

646 Mariposa St
Denver, CO 80204

Your registration packet includes:

1. Apprentice Application
 2. U.S. Department of Labor form
 3. Emily Griffith Technical College application and instructions
 4. Blank Intent to Hire form (for your employer to fill out, if needed).
 5. Map with our location.
- ✓ Please fill out all paperwork COMPLETELY. There is some repetition of information, but we are required to keep the hard copies, so they must be filled out.
 - ✓ Fill out paperwork in INK.
 - ✓ Please read the instructions **before** filling out the Emily Griffith Technical College application, the VAK self-assessment, and the blank Intent to Hire form.
 - ✓ Please pay particular attention to items that are starred or check-marked- these items are frequently overlooked by applicants.
 - ✓ Please read the information on Federal Selective Service.
 - If you are NOT registered for Selective Service and are required to be, you MUST register with them prior to CITC'S registration.

WHAT TO BRING TO REGISTRATION

- A current driver's license or state identification card.
- Social Security card
- Affidavit of Hours (Electrical apprentices only) OR
- Letter of Credit (all other trade apprentices) from previous employer(s) if you would like CITC to consider previous work hours as an apprentice.

If applicable:

- Permanent resident card or Authorization to Work card (for non-U.S. citizens).
- OSHA-10 hours safety card.
- Current CPR/First Aid card
- Proof of Selective Service registration (see page 9)

MATH ASSESSMENT

You will be required to take a **math assessment exam** that will include the following topics:

Basic arithmetic: addition, subtraction, multiplication, and division of whole numbers, fraction, and decimals.

Basic Algebraic equations

Basic Geometry

- You will be given one hour in which to take the test.
- No calculators, cell phones, or other assistance (live or technological) is allowed.

If you receive a score of less than 70% you will be **required** to attend a math review class either during the summer or during the first semester of school. You will receive details on class time/day prior to the start of class. We recommend visiting <http://www.gcflernfree.org/math> **PRIOR TO TAKING THE ASSESSMENT** to refresh your skills on the above subjects.

REGISTRATION DATES

You or your company MUST MAKE AN APPOINTMENT for registration.

Please call 303-893-1500

646 Mariposa St
Denver, CO 80204

If you are late for your registration appointment, you WILL NOT be allowed into registration until the next available time or date.

CITC

CONSTRUCTION INDUSTRY
TRAINING COUNCIL
of Colorado, Inc.

Construction Industry Training Council of Colorado, Inc. Apprentice Application

Please Print

Desiring to become a trainee in the trade of _____, I hereby make application for training.

Name: _____ Telephone #: _____
Last, First, Middle Initial

Address: _____ City: _____ State: _____ Zip: _____

Apt # _____

Age: _____ Date of birth: _____ Social Security Number: _____

Name of your current employer: _____ Trade: _____

Email address: _____

Privacy Act Statement Privacy Act of 1974 - P.L. 93-579

The information requested herein is used for program statistical purposes and may not be otherwise disclosed without the express permission of the undersigned.

Please check the appropriate boxes

Race:

- American Indian or Alaskan Native
 Asian or Pacific Islander
 Black
 White

Sex:

- Male
 Female

Veteran Status:

- Vietnam
8/15/64 – 5/7/75
 Other Veteran
 Never A Veteran

Ethnic Group:

- Hispanic Origin
 Not of Hispanic Origin

Highest Education:

- 8th Grade or less
 9th to 12th Grade
 High School Graduate
 GED

Please Circle your answer

Are you able to work in high places? Yes No

Are you able to work in extreme temperatures? Yes No

Have you read, and do you understand the *Apprenticeship Standards*? Yes No

Do you agree to comply with all the policies and instructions of the Construction Industry Training Council? Yes No

Do you agree to serve the full term of training as stated in the *Standards*? Yes No

Please INITIAL the following:

_____ I understand that it is required that I enroll in, and satisfactorily complete, all related instruction courses as scheduled.

_____ I understand that I am required to submit a work report each month covering my training on the job.

_____ I understand that as an apprentice I am under the immediate control and supervision of the Construction Industry Training Council.

_____ I understand that it is my responsibility to report to my job regularly at the designated time and that I must have dependable transportation.

