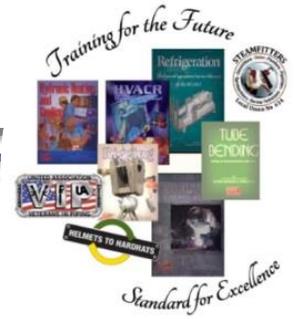


*Joint Apprenticeship Training Committee
of Steamfitters Local Union 614*



LETTER OF REFERENCE

NAME OF APPLICANT: _____

DATE: _____

1. LENGTH OF TIME YOU HAVE KNOWN THIS PERSON:

1 YEAR _____ 5 YEARS _____ 10 YEARS _____ LONGER _____

2. HOW WOULD YOU JUDGE HIS CHARACTER?

EXCELLENT _____ GOOD _____ FAIR _____ BAD _____

3. DO YOU BELIEVE THAT THIS PERSON WOULD BE AN ASSET TO THE STEAMFITTING INDUSTRY?

YES _____ NO _____

4. PLEASE MAKE ANY COMMENTS YOU DESIRE WHICH MIGHT BE HELPFUL.

REMARKS (Please Print): _____

THANK YOU,

NAME (Please Print) _____

ADDRESS _____

HAND DELIVER:

STEAMFITTERS LOCAL UNION NO. 614
5670 COMMANDER DRIVE
ARLINGTON, TN 38002

SIGNATURE _____

OR EMAIL TO:

apprenticeship@local614.org