PUBLIC EMPLOYEES LOCAL 71 Working Hard for ALASKA

EMPLOYMENT REFERRAL PROGRAM LIST
Information & Procedures

Anchorage:	2510 Arctic Blvd., Anchorage, AK 99503	Ph: 276-7211
Fairbanks:	2122 Airport Way, Fairbanks, AK 99701	Ph: 452-5024
Juneau:	722 W. 9th Street, Juneau, AK 99801	Ph: 586-6993

www.local71.com

Registration with our Employment Referral Program requires completion of all the necessary paperwork and correct fee payment.

Our lists in most cities are quite lengthy. Generally you can expect a substantial wait before being dispatched. The wait varies with the positions.

Those registered for referral shall be listed according to their date of continuous fee payment to Local 71. There will be a cap of five years maximum (adjusted daily). Those applications with the same date shall be listed in order of registration.

FEE PAYMENT: The non-refundable fee is $30.00 per month; the first month's fees are due at the time of registration. The fee may be paid in person or mailed. (The postmark will determine timeliness). **The fee is due on or before the first working day of each month. If the fee is not paid on time, your name will be removed from the list. If you choose to re-register, you will be starting over with a new date.** Your fees must be paid through the month in which you register.

If you wish to be placed on the list, **YOU** must sign up either in person, via mail, email, or fax.

The Union has a **LOCAL HIRE** provision, which means that we may refer an applicant only to the area where he/she resides. For example, if you live in Kenai, we may not refer you to Seward. If you live in Fairbanks, we may not refer you to Nome. If you move and wish to be placed on the Employment Referral Program List at your new residence location, you will be placed at the bottom of that list.

TELEPHONE CALL OUT: 8:00 a.m. to 12:00 noon, Monday through Friday (except State Holidays).

Registration on the ERP list does not guarantee employment, only that you will be called according to your date of continuous payment. It is the responsibility of the Applicant to make sure our records are up to date.

We send three applicants to interview for each position (with the State). By accepting a job interview you are, in fact, accepting the job if the employer offers it. If you accept an interview and do not show up, or refuse a job at or after the interview, you may lose your place on the list. You are permitted to refuse any referral offered by the dispatcher over the telephone. Doing so does not change your position on the list.

Any applicant employed under a Local 71 contract who quits that employment or is fired for just cause shall be assigned a new date which shall be the date of re-registration.

Position Listing

Job Code	Classification	Wage Group	Sec.
2	Engineering Tech Journey	54	2
2A	Engineering Tech Sub-Journey III	55	2
2B	Engineering Tech Sub-Journey II	57	2
2C	Engineering Tech Sub-Journey I	59	2
4	Electrical Inspector	49	10
4A	Electrician - Foreman	50	7
4B	Electrician - Journey II	51	7
4C	Electrical Utility Lineman	51	7
5	Elevator Inspector	50	10
6	Equipment Operator - Foreman II	50	4
6A	Equipment Operator - Foreman I	51	4
6B	Equipment Operator - Lead	52	4
6C	Equipment Operator - Journey III	52	4
6D	Equipment Operator - Journey II	53	4
6E	Equipment Operator - Journey I	54	4
6F	Equipment Operator - Sub-Journey II	56	4
6G	Equipment Operator - Sub-Journey I	58	4
7	Mechanics (Automotive) - Foreman II	51	9
7A	Mechanics (Automotive) - Foreman I	52	9
7B	Mechanics (Automotive) - Lead	53	9
7C	Mechanics (Auto) - Advanced Journey	53	9
7D	Mechanics (Automotive) - Journey	54	9
7E	Mechanics (Automotive) - Sub-Journey	56	9
8	Maint. Specialist - Foreman	50	7
8A	Maint. Specialist - Lead/Solo Maint Mech	51	7
8B	Maint. Generalist - Foreman	52	6
8C	Maint. Generalist - Lead	53	6
8D	Journey: Maintenance Worker	54	6
8E	Sub-Journey II: Maintenance Worker	56	6
8F	Sub-Journey II: TradesHelper	56	6
8G	Sub-Journey I: Laborer	58	6

