

EQUAL EMPLOYMENT OPPORTUNITY LOCAL UNION REPORT (EEO-3)

Part A. LOCAL UNION IDENTIFICATION

<p>1. Full name of local union for which this report is filed. (Include local number, if any.)</p> <hr/> <p>2. Mailing address.</p> <p>a. Where official mail should be sent to the union.</p> <p>Number and street</p> <hr/> <p>City</p> <hr/> <p>County</p> <hr/> <p>State</p> <hr/> <p>Zip Code</p>	<p>b. Union office, if different from 2a.</p> <p>Number and street</p> <hr/> <p>City</p> <hr/> <p>County</p> <hr/> <p>State</p> <hr/> <p>Zip Code</p> <p>3. Indicate type of local union report by a check in applicable box:</p> <p>a. <input type="checkbox"/> Report filed by local union in its own behalf</p> <p>b. <input type="checkbox"/> Other (explain)</p> <p>4a. Are you affiliated with or chartered by a national or international union or national federation? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>b. If "Yes" to item 4a, give name and address of such national or international organization.</p> <hr/> <p>5. Are you affiliated with the AFL-CIO? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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Part B. LOCAL UNION PRACTICES

<p>1. To the best of your knowledge, does your membership include any:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;"></td> <td style="width: 10%; text-align: center;">Yes</td> <td style="width: 20%; text-align: center;">No</td> </tr> <tr> <td>a. Blacks (Non-Hispanic)?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>b. Hispanics?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>c. Women?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table> <p>3. To the best of your knowledge, has your international union chartered a separate local within the same work and/or area jurisdiction which consists only of:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;"></td> <td style="width: 10%; text-align: center;">Yes</td> <td style="width: 20%; text-align: center;">No</td> </tr> <tr> <td>a. Persons of the same race/ethnic identity...</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>b. Persons of the same sex?</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>		Yes	No	a. Blacks (Non-Hispanic)?	<input type="checkbox"/>	<input type="checkbox"/>	b. Hispanics?	<input type="checkbox"/>	<input type="checkbox"/>	c. Women?	<input type="checkbox"/>	<input type="checkbox"/>		Yes	No	a. Persons of the same race/ethnic identity...	<input type="checkbox"/>	<input type="checkbox"/>	b. Persons of the same sex?	<input type="checkbox"/>	<input type="checkbox"/>	<p>2. If "No" to any items 1a, 1b, or 1c, is this because the group or groups not represented:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">(CHECK ALL APPLICABLE BOXES)</th> </tr> <tr> <th style="text-align: center;">BLACK NON-HISPANIC 1 (a)</th> <th style="text-align: center;">HISPANIC 1 (b)</th> <th style="text-align: center;">WOMEN 1 (c)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>a. Are not in the local community? ...</p> <p>b. Are not in the bargaining unit? ...</p> <p>c. Are excluded by provision in constitution or bylaws? ...</p> <p>d. Have not applied for membership? ...</p> <p>e. Have applied, but did not have a sponsor? ...</p> <p>f. Have applied, but did not meet qualifications other than sponsorship? ...</p> <p>g. Other reason(s) (Explain) _____</p>	(CHECK ALL APPLICABLE BOXES)			BLACK NON-HISPANIC 1 (a)	HISPANIC 1 (b)	WOMEN 1 (c)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Part C. LOCAL UNIONS REQUIRED TO FILE

<p>1. Has the local union had 100 or more members at any time since December 31 of the preceding year?</p> <p style="text-align: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>2. Does the local union, or any unit, division, or agent of the local union, or any labor organization which performs, within a specific jurisdiction, the functions ordinarily performed by a local union, whether or not it is so designated:</p> <p>a. Operate a hiring hall or hiring office? <input type="checkbox"/> <input type="checkbox"/></p> <p>b. Have an arrangement under which one or more employers are required to consider or hire persons referred by the local union or an agent of the local union? <input type="checkbox"/> <input type="checkbox"/></p> <p>c. Have 10 percent or more of its members employed by employers which customarily and regularly look to the union, or any agent of the union, for employees to be hired on a casual or temporary basis, for a specified period of time, or for the duration of a specified job? <input type="checkbox"/> <input type="checkbox"/></p>	<p>The union must complete the entire report if it answered "YES" to Item 1, AND the answer is "YES" to any of the three questions in Item 2.</p> <p>The union is not required to complete the entire report if it answered "NO" to item 1, OR "NO" to all three questions in Item 2. If that is the case, the union must complete Parts A, B, C and E and return this form to the specified address.</p>
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Part D.. REMARKS

Part E. IDENTIFICATION AND SIGNATURE

To the best of my knowledge and belief, the information contained in this report is true and complete. It is further certified that to the extent any data in Schedule I, Items 1 or 2, are based on self-identification by individuals, this information was gathered only after they were advised of its confidential nature and purposes.

1. Type or print name, title, address and telephone number for union business of designated representative

Name _____
 Title _____
 Work address _____
 Telephone number (including area code) _____

2. Signature of designated representative _____

3. Date _____

"Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years, or both." Title 18, Section 1001, United States Code.

SCHEDULE I—LOCAL UNION REPORT (EEO—3)

MEMBERSHIP, APPLICANT and REFERRAL INFORMATION

1. Method of identification

How was information as to race/ethnic identification and sex in Item 2 below obtained?

This information may be obtained by visual survey, from records made after employment, from personal knowledge or by self-identification. The self-identification method may be used subject to the conditions set forth in the instructions. No State law prohibiting the self-identification method applies, since the Equal Employment Opportunity Commission's regulations supersede such laws.

Check all applicable boxes

a. Existing Record	
b. Visual Survey	
c. Tally from Personal Knowledge	
d. Self-identification	
e. Other (Specify)	

2. Statistics

	TOTAL (COLUMNS 3-K) A	MALE					FEMALE				
		NON-HISPANIC ORIGIN		HISPANIC D	ASIAN OR PACIFIC ISLANDER E	AMERICAN INDIAN OR ALASKAN NATIVE F	NON-HISPANIC ORIGIN		HISPANIC I	ASIAN OR PACIFIC ISLANDER J	AMERICAN INDIAN OR ALASKAN NATIVE K
		WHITE B	BLACK C				WHITE G	BLACK H			
a. MEMBERSHIP IN REFERRAL UNIT											
(1) MEMBERS											
(2) APPLICANTS FOR MEMBERSHIP DURING THE PAST YEAR											
b. REFERRALS DURING 2-MONTH PERIOD											
(1) NUMBER OF PERSONS REFERRED											
(2) NUMBER OF REFERRALS											
(3) APPLICANTS FOR REFERRAL											

3. Period Used For Referral Date

You should obtain the figures reported in Item 2 "Statistics" using any 2-month period between August 1 and November 30.

Dates of 2-month Period _____