



Apprenticeship Application

Applying for: Carpentry Electrical Plumbing

Personal Information – Please write in your answer.

Name: (First) _____ (Middle) _____ (Last) _____

Social Security Number: _____ -- _____ -- _____

Mailing Address: _____

(City) _____ (State) _____ (Zip code) _____

Physical Address: _____

(City) _____ (State) _____ (Zip code) _____

Phone #: (Home) _____ (Cell) _____ (Message) _____

Email: _____

Emergency Contact: (Name) _____ (Phone) _____ (Relationship) _____

Demographic Information – Please circle, check, or write in your answer.

What is your Birthday? ____/____/____

What is your Gender? Male Female Other: _____

Ethnicity/Race: (please check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Alaska Native or American Indian | <input type="checkbox"/> Native Hawaiian or other Pacific Islander |
| <input type="checkbox"/> White/Caucasian | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Asian |

Do you have a job? Yes No

Employer: _____ **Work Phone #:** _____

Education Information – Please circle or write in your answer.

EDUCATIONAL BACKGROUND	Name of school and location	No. of years Attended	Degree Received*	Trades Related Classes Taken (ex: Carpentry 1)
High School				
College or University				
Graduate or Higher				
Union, Trade Association, Vocational School				

**Please attach a copy of your High School Diploma or GED. Include a copy of your Transcripts from any Post-Secondary Schools if possible. Also attach any Certifications that are Trades Related.*



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Employment Eligibility – Please write in or circle your answer.

Are you eligible to work in the U.S? Yes No

During the last ten years, have you ever been convicted of a crime other than minor traffic offense? Yes No
(A conviction will not necessarily automatically disqualify you for apprenticeship. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.)

If yes, please provide details (dates and location for all convictions) _____

Have you ever been terminated from employment or asked to resign by an employer? Yes No

If yes, please provide company names and details _____

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Other Inquiries – Please write in your answer.

Do you have a Driver License or CDL? Yes No DL/CDL #: _____

Is your license suspended? Yes No **Do you have reliable transportation?** Yes No

Have you ever been enrolled in an Apprenticeship Program before? Yes No

If yes, complete the following:

Trade: _____ Name of Agency: _____

Physical Address: _____

(City) _____ (State) _____ (Zip code) _____

Length of Time Enrolled: _____ Did you complete the Program? Yes No

If you did not complete the Program, please provide your reason for leaving: _____

List any skills or trade knowledge you have. What do you know how to do in the trade you're applying for?



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Employment History – Incomplete information could disqualify you from further consideration.

Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Attach a separate sheet of paper if necessary.

From	To	Employer Name	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	

From	To	Employer Name	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	

From	To	Employer Name	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	

From	To	Employer Name	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	



References - Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

COMPLETENESS AND ACCURACY OF INFORMATION

I affirm that all of the information now or hereafter given by me in support of my application for Apprenticeship is true and complete. I understand that any false or misleading information in support of my application may disqualify me from becoming an Apprentice or subject me to discharge at any time during the period of my apprenticeship. If I have any questions about this application or the selection process, I may direct them to the Apprenticeship and Programs Coordinator at (907) 543-0997, PO Box 869, Bethel, AK 99559.

Signature: _____

Date: _____

AUTHORIZATION OF RELEASE OF INFORMATION AND RELEASE FROM LIABILITY

I authorize you to verify any of the information given during the application process with appropriate individuals, companies, institutions, or agencies, and I authorize those in authority to release such information as you require, including my prior disciplinary employment record, without any obligation to give me written notice of disclosure. I hereby release you and them from any liability whatsoever as a result of such inquiries and disclosures. A photocopy or other electronic reproduction of this authorization/release is binding, and may be relied upon.

I acknowledge that I have read, understood, and accept the above statement in its entirety, and have had opportunity to ask questions regarding any aspect of this application, and that I accept the above items.

Signature: _____

Date: _____