Job Code	Classification	Wage Group	Sec.
9	Electronics - Lead	50	7
9A	Electronics - Journey II	51	7
10	Mechanics (Aircraft) Adv. Journey	53	9
11	Traffic Ctrl & Electronic	51	7
12	Driller - Journey	53	1
12A	Driller - Sub-Journey	54	1
14	Materials Lab Tech - Foreman	51	8
14A	Materials Lab Tech- Specialist	52	8
14B	Materials Lab Tech- Lead	52	8
14C	Materials Lab Tech- Journey	53	8
14D	Mat. Lab Tech - Sub-Journey IV	54	8
14E	Mat. Lab Tech - Sub-Journey III	56	8
14F	Mat. Lab Tech - Sub-Journey II	57	8
14G	Mat. Lab Tech - Sub-Journey I	59	8
17	Survey - Lead	53	12
17A	Survey - Journey	54	12
17B	Survey - Sub-Journey II	56	12
17C	Survey - Sub-Journey I	58	12
18	Plumbing Inspector	49	10
18A	Plumbing - Journey II	51	7
19	Painter - Journey I	54	6
20	Carpenter - Journey I	53	7
22	Stock/Parts IV	53	11
22A	Stock/Parts - III	54	11
22B	Stock/Parts - II	55	11
22C	Stock/Parts - I	57	11

Job Code	Classification	Wage Group	Sec.
23	Wildland Fire Support Services V	52	11
23A	Wildland Fire Support Services IV	53	11
23B	Wildland Fire Support Services III	54	11
23C	Wildland Fire Support Services II	55	11
23D	Wildland Fire Support Services I	56	
26	Groundskeeper - Sub-Journey II	56	6
26A	Groundskeeper - Sub-Journey I	58	6
*30	Environmental Svcs - Foreman	57	3
30A	Environmental Svcs- Lead	58	3
30B	Environmental Svcs - Journey II	60	3
30C	Environmental Svcs - Journey I	61	3
31	Food Service - Foreman	53	5
31A	Food Service - Lead	56	5
31B	Food Service - Journey	57	5
31C	Food Service - Sub-Journey	61	5
32	Remote Maintenance Worker Journey I	53	7
33	Bldgs/Facilities/Construction Foreman - F&G Reg. Maint	50	7
34	Equip Oper Remote Airport Foreman	49	4

State Wage Schedule

Wage Group	Step A	Step B
49	$37.03	38.33
50	35.35	36.59
51	33.59	35.98
52	31.76	34.02
53	29.66	30.70
54	27.84	28.81
55	25.46	26.35
56	24.04	24.88
57	22.82	23.62
58	21.54	22.29
59	20.31	21.02
60	19.05	19.72
61	16.07	16.51

Sec – Refers to the section of the Job Specifications Binder where you can locate the specification for each Position.

*By signing up for the State's Environmental Services (custodian) series (30) you will also be called for ASD positions

Wages as of 1/1/26. A new employee will enter the schedule at Step A and after 1 year probation shall move to Step B or higher DOE. Subsitence Steps have not been calculated on the above amounts.

Anchorage School District (ASD)

C1	Senior High Crew Chief	$21.97
C2	Middle School Crew Chief	21.69
C3	Operations/Senior BPO	21.57
C4	Admin/Whaley/Middle BPO	21.59
C5	Lead Custodian	20.75
C6	Elementary BPO	20.35
C7	Custodian	19.23
C7	Unassigned Custodian	19.23
C8	Part-Time Custodian	19.43

Scan for JOBS

https://local71.com/job-openings/

Municipality of Anchorage

PF-20	Parks Foreman (working)	$34.34
PO-17	Parks Caretaker Operator	32.68
P2-10	Parks Caretaker II	23.24
P1-06	Parks Caretaker I	20.07
G3-12	Gardner III	24.39
G2-10	Gardener II	23.24
G1-06	Gardener I	20.07

_____
Last Name

For Office Use Only

List _____

Sign Up Date_____

Ent. By_____

Public Employees Local 71

Employment Referral Program Application

PERSONAL INFORMATION:

First Name Middle Initial Last Name

Social Security No._____-_____-_____ Date of Birth_____

Mailing Address City Zip

Physical Address City Zip

Contact No._____ Email Address _____

☐ Check to receive updates/information via text

- email addresses will only be used to keep you informed or to request information
- we do not sell information to third parties

Do you have relatives employed by the State of Alaska? ☐ Yes ☐ No

- If yes please list their name(s), department(s), & your relationship(s)

Are you currently a member of Laborers' International Union of North America (LIUNA)? ☐ Yes ☐ No

- If yes please list the location and number of the local to which you belong in the space below:

Were you referred by a member of LIUNA Public Employees Local 71? ☐ Yes ☐ No

- If yes please list the name of the member in the space below:

CONVICTIONS

Please note: This information is requested solely for the purpose of determining eligibility for referral to those positions within the public sector where the law restricts the employment of applicants with prior criminal convictions. A conviction will not automatically disqualify an applicant for all the positions Local 71 represents.