List any job or occupational training you have received, i.e., correspondence courses, trade school, armed forces, apprenticeship, or job training:

Please provide the name of a person whom we may contact in case of an emergency:

1.) Name _____ Relationship _____

Address _____

Phone _____

2.) Name _____ Relationship _____

Address _____

Phone _____

Signature: _____

Date: _____



APPRENTICE REGISTRATION-SECTION II

OMB No. 1205-0223 Expires: 04/30/2015

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 certifications must be obtained from the Office of Apprenticeship (OA) or the recognized State Apprenticeship Agency shown below. (Item 24)

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, 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

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 *Social Security Number (No., Street, City, State, Zip Code, Telephone Number)		Answer Both A and B (Voluntary) (Definitions on reverse)		5. Veteran Status (Mark one) <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Veteran
2. Date of Birth (Mo., Day, Yr.)		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"/> American 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		6. Education Level (Mark one) <input type="checkbox"/> 8th grade or less <input type="checkbox"/> 9th to 12th grade <input type="checkbox"/> GED <input type="checkbox"/> High School Graduate or Greater <input type="checkbox"/> Post Secondary or Technical Training
3. Sex (Mark one) <input type="checkbox"/> Male <input type="checkbox"/> Female		7a. Employment Status (Mark one) <input type="checkbox"/> New Employee <input type="checkbox"/> Existing Employee		
7b. Career Linkage or Direct Entry (Mark one) (Instructions on reverse) <input type="checkbox"/> Job Corps <input type="checkbox"/> YouthBuild <input type="checkbox"/> School-to-Registered Apprenticeship <input type="checkbox"/> HUD/STEP-UP <input type="checkbox"/> Direct Entry: _____		7c. None <input type="checkbox"/> One-Stop Referral <input type="checkbox"/> Trade Adjustment Assistance		
8. Signature of Apprentice Date		9. Signature of Parent/Guardian (if minor) Date		

PART B: SPONSOR: EXCEPT FOR ITEMS 6, 7, 8, 10a. -10c, REMAINDER OF ITEMS REPOPULATED FROM PROGRAM REGISTRATION.

1. Sponsor Program No. CO001890001 Sponsor Name and Address (No. Street, City, County, State, Zip Code) CONSTRUCTION INDUSTRY TRAINING COUNCIL, INC. 646 MARIPOSA STREET DENVER, CO 80204		2a. Occupation (The work processes listed in the standards are part of this agreement). BRICKLAYING (CONSTRUCTION)		2b. Occupation Code: 0052 2b.1. Interim Credentials Only applicable to Part B, 3.b. and 3.c. (Mark one) <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Occupation Training Approach (Mark one) 3a. <input type="checkbox"/> Time-Based 3b. <input type="checkbox"/> Competency-Based 3c. <input type="checkbox"/> Hybrid		4. Term (Hrs., Mos., Yrs.) 6000		5. Probationary Period (Hrs., Mos., Yrs.) 1000	
6. Credit for Previous Experience (Hrs., Mos., Yrs.)		7. Term Remaining (Hrs., Mos., Yrs.)		8. Date Apprenticeship Begins	

9a. Related Instruction (Number of Hours Per Year) 144	9b. Apprentice Wages for Related Instruction <input type="checkbox"/> Will Be Paid <input type="checkbox"/> Will Not Be Paid	9c. Related Training Instruction Source SAME AS #1
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10. Wages: (Instructions on reverse)

10a. Pre-Apprenticeship Hourly Wage \$ 10b. Apprentice's Entry Hourly Wage \$ 10c. Journeyworker's Hourly Wage \$

Check Box 10d. Term <input checked="" type="checkbox"/> Hrs., <input type="checkbox"/> Mos., or <input type="checkbox"/> Yrs.	Period 1	2	3	4	5	6			
	1000	1000	1000	1000	1000	1000			
10e. Wage Rate (Mark one) % <input type="checkbox"/> or \$ <input type="checkbox"/>	45%	50%	60%	70%	80%	90%			

11. Signature of Sponsor's Representative(s) Date Signed		13. Name and Address of Sponsor Designee to Receive Complaints (If applicable) SAME AS #1
12. Signature of Sponsor's Representative(s) Date Signed		

PART C: TO BE COMPLETED BY REGISTRATION AGENCY

1. Registration Agency and Address USDOL/OFFICE OF APPRENTICESHIP • 721 19 TH STREET STE 465• DENVER, CO 80202	2. Signature (Registration Agency)	3. Date Registered
4. Apprentice Identification Number (Definition on reverse):		

Program Definitions and/or Instructions:

Part A

Item 4.a. Definition - Ethnic Group:

Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."

