



**IUOE Local 317  
1140 W. Anderson Ct.  
Oak Creek, Wisconsin 53154**

**Facility Operation 3 – Low Pressure Boiler Class  
Beginning Monday, January 16th, 2012  
Registration Due: January 9th, 2012**

This course is designed for entry-level low pressure restricted boiler operators, custodians, and building engineers. This course will also prepare the student to pass the American Society of Power Engineers, Facility Operating 3rd class license exam. Successful students will receive a certificate of completion from IUOE Local 317. The ASOPE examination may be scheduled upon satisfactory completion of the course.

Course includes: Basic boiler design and operation, steam principles, combustion, heat transfer, fuels, HVAC and refrigeration basics, electrical, math, safety, and personal protective equipment.

Class will start on Monday, January 16<sup>th</sup>, 2012, and continue on consecutive Mondays for 10 weeks. ASOPE examination will be held on the last day. **Classes will be held from 5:30pm to 8:30pm at the Local 317 Office located at 1140 W. Anderson Ct., Oak Creek, WI 53154.**

**Cost is \$400.00** which includes textbooks and materials. Students are expected to provide their own spiral notebook, pens and pencils.

**To register:** Please complete the form below and mail it, along with a **\$50.00 deposit**, before January 9<sup>th</sup>, 2012. (Class space is limited) The balance is due on or before the first night of class. Make checks payable to: **Local 317-Training**.

Refund Policy: After January 16<sup>th</sup>, 80% refund; after January 23<sup>rd</sup>, 60% refund; after January 30<sup>th</sup>, 2012, no refund.

For questions, please contact: Linda at the Local 317 office, (414) 570-0317.

Detach and mail lower portion with \$50 to: **IUOE Local 317, 1140 W. Anderson Ct., Oak Creek, WI 53154**



**Please Print**

NAME: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_  
CITY, STATE: \_\_\_\_\_ YEARS EXPERIENCE: \_\_\_\_\_  
ZIP: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_  
ASOPE LICENSE IF ANY: \_\_\_\_\_  
Email Address: \_\_\_\_\_

(  ) I am a member of a union. Name and Local Number: \_\_\_\_\_

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