

NORTHERN NEVADA LABORERS APPRENTICESHIP APPLICATION-PART 1

For Office Use	
Completed application received on this:	
Date:	_____
Time:	_____
By:	_____

State/Government Issued I.D. Social Security Card

SECTION 1

Occupational Title Construction Craft Laborer

Dictionary of Occupational Title Code 869.463.580

Please read the following before you complete the application. Be thorough, if an application is missing information, it may not be considered.

Occupational Description:

Perform tasks associated with work done by Construction Craft Laborers' can include the construction, remodeling, and demolition of buildings, dams, bridges, airports, streets, sewers, tunnels, pipelines, etc. Typically, a laborer may do placement and finishing of concrete, pipelaying, soil compaction, pavement breaking, asphalt placement and highway striping, environmental remediation (including asbestos, hazardous waste, lead and radiation abatement) cutting and burning of steel, rigging and signaling, sandblasting, concrete cutting, tending and assisting carpenters, brick masons, cement masons and plaster masons, landscaping, clean up, flagging and traffic control, and other work coming under the Laborers' Jurisdiction.

Descripción del Oficio:

Realizar tareas asociadas con el trabajo relacionado por un Obrero del Oficio de Construcción, puede incluir la construcción, remodelación y demolición de edificios, presas, puentes, aeropuertos, calles, alcantarillas, túneles, tuberías, etc. Típicamente, un trabajador puede hacer la colocación y el acabado de concreto, instalación de tubería subterránea, compactación de tierra, rotura de pavimento, colocación de asfalto y pintamiento de líneas de autopistas, remediación ambiental (incluyendo asbestos, desechos peligrosos, plomo y radiación) corte y quema de metal, cordaje y señalización de gruas, voladura de arena, corte de concreto, atender y ayudar a carpinteros, albañiles de ladrillo, albañiles de cemento, albañiles de yeso, jardinería, limpieza, señalización y control de tráfico, y otros trabajos bajo la jurisdicción de los Obreros del Oficio de Construcción.

SECTION 2-PERSONAL INFORMATION

Laborers Apprenticeship Application:

Name: _____
Last First MI

Address: _____
Street Address Apt. #

City State ZIP Code

Is this the address where you reside? Yes _____ No _____

Phone #1 _____ **Phone #2** _____ If no phone, check here _____

Email address: _____

Social Security #: _____ **Date of Birth:** _____

Gender: Male Female Choose not to disclose

Ethnicity: Hispanic Non-Hispanic Choose not to disclose

Race: American Indian or Alaskan Native Asian or Pacific Islander
 Black or African American Native Hawaiian or Other Pacific Islander
 White Choose not to disclose : _____

Emergency Contact Name: _____ **Phone#** _____

SECTION 3-DECLARATION

Have you read the description of a construction craft laborer in Section 1? **Yes** ___ **No** ___

Did you note from the description or are you otherwise aware of the physical nature of this work?

Yes ___ **No** ___

Do you declare that you are able to perform the essential functions of a Construction Craft Laborer as listed in the job description with or without reasonable accommodation? **Yes** ___ **No** ___

Do you realize this is a seasonal trade and you could experience an extensive lay-off period i.e. 3 to 4 months annually? **Yes** ___ **No** ___

Do you realize Laborers' work in all extremes of temperature and must be prepared to dress accordingly. Laborers may work at heights, in deep trenches, underground and in confined spaces? **Yes** ___ **No** ___

Do you know that many jobs are in remote areas, which could require you to drive long distances?

Yes ___ **No** ___

Do you have your own transportation? **Yes** ___ **No** ___

Do you understand you must attend related classes which may require you to take off work or attend in the evenings or on weekends? **Yes** ___ **No** ___

Present Employer: _____

Phone #: _____

Address: _____

Job title in present job _____

Please list previous work experience during the past two years:

Do you understand you must submit a request to receive credit for previous experience with this application?

Yes ___ **No** ___

Do you wish to request credit for previous experience? **Yes** ___ **No** ___

Do you understand you must submit evidence to substantiate your claim before you are indentured, or at the time you sign the Apprenticeship Agreement? **Yes** ___ **No** ___

Do you understand the JATC will not grant credit for previous experience until actual on the job performance has been evaluated? **Yes** ___ **No** ___

SECTION 4-CERTIFICATION

This certifies that I meet the minimum qualifications to apply to the Northern Nevada Laborers' Apprenticeship program and have completed this application truthfully and to the best of my knowledge and belief. I understand that any misstatement or omission by me may void or disqualify my application.