Item 4.b. Definitions - Race:

American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American. A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."

Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Item 7b. Instructions:

Indicate any career linkage (definitions follow) or direct entry. Enter "None" if no career linkage or direct entry applies.

Career linkage includes participation in programs that provided employment, training and other services to adults, youth and dislocated workers. Funds for these activities are provided by the U.S. Department of Labor/Employment and Training Administration (U.S. DOL/ETA) to states and local communities.

One-Stop Referral. Includes Workforce Investment Act (WIA) and Employment Services (ES) participants referred to the Registered Apprenticeship program and/or apprentices that receive WIA funded services that support their participation in their Registered Apprenticeship program.

Trade Adjustment Assistance. Includes trade-affected workers who have become unemployed as a result of increased imports or shifts in production out of the United States.

Job Corps. Youth ages 16-24 years usually receiving services in a residential setting.

YouthBuild. Program transferred from the U.S. Department of Housing and Urban Development (HUD) to U.S. DOL/ETA in September 2006. It assists youth ages 16-24 to obtain education and skill training and advance toward post-secondary education and career pathways in construction and other high growth, high demand occupations while building affordable housing in their communities.

School-to-Registered Apprenticeship. Program designed to allow high school youth ages 16 - 17 to enter a Registered Apprenticeship program and continue after graduation with full credit given for the high school portion.

HUD/STEP-UP. Developed in conjunction with HUD. The program provides the actual apprenticeship experience and the framework for moving into high-skill Registered Apprenticeship.

Direct Entry. A graduate from an accredited technical training school, Job Corps training program, Youth Build Program, or a participant in a military apprenticeship program, any of which training is specifically related to the occupation and incorporated in the Registered Apprenticeship standards. Also, insert the name of the program.

Part B

Item 2.b.1. Interim Credentials. Based on program standards that utilize the competency-based or hybrid training approach, and, upon request of the program sponsor, the credentials are issued as certificates by the Registration Agency. Interim credentials provide certification of competency attainment by an apprentice.

- Item 3. Occupation Training Approach.** The program sponsor decides which of the three training methods to use in the program as follows:
- 3.a. Time-Based Training Approach - apprentice required to complete a specific number of hours of on-the-job learning (OJL) and related training instruction (RTI).
 - 3.b. Competency-Based Training Approach - apprentice required to demonstrate competency in defined subject areas and does not require any specific hours of OJL or RTI; or
 - 3.c. Hybrid-Training Approach - apprentice required to complete a minimum number of OJL and RTI hours and demonstrate competency in the defined subject areas.

Item 4. Term (Hrs., Mos., Yrs.). Based on the program sponsor's training approach. See Part B, Item 4. Available in the terms of the Apprenticeship Standards.

Item 5. Probationary Period (Hrs. Mos., Yrs.) Probation period cannot exceed 25 percent of the length of the program or one year, whichever is shorter.

Item 7. Term Remaining (Hrs., Mos., Yrs.). After Part B, Item 6., Credit for Previous Experience (Hrs., Mos., Yrs.) is determined by the program sponsor. The Term Remaining (Hrs., Mos., Yrs.) in Part B, Item 7., for the apprentice to complete the apprenticeship is based on the training approach indicated above in Part B, Item 3. The term remaining is available in the terms of the Apprenticeship Standards.

Item 10. Wage Instructions:

10a. Pre-Apprentice hourly wage: sponsor enters the individual's hourly wage in the quarter prior to becoming an apprentice.

10b. Apprentice's entry hourly wage (hourly dollar amount paid): sponsor enters this apprentice's entry hourly wage.