Have you ever been convicted of a felony? ☐ Yes ☐ No

Have you been convicted of a misdemeanor within the past five years? ☐ Yes ☐ No

- If you answered yes to either of the above questions please explain below:

Referral Information

Job code(s) for the position(s) you are applying for.
(*choose at least one)*

1. _____ 2. _____ 3. _____

Related Training /Experience: Related Training /Experience: Related Training /Experience:

☐ Yes _____Yrs _____mnths ☐ Yes _____Yrs _____mnths ☐ Yes _____Yrs _____mnths
☐ No ☐ No ☐ No

List equipment you have operated:

Special Skills: (ie: HVAC, Oil Fired Burners, Overhead Commercial Doors, etc)

LICENSES: *(please include a copy for our records)*

State of Alaska ADL/CDL # _____ Class: _____ Endorsements: _____ Expires: _____

State of Alaska Certificate(s) of Fitness: Type: _____ Expires: _____
(plumber/boiler/electrician…etc) Type: _____ Expires: _____
Type: _____ Expires: _____

Federal Licenses: (FAA/FCC/IA etc) Type: _____ Expires: _____
Type: _____ Expires: _____

Types of positions you are willing to accept:
(check all that apply)

☐ Full Time ☐ Part Time ☐ Summer Seasonal ☐ Winter Seasonal
☐ Temporary ☐ On-Call

RACE, ETHNIC AND GENDER INFORMATION

By completing this section you may benefit from the State's Affirmative Action Program. Failure to provide this information will not subject you to adverse effects, but if you do not provide the information, it may preclude you from participation in the State of Alaska's Affirmative Action Program.

Gender: ☐ Male ☐ Female Race/Ethnic Heritage: ☐ Alaska Native ☐ Asian/ Pacific Islander ☐ Black ☐ Latino ☐ Native American ☐ White

I certify that all information made on or in connection with this application is true and complete and to the best of my knowledge and belief. I certify that I have not knowingly withheld any fact or circumstance.

I further certify that I have read and understand the instructions and procedures for registration in the Public Employees Local 71 Employment Referral Program.

Date: _____ Signature: _____

Public Employees Local 71
Credit Card Authorization Form
(AUTO PAY SET UP)

Name of Member/Applicant: _____

Please Circle Card Type: Visa Mastercard American Express Discover

Name on Card: _____

Card Number: _____

Expiration Date:_____ CCV: _____

PUBLIC EMPLOYEES LOCAL 71 AUTOPAY ENROLLMENT RULES:

- By setting up autopay you will ensure one month's dues on the 1ST business day of every month will be charged to the card you setup below.
- If you are paid ahead then no deduction will be made until such time as you owe dues again.
- If you are behind on dues at time of Autopay Enrollment is made you will be charged to current the first month autopay will run.
- It will be the member's responsibility to keep your autopay card on file up to date.
- If your card is expired or funds are not available it is NOT the responsibility of PUBLIC EMPLOYEES LOCAL 71 to notify you.
- Once your card is put on file below it will be tokenized for your safety and the safety of the Local. Once this request is processed this form will be shredded.
- PUBLIC EMPLOYEES LOCAL 71, will, under no circumstances, be liable for any damages, losses, or liabilities, including direct or indirect, incidental or consequential damages, losses or liabilities in connection with your use of the PUBLIC EMPLOYEES LOCAL 71 payment portal, your reliance on this site, or any failure of performance, error and/or omission in the operation of this site. protection.

_____ _____

Signature Date

Thank you for setting up auto-pay

(Please sign & date; employment info to be filled once hired.)

Date:	Name:	Social Security Number:	Employer:	Status:
Hire Date:	Job Location:	Classification:	Wage Group:	Dept/Div:

DUES CHECKOFF AUTHORIZATION

I hereby authorize and direct my Employer to deduct from my paycheck the amounts approved below for union dues/fees which Public Employees Local 71 has established and uniformly applied to all working members. and in accordance with the terms of the applicable collective bargaining agreement or other agreement for remittance which has been established between Local 7l and the Employer.

★ $350.00 Initiation Fee:
(Four (4) installments of $87.50)

$44.00 Monthly Dues:
(monthly)

1.75% Working Dues:
(of gross)

Signature _____ Date _____

Dues and Supporting League contributions are not deductible as charitable contributions for federal income tax purposes. Dues paid to Public Employees Local 71 may be deductible in limited circumstances subject to various restrictions imposed by the I.R.S.

ANCHORAGE
2510 Arctic Blvd, Anchorage, AK 99503
(907) 276-7211 Fax (907) 279-7171

FAIRBANKS
2122 Airport Way, Fairbanks, AK 99701
(907) 452-5024, Fax (907) 456-1771

JUNEAU
722 W 9th Street, Juneau, AK 99801
(907) 586-6993, Fax (907) 586-5757

★ The initiation fee is what makes you a member of Laborers' International Union of North America (LIUNA). If you have already paid an initiation fee with another LIUNA Local (i.e. Local 341 in Anchorage or Local 942 in Fairbanks Juneau), please call Local 71 so that we can assist you in transferring your card.