I certify that I meet the minimum requirements to apply to the Northern Nevada Laborers Apprenticeship Program (Initial each statement):

_____ I certify that I am at least 18 years of age.

_____ I certify that I am physically able to perform the work of the trade, with or without reasonable accommodation.

_____ I certify that I am legally residing in the United States, genuinely interested in learning the trade, and will comply with all of the terms and conditions of the Apprenticeship Standards and of the JATC.

Applicant Signature _____

Print Name _____

Date _____

If you have questions or need assistance completing this application, please contact us at:

Northern Nevada Laborers' Training School
50 Wild Horse Canyon Dr. Sparks, NV 89434
775-343-0171 (Phone)
775-343-0170 (Fax)
laborerstraining@local169.com

NORTHERN NEVADA LABORERS APPRENTICESHIP APPLICATION-PART 2

Request to Receive Credit for Previous Experience

Proof to verify your claim of previous experience is required before you are evaluated and interviewed. Any records, affidavits, and other bona fide evidence including W-2's, check stubs, etc., must be submitted no later than the time of your interview in order to receive credit.

Please write a description of the type of work you have performed that relates to the Construction Craft Laborers' Apprenticeship. Also, please attach records, affidavits and other bona fide records, such as W-2's or checks stubs to verify that experience.

Company Name: _____

Description of work and how it relates to the work of a Construction Craft Laborer

Company Name: _____

Description of work and how it relates to the work of a Construction Craft Laborer

This certifies that the information submitted with this "Request for Previous Experience" is true and correct to the best of my knowledge and belief. I understand that any misstatement or omission by me may void or disqualify my request for previous experience.

Applicant Signature _____

Print Name _____

Date _____

NORTHERN NEVADA LABORERS APPRENTICESHIP APPLICATION-PART 3

EDUCATION, TRAINING AND MILITARY EXPERIENCE

Secondary School Record:

High School _____

(Circle highest grade completed) 9 10 11 12 Date of Graduation _____

G.E.D. Location _____ Date of Completion _____

Briefly describe any other educational achievement:

College Courses (not trade related) with grade of C or higher

College, vocational, or trade related courses, grade C or higher

Military Record: (check branch)

Army _____ Navy _____ Marine Corps _____ Air Force _____

Reserve _____ Coast Guard _____ National Guard _____

Rank or Rate _____

If you checked "Reserve or National Guard" state your commitment:

Valid and Current Industry Certifications (OSHA 10, First Aid, Flagger, Welding, etc.)

Instructions for submitting proper documentation:

- You must document education with a copy of diploma, transcript, or GED certificate.
- College, vocational, or trade school courses must include transcript and/ or certificates.
- Military record must include a copy of DD-214 long form that indicates experience during service.
- Industry certifications must include certificate or wallet card with date of training and date of expiration. JATC will evaluate each request based on relevance to program.
- All documentation must be submitted with your application to be considered for credit.



Voluntary Disability Disclosure

OMB No. 1205-0223 Expires: 01/31/2020

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

Your name: _____

Date: _____

Why are you being asked to complete this form?

Because we are a sponsor of a registered apprenticeship program and participate in the National Registered Apprenticeship System that is regulated by the U.S. Department of Labor, we must reach out to, enroll, and provide equal opportunity in apprenticeship to qualified people with disabilities.^[1] To help us learn how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for apprenticeship, any answer you give will be kept private and will not be used against you in any way.

If you already are an apprentice within our registered apprenticeship program, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our apprentices at the time of enrollment, and then remind them yearly, that they may update their information. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition. Disabilities include, but are not limited to: blindness, deafness, cancer, diabetes, epilepsy, autism, cerebral palsy, HIV/AIDS, schizophrenia, muscular dystrophy, bipolar disorder, major depression, multiple sclerosis (MS), missing limbs or partially missing limbs, post-traumatic stress disorder (PTSD), obsessive compulsive disorder, impairments requiring the use of a wheelchair, intellectual disability (previously called mental retardation).

^[1] Part 30 – Equal Employment Opportunity in Apprenticeship. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Apprenticeship website at <https://www.doleta.gov/OA/eoo/>.