10c. Journeyworker's wage: sponsor enters wage per hour.

10d. Term: sponsor enters in each box the apprentice schedule of pay for each advancement period based on the program sponsor's training approach. See Part B, Item 3., and is available in the terms of the Apprenticeship Standards.

10e. Percent or dollar amount: sponsor marks one.

Note: 10c. If the employer is signatory to a collective bargaining agreement, the journeyworker's wage rate in the applicable collective bargaining agreement is identified. Apprenticeship program sponsors not covered by a collective bargaining agreement must identify a minimum journeyworker's hourly wage rate that will be the basis for the progressive wage schedule identified in Item 10e. of this agreement.

10d. The employer agrees to pay the hourly wage rate identified in this section to the apprentice each period of the apprenticeship based on the successful completion of the training approach and related instructions outlined in the Apprenticeship Standards. The period may be expressed in hours, months, or years.

10e. The wage rates are expressed either as a percent or in dollars and cents of the journeyworker's wage depending on the industry.

Example (Time-based approach) - 3 YEAR APPRENTICESHIP PROGRAM

<u>Term</u>	<u>Period 1</u>	<u>Period 2</u>	<u>Period 3</u>	<u>Period 4</u>	<u>Period 5</u>	<u>Period 6</u>
hrs., mos., yrs.	1000 hrs.	1000 hrs.	1000 hrs.	1000 hrs.	1000 hrs.	1000 hrs.
%	55	60	65	70	80	90

Example (Time-based approach) - 4 YEAR APPRENTICESHIP PROGRAM

<u>Term</u>	<u>Period 1</u>	<u>Period 2</u>	<u>Period 3</u>	<u>Period 4</u>	<u>Period 5</u>	<u>Period 6</u>	<u>Period 7</u>	<u>Period 8</u>
hrs., mos., yrs.	6 mos.	6 mos.	6 mos.	6 mos.	6 mos.	6 mos.	6 mos.	6 mos.
%	50	55	60	65	70	75	80	90

Item 13. Identifies the individual or entity responsible for receiving complaints (Code of Federal Regulations, CFR, Title 29 part 29.7(k)).

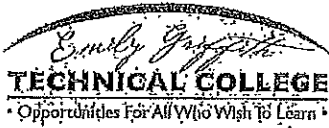
Part C.

Item 4. Definition: The Registered Apprenticeship Partners Information Data System (RAPIDS) encrypts the apprentice's social security number and generates a unique identification number to identify the apprentice. It replaces the social security number to protect the apprentice's privacy.

*The submission of your social security number is requested. The apprentice's social security number will only be used to verify the apprentice's periods of employment and wages for purposes of complying with the Office of Management and Budget related to common measures of the Federal job training and employment programs for measuring performance outcomes and for purposes of the Government Performance and Results Act. The Office of Apprenticeship will use wage records through the Wage Record Interchange System and needs the apprentice's social security number to match this number against the employers' wage records. Also, the apprentice's social security number will be used, if appropriate, for purposes of the Davis Bacon Act of 1931, as amended, U.S. Code Title 40, Sections 276a to 276a-7, and Title 29 CFR 5, to verify and certify to the U.S. Department of Labor, Wage and Hour Division, that you are a registered apprentice to ensure that the employer is complying with the geographic prevailing wage of your occupational classification. Failure to disclose your social security number on this form will not affect your right to be registered as an apprentice. Civil and criminal provisions of the Privacy Act apply to any unlawful disclosure of your social security number, which is prohibited.

The collection and maintenance of the data on ETA-671, Apprentice Registration – Section II Form, is authorized under the National Apprenticeship Act, 29 U.S.C. 50, and CFR 29 Part 29.1. The data is used for apprenticeship program statistical purposes and is maintained, pursuant to the Privacy Act of 1974 (5 U.S.C. 552a.), in a system of records entitled, DOL/ETA-4, Registered Apprenticeship Partners Information Management Data System (RAPIDS) at the U.S. Department of Labor, Office of Apprenticeship. Data may be disclosed to a State Apprenticeship Agency to determine an assessment of skill needs and program information, and in connection with federal litigation or when required by law.

Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average five minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond is required to obtain or retain benefits under 29 USC 50. Send comments regarding this burden or any other aspect of this collection of information including suggestions for reducing this burden to the U.S. Department of Labor, Office of Apprenticeship, 200 Constitution Avenue, N.W., Room N-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0023.)



Emily Griffith Technical College
 1860 Lincoln Street
 Denver, CO 80203
 Phone: 720-423-4702

**Career and Technical Education
 Application for Admissions-Apprenticeship**

Apprenticeship Location
 Apprenticeship Site _____ Program of Interest _____

Personal Information
 Social Security Number _____ Refuse to Provide
**NOTE: If you refuse to provide your SSN, you will need to fill out a Social Security Refusal Form.*

Last Name _____ First Name _____ Middle Name _____
 Date of Birth (mm/dd/yyyy) _____
 E-mail Address _____ Phone Number _____

Address Information
 Street _____ City _____
 State _____ Zip/Postal Code _____ Country _____ (if not U.S.)

Biographical Information
 Gender Male Female Unclassified Prefer not to answer
 Marital Status Married Single
 Ethnicity Hispanic or Latino Not Hispanic or Latino
 Race American Indian Asian Black or African American Native Hawaiian or Pacific Islander White
 Hispanic/Latino Other

Military Service

Are you a displaced homemaker? Yes No Are you active duty military? Yes No
 Are you economically disadvantaged? Yes No Are you a veteran of the military? Yes No
 Are you a single parent? Yes No Are you a spouse or child of a veteran? Yes No

Selective Service
 Are you registered for Selective Service? Yes No I am female OR older than 25

Please see instruction packet for Selective Service information.

Residency Information
 Country of Citizenship _____ Citizenship Status US Citizen Nonresident Alien? Non US Citizen
 Alien Registration Number (if applicable) _____ Resident Card Issue Date _____
 Expiration Date _____

Please fill out completely. If you were born in Colorado and have never left, put your date of birth.

Colorado Residency Information

Beginning date of continuous physical presence in Colorado _____

Length of absence from Colorado in the last two years 0-1 Month More than 1 but less than 3 months 3 Months or more

Colorado Income Tax Filed Last Year Last two years None of the above

Have you been continuously employed in Colorado for at least one year or more? Yes No

Have you been registered to vote in Colorado for at least one year or more? Yes No

In what state is your State ID or Driver's License issued? _____

Enter your State ID or Driver's License Number _____

State ID/Driver's License issue date _____ State ID/Driver's License expiration date _____

Certification

Student Records Disclosure

In compliance with federal FERPA regulations, the College may release the following as 'directory information' without student consent: name, program of study, date of attendance and certificate/degree awarded. Students requesting that such information be withheld must complete the appropriate form requesting specifically which directory information should be suppressed. For additional information on the Family Educational Rights and Privacy Act, please see the current Emily Griffith program catalog.

Certification of Information

Please read the following and type your name below: "I hereby certify that, to the best of my knowledge, the information furnished in this application is true and complete without intent of evasion or misrepresentation. I understand the above information is submitted under penalty of perjury and false or misrepresented data is sufficient cause for tuition reclassification or dismissal." "I understand that the answers to the questions in the Residency Information section of this application are required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this application is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received."

Name: _____ Signature: _____ Date: _____



STATEMENT OF INTENT TO HIRE AND STATEMENT OF ELIGIBILITY

The applicant named below has met the qualifications for acceptance into the Pool of Eligible Apprentices.
This letter certifies that the applicant is eligible for referral to any Participating Employer.

Name _____ Date of Hire _____

Address _____

City, State and Zip Code _____

Social Security # _____ Phone _____

Trade _____

Current Wage Rate _____ Date of Birth: _____

I (We) herewith submit this Statement of Intent to Hire for the apprentice applicant named above and request that this applicant be referred to us for employment.

Our work situation is such that we intend and expect to be able to employ this person on a continuous basis through the usual probationary period based on his/her satisfactory performance. Unsatisfactory performance or other circumstances of the trade beyond our control may make it necessary to suspend our training and employment of this applicant.

