



Warning: This agreement does not constitute a certification under Title 29, CFR, Part 5 for the employment of the apprentice on Federally financed or assisted construction projects. Current certification must be obtained from the Bureau of Apprenticeship and Training or the recognized State Apprenticeship Agency shown below. (Item 22)

OMB No. 1205-0223 Expires: 10/31/2003

The program sponsor and apprentice agree to the terms of the Apprenticeship Standards incorporated as part of this Agreement. The sponsor will not discriminate in the selection and training of the apprentice in accordance with the Equal Opportunity Standards in Title 29 CFR Part 30.3, and Executive Order 11246. This agreement may be terminated by either of the parties, citing cause(s), with notification to the registration agency, in compliance with Title 29, CFR, Part 29.6

Privacy Act Statement: The information requested herein is used for apprenticeship program statistical purposes and will only be disclosed in accordance with the provision of the Privacy Act, as amended. (Privacy Act of 1974) (P.L. 93-579)

PART A: TO BE COMPLETED BY APPRENTICE. NOTE TO SPONSOR: PART A SHOULD ONLY BE FILLED OUT BY APPRENTICE.

1. Name (Last, First, Middle) and Address (No., Street, City, State, Zip Code) Apprentice ID #: _____ 2. Date of Birth (Mo., Day, Yr.) _____		<p style="text-align: center;">ANSWER BOTH A AND B (Definitions on reverse)</p> 4. a. Ethnic Group (mark one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino b. Race (mark one or more) <input type="checkbox"/> Am. Indian or Alaska native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White	
3. Sex (mark one) <input type="checkbox"/> Male <input type="checkbox"/> Female		5. Veteran Status (mark one) <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Veteran 6. Highest education level (mark one) <input type="checkbox"/> 8 th grade or less <input type="checkbox"/> 9 th to 12 th grade <input type="checkbox"/> GED <input type="checkbox"/> High School or greater	
7. Career Linkages or Direct Entry (mark one) (Instructions on reverse) <input type="checkbox"/> None <input type="checkbox"/> Youth <input type="checkbox"/> HUD/STEP-UP <input type="checkbox"/> School-to-Registered Apprenticeship <input type="checkbox"/> Adult <input type="checkbox"/> Job Corps <input type="checkbox"/> Dislocated Worker <input type="checkbox"/> Direct Entry: _____			
8. Signature of Apprentice _____ Date _____		9. Signature of Parent/Guardian (if minor) _____ Date _____	

PART B: TO BE COMPLETED BY SPONSOR.

10. Sponsor (Name and address) Program No. _____ Sponsor Name and Address (No., Street, City, County, State, Zip Code) _____		11a. Trade/Occupation (The work processes listed in the standards are part of this agreement) _____	
		11b. Occupation Code AIMS: _____	12. Term (Hrs., Mos., Yrs.) _____
		13. Probationary Period (Hrs., Mos., Yrs.) _____	
		14. Credit for previous experience (Hrs., Mos., Yrs.) _____	15. Term remaining (Hrs., Mos., Yrs.) _____
		16. Date apprenticeship begins (Indenture date) _____	
17a. Related Instruction (number of hours per year) _____	17b. Apprentice wages for Related Instruction <input type="checkbox"/> Will be paid <input type="checkbox"/> Will not be paid	17c. Related Training Instruction Source _____	

18. Apprenticeship Wages: (Instructions on reverse)										
	Period 1	2	3	4	5	6	7	8	9	10
a. Term (Hrs., Mos., Yrs.)										
b. Percent										

18c. Journeyworker's or completion hourly wage \$ _____	18d. Apprentice entry hourly wage \$ _____
19. Signature of Sponsor's Representative(s) _____ Date Signed _____	21. Name and address of sponsor designee to receive complaints (If applicable) _____
20. Signature of Sponsor's Representative(s) _____ Date Signed _____	

PART C: TO BE COMPLETED BY REGISTRATION AGENCY.

22. Registration agency and address _____	23. Signature (Registration Agency) _____	24. Date Registered _____
---	---	---------------------------

25. Apprentice Identification Number (Definition on reverse): _____

For the Privacy Act, the Records Maintenance Authority and OMB Disclosure statements, see reverse side.