The Kentucky Sheet Metal Joint Apprenticeship and Training Committee 810 N. English Station Road, Louisville, Kentucky 40223-4792

Phone: 502-245-2412 Email: admin@smw110training.com

Dear Applicant,

By completing this application you are making an application to be placed on an Eligible Applicant List. Applicants are chosen from this list when a request to train an apprentice is received by the Committee. A composite score by scores for education, aptitude, training, and experience will determine your ranking on this list.

The Sheet Metal Local 110 Apprenticeship Program is four (4) years in length of related training. Apprentices starting wage rate is fifty percent (50%) of Local 110 Journeyperson wage rate with five percent (5%) pay increases approximately every six (6) months.

It is important that we have the current information necessary to reach you by mail. It is your responsibility to contact this office should your mailing address change after filing this application.

Before you can be scheduled to take the test survey, this office must have received your completed application.

You will be contacted by mail as to the time and place to take the test survey.

Your application can not be processed if all documents required are not included, and if you fail to show for your scheduled survey test or interview.

General Instructions for mailing:

- ❖ Please print legible.
- Fill out the application in its entirety.
- Return completed application and documentation in person or by mail to the following address:

Kentucky Sheet Metal JATC 810 North English Station Road Louisville, KY 40223-4792

- Send legible copies of the following:
 - a. High school diploma and transcript of grades or General Equivalency Diploma (G.E.D.) and test scores along with high school transcript of classes completed.
 - b. Military Form DD-214, if applicable.
 - *High school grade transcripts and Military Form DD-214 are not a requirement in order to process your application; however, providing this documentation may add points to your overall composite score which may have an impact on your overall standing on the eligible applicant list.
- ❖ If you have a resume that lists all of your employment history you, may attach it to the application in lieu of filling out the Work Experience portion of the application.
- * Make sure you sign and date the application in the two (2) places required.

If you have any questions, please feel free to contact this office.

Thank you,

Kentucky Sheet Metal Joint Apprenticeship and Training Committee

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(Che	ck one)			
	KENTUCKY SHEET METAL APPRENTICESHIP PROGRAM			
	APPRENTICESHIP APPLICATION FORM			
	fications necessary for an applicant to be considered for the Sheet Metal Apprenticeship:			
(1)	Be at least 18 years of age.			
(2)	Have a valid drivers license.			
(3)	Must be physically capable of performing the work of the trade with or without a reasonable accommodation.			
(4)	Complete this page, the application and return this form with the following:			
	-Military Form DD-214, if applicable.			
	Note: All dates and other items from which an applicant's age could be calculated will be removed from any documents provided to the Program and will not be disclosed to the Committee.			
(5)	Score a minimum of 25 on the math portion and a minimum of 28 on the reading portion of the test survey.			
(6)	Submit to a background check.			
(7)	Appear for an interview when notified.			
<u>lf yοι</u>	ı are accepted into the Sheet Metal Apprenticeship Program, you will be required to:			
(1)	Take and pass a drug-screening test.			
(2)	Take a physical examination if prescribed by the Local JATC.			
(3)	Serve a probationary period of one hundred twenty (120) days.			
(4)	Serve a minimum of eight (8) six (6) month semesters and at least four (4) years of on the job training, including the probationary period, at a Contractor assigned by the JATC.			
(5)	Be regular and punctual in reporting for work/training and in proper work clothing.			
(6)	Provide your own transportation to and from the jobsite.			
(7)	Work/train under the direction of a Journeyperson and perform the work and responsibilities assigned to you in a satisfactory manner.			
(8)	Attend related instruction classes regularly and maintain an acceptable average of seventy (70) percent or above in those classes.			
(9)	Purchase material for those related training classes as required.			
(10)	Abide by all current rules and regulations and any future rules and regulations adopted by the JATC.			
	ı are rejected for the Apprenticeship Program, you may appeal your rejection within n (15) days in writing to the local JATC.			
-	undersigned, have read all of the above rules and regulations and agree to abide by all of the rules and regulations.			

Date

Signature

APPRENTICESHIP APPLICATION PLEASE PRINT

Application Number (office use only)							
All items must be answered. disqualified immediately.	Should you give a	false or misleading	answer you will be				
(1) Name of Applicant							
Last	Firs	t	Middle Initial				
(2) Address							
Street Address							
City	State	Zip	County				
(3) <u>Home Phone #</u> /_		Cell Phone #					
(4) Email address							
(5) Social Security No. last	four digits	_					
(6) Are you at least 18 year	s of age? Yes□	No					
(7) Do you have a valid driv	ver's license for th	ne state in which y	ou reside? Yes□ No□				
Note: You will be requi		roof of a valid dr	iver's license if you are				
(8) Have you been convicte	d of a felony? You	es No					
If yes, list state(s) of all	felony conviction	<u>ıs</u>					
Note: Being convicted accepted into the Progra		not automatically d	isqualify you from being				
(9) Are you a Veteran? Yes	s No Bra	nch of Service					
Length of Service		Date of Discharg	ge/				
(10) Are you currently empl	loyed? Yes⊡ N	No□					
(11) <u>Do you have previous</u>	<u>work experience i</u>	n the Sheet Metal	Industry? Yes□ No□				
(12) <u>Do you have a High Sc</u>	hool Diploma or C	G.E.D.? Yes□ N	o 🗌				
(13) Name and Address of I	High School:						

APPRENTICESHIP APPLICATION PLEASE PRINT

Application Number (office use only)							
(14) Are you authorized to work in the United States? Yes No (15) How did you hear about the Sheet Metal Local 110 Apprenticeship Program?							
Employer:	Dates Employed: to						
Contact Person:	Phone No://						
Description:							
Employer:	Dates Employed: to						
Contact person:	Phone No://						
Description:							
Employer:	Dates Employed: to						
Contact Person:	Phone No://						
Description:							
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Description:							

APPRENTICESHIP APPLICATION PLEASE PRINT

Application Number		
(office use only)	Datas	
Employer:	Dates Employed:	to
Contact person:	Phone No:	
Description:		
Employer:	Dates Employed:	to
Contact Person:	Phone No:	
Description:		
(17) <u>Certification</u>		
I hereby certify that the information contains best of my knowledge. I further certify the completed this application. I understand the of information on this application or any grounds for rejection of this application or information of the time elapsed before discovery.	nat I, the undersigned appoint any misrepresentation, to document used to secure	licant, have personally falsification or omission e employment shall be
I hereby authorize the Kentucky Sheet Meta thoroughly investigate the information on m	• • • • • • • • • • • • • • • • • • • •	Training Committee to
I understand that full employment is not g am offered the opportunity to enter into t agree to comply with all current and future Joint Apprenticeship and Training Committee	this Apprenticeship Progra	m as an Apprentice, I
Apprenticeship in the Sheet Metal Industry weather conditions, working in confined spaces of scaffolds, mechanical lifts and ladd safely use and operate tools, equipment an and soldering. If you do not feel as though with or without a reasonable accommodation	paces, including but not ling ders of various heights. It a d machines related to the you are capable of attemp	mited to working off all Iso requires learning to Trade including welding
As a condition of being accepted into the kindividuals are required to pass a pre-emplo	•	

Date

Signature of Applicant