Company _____ Today's Date _____

Company Representative _____

Address _____

City, State and Zip Code _____

Telephone _____

Signature and Title of Authorized Company Official

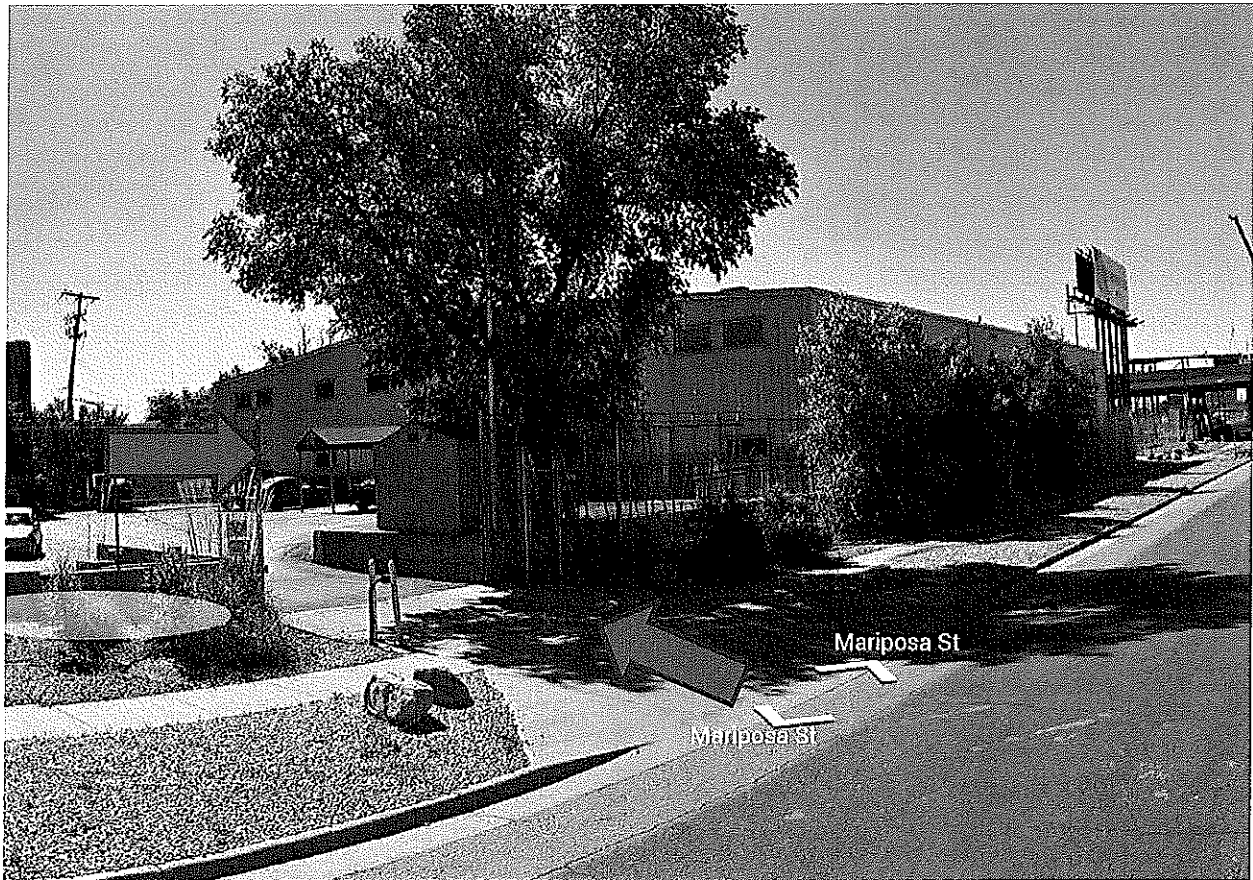
If the applicant is already employed, please complete and return this form.

CITC will invoice the Participating Employer for the registration fee on behalf of the Office of Apprenticeship and Training (OAT). Upon receipt of payment and appropriate documents all paperwork will be processed and the apprentice will be registered.

If CITC referred the applicant to you they must return this form in person and complete the registration process.

Please call should you have any questions or concerns.

