



Building & Construction Resource Center, Inc. • 6050 Southport Rd. Ste. B • Portage, IN 46368  
Office: 219.764.9500 info@bcrcnet.com www.bcrcnet.com



# BCRC MEMBER APPLICATION FORM

PLEASE MAKE COPIES AS NEEDED  
THIS APPLICATION FORM CAN BE FOUND AT WWW.BCRCNET.COM (SCAN QR CODE ABOVE)

**IMPORTANT - BE SURE TO CHECK THE APPROPRIATE BOX(ES)!**

**NEW APPLICANT**

**APPRENTICE**

**D.O.T.**

**PREVIOUS MEMBER**

**NON-BARGAINING  
PERSONNEL**

**TRAVELER**  
Union Member whose jurisdiction  
is outside of the geographical  
area covered by BCRC

BCRC # \_\_\_\_\_

## THIS APPLICATION MUST BE COMPLETELY FILLED OUT BEFORE SUBMITTING

\*\* PLEASE PRINT CLEARLY, BCRC IS NOT RESPONSIBLE IF APPLICATION IS NOT LEGIBLE \*\*

DATE: \_\_\_\_\_ HOME LOCAL #: \_\_\_\_\_ JURISDICTIONAL LOCAL #: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE ISSUED: \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

MOBILE\*: \_\_\_\_\_ EMAIL\*: \_\_\_\_\_

TRADE NAME: \_\_\_\_\_ (Example: Boilermaker, Bricklayer, Tech. Engineer)

\*MOBILE AND EMAIL DEVICES WILL RECEIVE RANDOM DRUG NOTIFICATION ALERTS FROM BCRC, DATA CHARGES MAY APPLY.

### SECTION TO BE FILLED OUT BY A LOCAL UNION REPRESENTATIVE ONLY

Application acknowledgement by applicable Local Union #: \_\_\_\_\_

Acknowledged By: \_\_\_\_\_  
PRINT NAME SIGNATURE



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## PERMISSION TO OBTAIN BCRC DRUG STATUS

Before an employee’s BCRC status can be released to an employer verbally by BCRC, the employee must first sign for the release of his/her status by the use of his/her BCRC ID number or social security number.

*Per the BCRC Policy Revision January 1, 2020, Page 36-37, Card System & Status Confirmation Article:*

**The card manager shall maintain the strictest confidentiality of the BCRC membership.**

*The employer is required to obtain appropriate written consent from its employees to access information about such employees from the BCRC database and is required to comply with all provisions of the BCRC Policy regarding access to such information. Such access can be obtained by having their card status verified on their job site in order to determine if the employee is available or not available under the BCRC program.*

I \_\_\_\_\_, give my permission for the following company to obtain the information of my availability status from BCRC by using my BCRC ID number or my social security number.

Company Name: \_\_\_\_\_

Company Card Manager: \_\_\_\_\_

Card Manager Phone Number: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Site Location: \_\_\_\_\_

Employee/Member Name: \_\_\_\_\_

Employee/Member BCRC ID #: \_\_\_\_\_

Driver License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

Employee/Member Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
EMPLOYEE/MEMBER SIGNATURE

\_\_\_\_\_  
DATE

**\*\*THIS FORM IS CONFIDENTIAL AND MUST BE HELD IN A SECURED LOCATION AT ALL TIMES\*\***





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## APPLICANT/CARDHOLDER DRUG TESTING INSTRUCTIONS & INFORMATION

BCRC is exercising extreme care to ensure that strict quality control measures are followed in the collection, handling, and analysis of your specimen. You play an important role in this process and should be certain that you have provided an un-adulterated specimen to the laboratory. Remember, you are certifying that the specimen which you provided is yours and is un-adulterated. Any adulteration or switching of specimen is a breach of BCRC's rules and if you are employed, may subject you to discipline up to and including termination by your employer.

### For your own protection and peace of mind, we ask that you:

- Do **NOT** leave the waiting area once you have signed in.
- Provide picture identification to the collection site/technician at time of arrival.
- Be escorted to a collection room and asked to provide an un-adulterated specimen in the collection bottle provided. The bottle should be filled to 45mL.
- Return the specimen bottle to the medical technician and witness, initial, and date the integrity seals placed on your specimen bottle.
- Verify the proper spelling of your name as recorded on the log sheet.
- Verify that your social security number has been properly recorded.
- Verify that the social security number placed on your specimen bottle is the same as that recorded on the log sheet and the Custody and Control Form.

**I HAVE READ THE ABOVE AND HAVE HAD AN OPPORTUNITY TO ASK QUESTIONS REGARDING THIS PROCEDURE.**

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BCRC Applicant/Cardholder Signature

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Date