

SHEET METAL WORKERS' LOCAL 73
APPRENTICE PROGRAM
Application Cover

1. Must be at least 17 years or older and must have a high school diploma or equivalent.
2. The following must be submitted at the time of application:
 - a. A photocopy of your high school diploma, G.E.D. Certificate or equivalent.
 - b. A certified birth certificate (no copies accepted).
 - c. Identification with photo (i.e. Driver's License).
 - d. A photocopy of your DD214 (Armed Forces Discharge) if applicable.
 - e. Official translations of any of the above documents not in English, if applicable.
 - f. Registration fee of \$20.00 cash or money order (no checks). Fee is non-refundable.
3. Successfully complete an aptitude test when required by the Joint Apprenticeship Committee.
4. Before indenture all applicants will be required to pass both a Physical Examination and a Drug Test as required by the Local Joint Apprenticeship Training Committee. The applicant is responsible for payment of the Physical Examination. The Drug Test will be paid by the Local Joint Apprenticeship Training Committee.
5. If you move at any time after you have submitted your application, you must send notice of change of address to the Apprentice Office. Failure to do so may result in your failing to receive notices from the Joint Apprenticeship Committee and may prevent you from becoming an Apprentice.

IF YOU ARE ACCEPTED FOR THE APPRENTICESHIP PROGRAM
YOU WILL BE REQUIRED TO:

1. Report for work on a regular basis.
2. Term of Apprenticeship – Total Period – 5 years consisting of the following:
 - a. Possibility of 42 weeks of probationary apprenticeship;
 - b. 10 week Pre-Apprentice Training Program;
 - c. 3 years of school – (6 semesters) of concentrated training with 22 days per semester in conjunction with on the job training; and
 - d. Remaining two years is on-the-job training.
3. Present a valid driver's license at time of indenture.
4. Provide for your transportation to and from the job site.
5. Work under the direction of a Journeyman on the job site and perform job duties satisfactorily.
6. Attend related training classes regularly and maintain an acceptable average in those classes.
7. Abide by all rules and regulations of the Joint Apprenticeship Training Committee.

I, the undersigned, have read, understand, and agree to abide by the above.

Applicant Signature

Date

Print Name

APPRENTICESHIP APPLICATION FORM FOR THE SHEET METAL INDUSTRY OF COOK AND LAKE COUNTIES, ILLINOIS, LOCAL NO. 73

You are required to answer every question on this form. Write "none" when applicable.

Your ability to complete this questionnaire properly will merit consideration by the Committee in determining your acceptance into the Apprenticeship Training Program.

1. Name: _____
Last First Middle

2. Address: _____
Number & Street City & State Zip Code County

3. Social Security No.: _____ Telephone No.: () _____

USED FOR STATISTICAL PURPOSES ONLY		
4. Date of Birth ____ / ____ / ____	5. Age _____	6. Male <input type="checkbox"/> Female <input type="checkbox"/> Maiden Name _____
7a (RACE – choose one) American Indian or Alaskan Native <input type="checkbox"/> African American/Black <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other <input type="checkbox"/> _____ (please specify)		
7b (ETHNIC GROUP – choose one) Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/>		

8. Veteran Yes No Branch of Service _____
Length of Service _____ Date of Discharge _____ Type of Discharge _____

9. Are you currently employed? Yes No

10. Work Experience:
Give jobs in order, starting with your present or most recent job.
Include military experience, summer jobs and part-time jobs.

EMPLOYER	ADDRESS	TYPE OF WORK	FROM	TO	REASON FOR LEAVING

11. High School Graduate G.E.D. Name and Address of High School _____

12. Additional Educational Background: _____

13. Are you willing to take any and all tests as might be required by the Joint Apprenticeship Committee to determine qualifications for Apprenticeship training? Yes No

Applicant Signature Date

Print Name

How did you hear about the Sheet Metal Workers' Apprentices Program?

PLEASE CHECK ONLY ONE

- Newspaper
- Radio Advertisement
- Local 73 Member Name _____
- Sheet Metal Contractor
- Web-site
- High School Counselor
- Career/Job Fair
- Community Group – Please Specify: _____
- Governmental Official
- Religious Organization – Please Specify: _____
- Chicago Women In Trades
- CISCO
- Construction Employers' Association
- Helmets to Hardhats
- Illinois Department of Employment Security
- New Skill Builders
- Other – Please Specify: _____

SIGNATURE

TODAY'S DATE

PRINT NAME