We are located just south of 7th Avenue and Mariposa Street, on the EAST side of the street. There is a chain-link fence surrounding our parking lot.

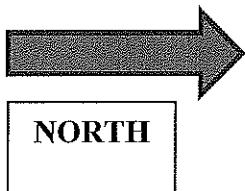
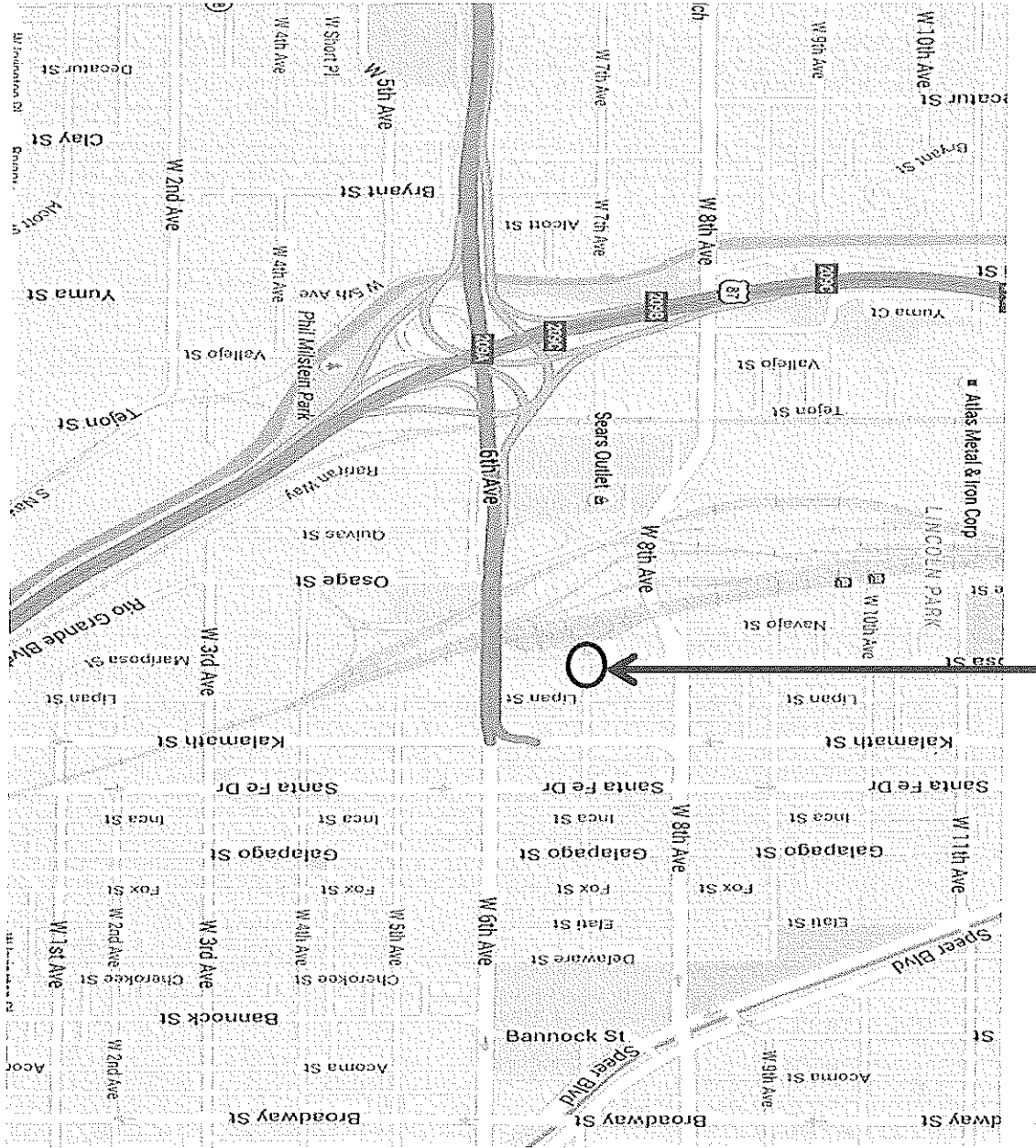


Source: <https://www.google.com/maps/views/explore>

North



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Denver, CO 80204



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