(Please sign & date; employment info to be filled once hired.)

Date:	Name:	Social Security Number:	Employer:	Status:
Hire Date:	Job Location:	Classification:	Wage Group:	Dept/Div:

Supporting League Authorization

I hereby authorize and direct my employer to deduct from my paycheck the amount of $5.00 per month and to forward amount to the Public Employees Local 71 Supporting League. This authorization is signed freely and **Voluntarily**. I understand that this voluntary contribution is not a condition of membership in the union and that the union cannot favor or disadvantage me because of the amount of my contribution or my decision not to contribute. I understand that the Supporting League will use the money it receives to make political expenditures and contributions in connection with federal, state, and local elections. I understand that this amount is only a suggested guideline, and that I am free to contribute more or less that this amount. I understand that I have the right to refuse to sign this authorization. I further agree that this authorization be automatically renewed and that it may be revoked at any time by my notification to my employer in writing of my desire to do so.

Signature _____ Date _____

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LIUNA—the Laborers' International Union of North America—is a union, a half-million strong, united through collective bargaining agreements that help us earn family-supporting pay, good benefits and the opportunity for advancement and better lives.

From pay to training to retirement, LIUNA members live better. Enter your information to join LIUNA.

Find out more about membership at www.liuna.org/publicemployees

APPLICATION FOR MEMBERSHIP

I, the undersigned, hereby designate LIUNA Local No. 71 my collective bargaining representative on all matters relating to the terms and conditions of my employment in order to promote and protect my welfare as an employee. I further request and authorize the deduction from my earnings each payroll in an amount sufficient to provide for the regular payment rate of monthly dues and/or assessments or other fees established by my Union.

DATE

PRINT YOUR NAME

ADDRESS

CITY, STATE, ZIP

HOME PHONE (AREA CODE & NO.)

CELL PHONE (AREA CODE & NO.)

EMAIL ADDRESS

DATE OF BIRTH (MONTH, DAY, YEAR)

SOCIAL SECURITY NUMBER

SIGNATURE (DO NOT PRINT)

William Meers
Business Manager/Secretary-Treasurer

Cathy Robbins
President

HEADQUARTERS
2510 Arctic Blvd, Anchorage, AK 99503

I recognize the need for a strong union in my workplace and understand my payments will contribute to the costs associated with collective bargaining and representation.

PUBLIC EMPLOYEES LOCAL 71 Working Hard for ALASKA

LiUNA! *Feel the Power*

BRENT BOOKER
General President

MICHAEL F. SABITONI
General Secretary-Treasurer

HEADQUARTERS
905 16th St., N.W.,
Washington, D.C. 20006

www.LIUNA.org

DUES CHECKOFF AUTHORIZATION AND ASSIGNMENT: PUBLIC SECTOR

Local Union No. 71 , affiliated with the LABORERS' INTERNATIONAL UNION OF NORTH AMERICA

Name of Employer_____

I, _____ , (**print name**) do hereby assign to Local Union No. 71, Laborers' International Union of North America, such amounts from my wages as shall be required to pay an amount equivalent to the initiation fees, readmission fees, membership dues, and related assessments, as the Union may establish from time to time. If I am not a member of the Union, I assign an amount equal to the fair-share fees as the Union may establish from time to time in lieu of the foregoing dues and fees.

My Employer is hereby authorized to deduct such amounts from my wages and pay the same to the Local Union and/or its authorized representative.

This authorization shall become effective upon its execution.

This authorization shall be irrevocable for a period of one (1) year, or until termination of the Collective Bargaining Agreement in existence between my Employer and Union, whichever occurs sooner. I agree and direct that this authorization shall be automatically renewed and shall be irrevocable for successive periods of one (1) year each, or for the period of any subsequent agreement between my Employer and Union, whichever shall be shorter, unless written notice is given by me to my Employer and Union not more than twenty (20) days and not less than ten (10) days prior to the expiration of each one (1) year period, or of each Collective Bargaining Agreement between my Employer and Union, whichever occurs sooner. This check-off authorization shall continue irrespective of my membership in the Union or any union-security clause or obligation contained in the Collective Bargaining Agreement.

Union dues are not deductible as charitable contributions for federal income tax purposes. However, they may be tax deductible under other provisions of the Internal Revenue Code. Union dues may qualify as business expenses, job-related expenses, or other "unreimbursed employee expenses" to the extent permitted by the Internal Revenue Service.

This assignment has been executed this _____ day of _____ , 20 _____ .

Signature _____

Telephone No. _____