OUT OF WORK APPLICATION

Name: _____
Last First Middle Initial

Telephone: (_____)_____

(_____)_____

Circle which craft you are in:

Welder Laborer Operator Teamster

List how many years of experience you have in the pipe line industry:_____

Have you worked for Sheehan before? Yes No

If so, when?_____

_____

List specific job experience and/or machinery that you are qualified to operate:_____

_____

_____

Are you a member of a Union? Yes No
If so, what Local? _____

Please fax to (918) 747-9888 or email to mlucas@sheehanpipeline.com