

**LABOURERS INTERNATIONAL UNION OF NORTH AMERICA  
LOCAL UNION NO. 615  
WORKFORCE REQUEST FORM**

COMPANY NAME: \_\_\_\_\_

JOB NAME: \_\_\_\_\_

JOB LOCATION: \_\_\_\_\_

ESTIMATED LENGTH OF JOB: \_\_\_\_\_

# OF LABOURERS  
REQUESTED: \_\_\_\_\_

CLASSIFICATION REQUESTED:  1<sup>st</sup> Level       2<sup>nd</sup> Level       Journeyperson

REPORT TO: \_\_\_\_\_

FOREPERSON'S PHONE #: \_\_\_\_\_

START DATE & TIME: \_\_\_\_\_

NAME HIRE REQUESTED: \_\_\_\_\_

REQUIRED  
SAFETY TRAINING & SKILLS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

WORKFORCE REQUESTED BY: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

**FAX REQUEST TO: 902-450-1091**

**PROBATIONARY WORKER FORM**

NAME:	
SIN:	
DATE OF BIRTH:	
FULL ADDRESS:	
HOME PHONE:	
CELL PHONE:	
EMAIL ADDRESS:	
<p>I, the undersigned, agree that I will work as a Probationary Worker through Labourers Union Local 615 for a period of between two and four weeks which may be extended up to eight weeks. During this probationary period, the hourly rate of pay will be commensurate with the level of experience as outlined in Article <u>5.03</u>, or as determined by the Union, with a minimum of 4% vacation &amp; holiday pay. It is also agreed that the company shall deduct 2.5% work dues from the gross amount earned weekly as well as \$0.25 Organizing for each hour worked to be remitted to LIUNA Local 615.</p> <p>At the conclusion of the probationary period, the Probationary worker will either be offered membership with the Union or dismissed.</p> <p>Signed at _____ this _____ day of _____, 20____.</p> <p>_____ Signature</p>	

**PROBATIONARY WORKER REPORT – BI-WEEKLY**

<b>Company Name:</b>			
<b><u>Foreperson:</u></b>			
<b>Employee Name:</b>			
<b>Employee Address:</b>			
<b>Level:</b>	1 <sup>st</sup> Level	2 <sup>nd</sup> Level	<u>Journey</u> person

<b>Performance Level:</b>	<b>Unacceptable</b>	<b>Acceptable</b>	<b>Good</b>	<b>Very Good</b>	<b>Outstanding</b>
Is able to follow instructions					
Is able to pick up skills quickly					
Follows all safety regulations					
Works well with others					

<b>Attendance Level:</b>	<b>Please circle response</b>	
Has the worker been late?	YES	NO
Has the worker missed time?	YES	NO
If worker missed time, did they call in to report reason for missed time?	YES	NO
How often is the worker late or has missed time?	Frequently	Occasionally
Is the worker willing to work overtime?	YES	NO

**Additional Comments:**

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**To be submitted to the Union every 2 weeks from commencement of employment. Failure to fill out and remit report may result in Contractor not being eligible to utilize Probationary worker clause in the future.**