



Alaska Teamster-Employer Service Training Trust APPLICATION FOR ENROLLMENT

520 E. 34th Avenue, Suite 201 , Anchorage, AK 99503
(907) 278-3674 Fax (907) 279-6088

Please complete the entire application.

Course Name:		
Course Date:	Course Time:	
Training Location:		
Last Name:	First Name:	M.I.
Mailing Address:		
City:	State:	Zip:
Home Phone:	Cell Phone:	ADL#
Email Address:		Social Security #
Construction Card: (Circle One) A B C D E	Teamster Ledger #	Most Recent Teamster Employer:
DOB:	Out of Work Date:	Employer Start Date:
Current Teamster Apprentice: (List program)		
<p>Eligibility for most of the Teamsters Training Center programs is determined by your work history, which must be provided by the Member. You must have worked in employment for which the employer has contributed to the Training Trust a specific number of hours within the past 24 months. This eligibility requirement may not apply to programs funded by sources other than employer contributions. Students may be required to pay for their class materials and instruction. All determinations of eligibility are made by Training Center staff.</p>		
<p>I have read and understand the eligibility requirements for training benefits. I understand that my work record will be reviewed by the Teamster Training Center staff for training eligibility purposes.</p>		
SIGNATURE:		DATE:

OFFICE USE ONLY:	ELIGIBLE UNDER TRUST: YES _____ NO _____	
Fee Amount Due \$ _____	Paid on: _____	CA _____ CK _____ CC _____
Course Code: _____	Instructor: _____	
To Dispatch: _____	Database: _____	Calendar: _____