

**U.S. DEPARTMENT OF LABOR
BUREAU OF APPRENTICESHIP AND TRAINING
APPLICATION FOR CERTIFICATION OF COMPLETION OF APPRENTICESHIP**

1. Name of Sponsor _____
(Employer, J.A.T.C., etc.)
2. Address _____
(Street #) (City, State, Zip code)
3. Full Name of Apprentice _____
(Exactly as it should appear on certificate)
4. Student # or Social Security # _____
5. Wage Rate at Completion _____
(Mandatory)
6. Trade _____ Term _____
(Years, months, or hours)
7. Beginning Date of Apprenticeship _____ Registered _____
8. Number of Years, Months, or Hours of Advanced Credit Allowed _____
9. Date of Completion _____
10. Total Hours of Related-Trade Instruction Completed _____

GRCC to fill in above line

11. Related Instruction Furnished by:

_____ *Grand Rapids Community College* _____

- (a) Public vocational school
- (b) Private trade school
- (c) Correspondence
- (d) Company
- (e) Employee organization
- (f) Journeyworker instructor
- (g) Individual study
- (h) Other (specify)

12. Director(s) of Related-Instruction Certifying Item 10 Above (GRCC to complete item #12):

Name _____

Address: 143 Bostwick NE, ATC-212

Signature _____

Grand Rapids, MI 49503

On behalf of the above named sponsor, I hereby certify that the apprentice name on this application has satisfactorily completed his/her apprenticeship program as registered with the Bureau of Apprenticeship & Training and hereby recommend the issuance of the Certificate of Completion of Apprenticeship.

Date _____

Signed _____

(Company Representative)

Title _____