



Local 49 Training Center
I.U.O.E. Training & Certification



Intro to the Trade Training (HEAVY EQUIPMENT)

Begins Monday, June 5, 2017

8:00am-4:00pm

Local 49 Training Center

40276 Fishtail Rd, Hinckley, MN 55037



*You MUST agree to become a Union Member

*You WILL be subject to drug testing

*You will have to pass the Ramsey test (General Knowledge)

*You MUST have a HS Diploma or GED

*You MUST have a valid Driver's License

*The training is offered on a first come, first serve basis
(4 tribes, 5 members per tribe)



Bois Forte TERO will be accepting applications beginning:

Wednesday, May 17, 2017 to end of the business day on Friday, May 26, 2017.

Please contact Mari Barto - office: 218-757-3261, cell: 218-404-4597, mbarto@boisforte-nsn.gov

TERO – Bois Forte Tribal Government | 5344 Lakeshore Drive | Nett Lake, MN | 55772

WEEK 1 begins on Monday, June 5, 2017

Schedule for week 1:

Day 1: Intro to the Union/History of the Local 49; Testing

Day 2: Pro 10 Training (Expectations of being a Professional)

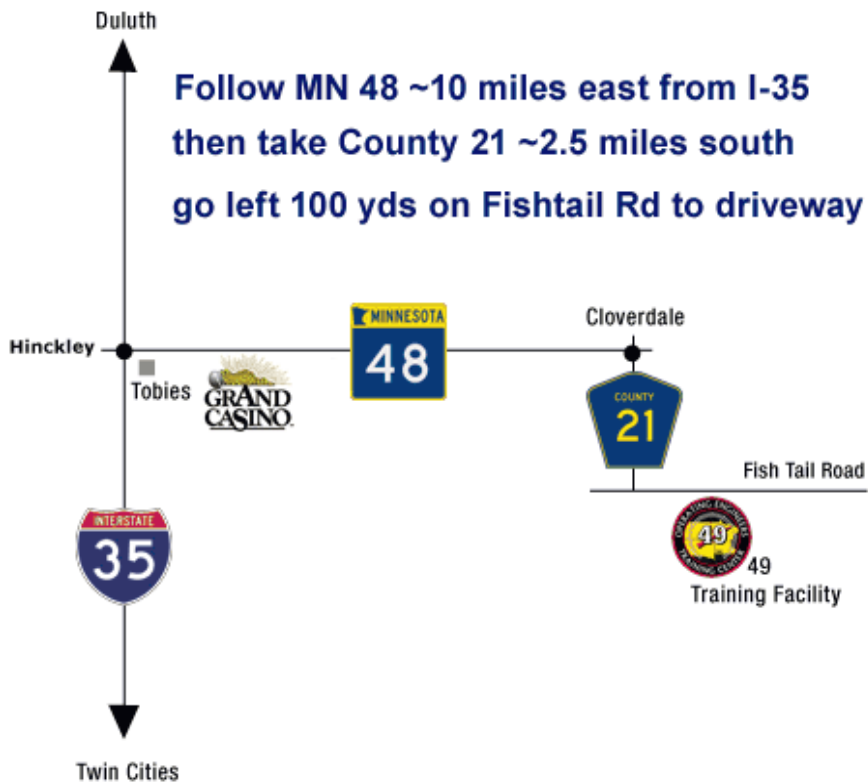
Day 3-4: Simulator Training/Maintenance

Day 5: Hands-on Training/Participants for the 5-week Training Selected

Weeks 2-6 begin on Monday, June 19, 2017



Local 49 Training Center is located at 40276 Fishtail Rd, Hinckley, MN 55037



For more information, please
call your TERO Office.

For **BOIS FORTE** please contact

Mari Barto

Office: 218-757-3261

Cell: 218-404-4597

mbarto@boisforte-nsn.gov

Applications **must** be
submitted by the end of the
work day on

Friday, May 27, 2017!



**BOIS FORTE RESERVATION
TRIBAL EMPLOYMENT RIGHTS OFFICE**

5344 Lakeshore Drive, P.O. Box 16, Nett Lake, MN 55772
Phone: 218-757-3261 or 1-800-221-8129 Fax: 218-757-3312

APPLICATION FOR EMPLOYMENT

Please complete all items: Date of Application _____

Name: _____ SSN: _____
Last First M.

Address _____
(Street/POB, City, State, Zip) County

DOB: _____ Age: _____ M _____ F _____
M/D/Y

Telephone#: _____ / _____ Msg#: _____ Enrolled? Yes _____ No _____
home work (Must attach proof of tribal enrollment)

D.L#: (required for operators/drivers) _____ State _____

Family Status (check one)

- Single, Head of Household
 Parent in two Parent Household
 Family Member other than Parent
 Dependent Children? How Many?
 Independent Individual

U.S. Citizen? Y/N

Registration#: _____

Race/Ethnic

- American Indian
 Black
 White
 Hispanic

The majority of these jobs are temporary and may only last one day to several months depending on the position. Your name will be given to the appropriate contractor and **they will do the hiring**. Please answer all questions. If you do not give full information you might be overlooked for a position.

TRADE: Circle all that apply and refer to the specific skill sheet.

- | | | |
|------------------------------|-----------------|--------------------|
| Heavy Equipment/Operator (2) | Laborer (1) | Electrician (4) |
| Carpenter (4) | Ironworker (5) | Plumber (4) |
| Cement Finisher (4) | Drywall (4) | Night Watchman (2) |
| Truck Driver (5) | Surveying (3) | Block Layer (5) |
| Clerical/Secretarial (3) | Spec. Trng. (5) | Other _____ (5) |
| Painting (4) | Flag person (1) | Supervisory (5) |

Do you presently have, or have you ever had a certificate for any of the above? Y/N

Are you affiliated with any union? Y/N Please List: _____

Any Training/Apprenticeships? Please list: _____

EDUCATION: Circle highest grade completed: GED 7th 8th 9th 10th 11th 12th

Name of High School and year graduated _____

Post-Secondary: Degree: _____

Name of Post-Secondary Institution: _____



BOIS FORTE RESERVATION TRIBAL EMPLOYMENT RIGHTS OFFICE

5344 Lakeshore Drive, Nett Lake, MN 55772
Phone: 218-757-3261 Ext. 196 Fax: 218-757-3312

Application for Training Assistance

Please complete all items:

Date of Application: _____

Name: _____ SSN: _____
Last First MI

Address: _____ County: _____
(Street, POB, City, State, Zip Code)

DOB: _____ AGE: _____ M _____ F _____

Telephone#: _____ (Home) _____ (Work) _____ (Message or Cell)

Enrollment #: _____ (must attach proof of tribal enrollment)

You must submit a 'Letter of Acceptance' from the Training Facility. Training dollars can only be used for specialized training such as those that are applicable to the TERO Program ONLY.

Please state the reason as to why you are requesting assistance: _____

Have you applied for assistance from WIA (Workforce Investment Act) Program/Leanne Hoffman?
____ YES ____ NO Please attach a copy of the letter from the WIA Program. (Denial, Out Of Funds, Award, etc.)

Have you applied for assistance from the Bois Forte Scholarship Program?
____ YES ____ NO Please attach a copy of the letter from the Education Department. (Denial, Out of Funds, Award, etc.)

Training Funds can be utilized once every Five (5) years.

I certify that the information given is true to the best of my knowledge.

Signature: _____ Date: _____