any reason not prohibited by law or collective bargaining agreement.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date