

AREA: Central – Louisville area
(Check one) Eastern – Lexington area
 Western – Paducah area

APPLICATION No: _____
(office use only)

KENTUCKY SHEET METAL APPRENTICESHIP PROGRAM

APPRENTICESHIP APPLICATION FORM

Qualifications necessary for an applicant to be considered for the Sheet Metal Apprenticeship

- (1) Be at least 18 years of age.
- (2) Must not have been convicted of any felony.
- (3) Be physically capable of performing the work of the trade.
- (4) Complete this page, the application and **return this form with the following:**
 - a. Birth Certificate or other such document for proof of age
 - b. High School Diploma and transcript of grades, or General Equivalency Diploma (G.E.D.) and test scores along with any High School transcripts.
 - c. Military Form DD-214, if applicable.
 - d. Valid drivers license for the state in which the applicant resides.
- (5) Score a minimum of 25 on the math portion and a minimum of 28 on the reading portion of the test survey.
- (6) Appear for an interview when notified.

If you are accepted into the Sheet Metal Apprenticeship Program, you will be required to:

- (1) Take and pass a drug-screening test.
- (2) Pass a background check.
- (3) Take a physical examination if prescribed by the Local JATC.
- (4) Serve a probationary period of one hundred twenty (120) days.
- (5) Serve a minimum of ten (10) six (6) month semesters and a minimum of six thousand (6000) on the job training hours, including the probationary period, at a Contractor assigned by the JATC.
- (6) Will be regular and punctual in reporting for work/training and in proper work clothing.
- (7) Provide your own transportation to and from the jobsite.
- (8) Work/train under the direction of a Journeyperson and perform the work and responsibilities assigned you in a satisfactory manner.
- (9) Attend related instruction classes regularly and maintain an acceptable average of seventy (70) per-cent or above in those classes.
- (10) Purchase material for those related training classes as required.
- (11) Abide by all current rules and regulations and any future rules and regulations adopted by the JATC.

If you are rejected for the Apprenticeship Program, you may appeal your rejection within fifteen (15) days in writing to the local JATC.

I, the undersigned, have read all of the above rules and regulations and agree to abide by all of the above rules and regulations.

Signature

Date

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All items must be answered. Should you give a false or misleading answer you will be disqualified immediately.

(1) Name of Applicant

Last	First	Middle Initial
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(2) Address

Street Address

City	State	Zip	County
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(3) Home Phone # _____ / _____ / _____ **Cell Phone #** _____ / _____ / _____

(4) Email address _____

(5) Social Security No. last four digits _____ **(6) Date of Birth** ____/____/____

(7) Have you been convicted of a felony? Yes No

(8) Are you a Veteran? Yes No **Branch of Service** _____

Length of Service _____ **Date of Discharge** ____/____/____

(9) Are you currently employed? Yes No

(10) Do you have previous work experience in the Sheet Metal Industry? Yes No

(11) High School Graduate **G.E.D.**

(12) Name and Address of High School

Name	Street Address
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City	State	Zip
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(13) Are you a U.S. Citizen? Yes No

If no, are you authorized to work in the U.S.? Provide document. Yes No

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(14) How did you hear about the Sheet Metal Local 110 Apprenticeship Program?

(15) Work Experience - Please list your employment history **beginning with your present or most recent job.** Include Military experience, summer jobs and part time jobs. List a contact person and telephone number for each place of employment.

Employer: _____ Dates Employed: _____ to _____
Contact Person: _____ Phone No: _____/_____/_____
Description: _____

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Contact person: _____ Phone No: _____/_____/_____
Description: _____

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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: _____

(16) Certification

I hereby certify that the information contained in this application is true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any misrepresentation, falsification or omission of information on this application or any document used to secure employment shall be grounds for rejection of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the Kentucky Sheet Metal Joint Apprenticeship and Training Committee to thoroughly investigate the information on my application.

I understand that full employment is not guaranteed. If this Application is accepted and if I am offered the opportunity to enter into this Apprenticeship Program as an Apprentice, I agree to comply with all current and future rules and regulations of the Kentucky Sheet Metal Joint Apprenticeship and Training Committee.

Apprenticeship in the Sheet Metal Industry requires hard physical labor, working in various weather conditions, working in confined spaces, including but not limited to working off all types of scaffolds, mechanical lifts and ladders of various heights. It also requires learning to safely use and operate tools, equipment and machines related to the Trade including welding and soldering. If you do not feel as though you are capable of attempting to learn this Trade, do not apply.

As a condition of being accepted into the Kentucky Sheet Metal Apprenticeship Program, all individuals are required to pass a pre-employment drug test and a background check.

Signature of Applicant

Date