

THE APPLICATION PACKET

- Apprenticeship Application (2 Pages) must be completed by all applicants.
- Supplemental Information Form (1 Page) must be completed by all applicants.
- Work History Sheet (1 Page) must be completed by all applicants.

MINIMUM QUALIFICATIONS FOR APPRENTICESHIP

- Be a minimum of 18 years of age.
- Be at least a high school graduate, or have a GED, or have a two-year associate degree or higher.
- Show evidence of successful completion of: one full year of high school algebra I with a grade of C or better, or one post high school algebra I course with a C or better.
- Present evidence of a valid driver's license.

COMPLETING THE APPLICATION FORMS

- Please leave "Applicant Application No." blank. This number will be assigned by the JATC when you return your application.
- Print neatly using a blue or black ink pen to complete your application.
- There is a non-refundable \$20.00 fee in the form of a money order, cashier's check or credit card.
- Provide an enlarged copy of your driver's license (we'll make a copy if you hand carry the application to the JATC office).
- Return application to the JATC office M-F between 9:00 AM 4:00 PM, or mail to:

JATC 4501 Montbel PL NE Albuquerque, NM 87107

THE APPLICATION PROCESS

- It is the applicant's responsibility to provide all documentation to the JATC within thirty (30) days of the date the application is submitted.
- If consideration for military training and/or experience is desired, a DD-214 must be submitted.
- After submitting application, applicant must contact their High School and Post High School to have them fax or mail transcripts directly to the JATC. A transcript sealed by the school is acceptable to be hand-carried to the JATC by the applicant. Original GED paperwork will be copied when submitted to the JATC by the applicant.
- Once all requirements are met, a certified letter will be sent to applicant scheduling an Electrical Trade's Aptitude Test developed and validated by the American Institutes for Research.
- To qualify for an Interview, applicant must obtain a score of "4" or higher on the aptitude test.
- There is a waiting period of six months to retest if you are unsuccessful in passing the Aptitude Test.
- If applicant passes the Aptitude Test, a certified letter will be sent to applicant scheduling an Interview.
- After the Interview, a certified letter will be sent to rank applicant on a "Qualified Applicant List." Applicant may be selected off this list anytime during the two years.
- When selected off the "Qualified Applicant List," applicant will be called by the JATC, offered a position in the apprenticeship program, and sent for a drug test.

- A certified letter will then be sent to applicant scheduling orientation.
- Please keep your phone number and address current with this office.

CONTACT INFORMATION

• If you have any questions regarding the application forms or the application process, please call (505) 341-4444. Website: www.nmjatc.org. FAX (505) 341-0067.

APPRENTICESHIP APPLICATION

NM 1770 SPONSOR PROGRAM NUMBER OR I.D. CODE

FORM	FOR:	(Darken	Only	One)	١

■ Wireman ○ Residential

O Lineman O Telecommunications

С

	rint I	etter	s (IN	CAPS)	and												ED EN							ponse	s, Wh	ere R	tequir	ed.	
	NAM																			MON			DAY			YEAR			
Last																		ate of pplica				/			/				
First															Ī		Ī "	iddle											
Address		T							$\overline{1}$	\forall					T														
City			Ī				<u> </u>		\dagger	寸					T	\dagger	1			Sto	ate		$\frac{1}{1}$	Zip					
Ho: Pho			T	T	1)	T	T		-			Ī	<u> </u>	1			ial Secu	rity				-			-				
rnc		AE CH	ANGI	. Plea	ر ا		the i		hat wi	II an		on d			or to		pts tha	e vou		:. :::	• ic d	: 660.	ne sh	an vo		sent.	L		
Last		T						lane i	T		T	T					First	,,,,	303111	.,	113 0			,0	J. p. c	30111			
Re	quire	d Inf	ormat	ion M	ust B	e Pro	vided	to Con	plete	this	Appli	icatio	on.	十		Deg	ree 2 (S	econo	High	est De	gree	Earne	ed, if o	any)					
-								te Your																					
								ed Ove								Majo	or or												
O A.	l be	lieve	l can r	neet al	l minir	mum q	valific	ations f	or app	rentic	eship						T		П	П						\neg	T	T	
○ B.								on to v			ave o	ıt leas	st			Scho	ol												
O C.	l am	ı curr	ently p	erform	ning el	lectric	al con	structio	n work	for a	n ele	ctrica	ıl																
				becan contr			to a t	union co	ntract.								you rece									Yes	<u>_</u>	No	0
O D.	l am	amo	na the	50%.	or mo	re, wł	o sian	ed auth	orizat	ion ca	rds w	vhile					nigher m						ed scho	ool?					
O D .	wor	king f	or an		cal co	ntract		ing an o									ndicate Alg					ed: Jebro	ıll						
													_				⊃ Ged		-		-		metry						
O E.								cipate i ogram.	n, the						6.		⊃ Cal							Math urses o		Yes	0	No	0
○ F.	l am	atter	npting	to tran	nsfer i	into th	is prog	gram fro	om and	ther I	BEW.	/NEC	Α				g during									103	_	110	_
	regi	stere	a appr	enrices		UC			rade). 						6a. l	ist cour	ses an	d/or t	raining	g com	pletec	d:						
2. Fill in	the C	val to	indic	ate the				educatio	n you	have	comp	leted	:			-													_
<10 O	10)	11	12	13	3	14	15	16	1	7	18		18						BA	GKG	RC	NUC	D					1
B. Are								s O		Vo (O		7	7.	Have	ou serv	ed in	the US	milita	ry?					Yes	0	No	0
If NO), do	ou ho	ıve a (GED?				s O		No (7a. I	f YES, h	ow Lo	ng?					ln	Mont	hs			
l. List C	ollege	Degi	ree(s)	earned	(PRIN	1T with	nin the	boxes	below)):						7b. \	Vhich Br	anch?	Arı	my O) Nav	/v C) Air	Force	0	ــا Marin	es O		
Degr	e 1 (F	lighe:	t Deg	ree Ea	rned)	_		г														rd O			litary				
																7c. L	ist whic	n milito	ary tro	ining :	schoo	ls you	comp	leted,	if any.				_
Majo		Γ	Τ			Г				T	Т				۰	-													_
School																(Convi	ou ever	ll not d	utom	atically	disqu		you.)			Yes	0	No	0
500			Т			Γ		ПТ	Т	\top						If YES,	explain	the co	onvicti	on:									_

0 (13



APPL	CAN	T API	PLICA	TION	1 NO.	

APPLICATION NUMBER ENTERED BY JATC 👄 🔝

9.	Do you have electrical construction work experience?	Yes 🔿	No O		STATEMENTS OF UNDERSTANDING
	74. 11 / 20, 110 11 111211, 1112111	Months			Darken the Oval • for Each of the Statements (A through I) Below t Indicate Your Knowledge and Understanding. E: If You Need Clarification On Any Item Do NOT Hesitate to Ask.
	Do you have other construction work experience?	Yes O	No O		
11.	Do you have any electrical/electronic work experience?	Yes 🔾	N₀ O	A. O	I am aware that it is my responsibility to keep this program informed of any change in my address or phone number.
12.	Have you applied with this apprenticeship program before?	Yes 🔾	No O		I have read and understand the basic qualifications for entry into
	12a. If YES, how many times?	Ti	imes	B. O	the program.
	Are you now, or have you ever been, a registered apprentice?	Yes 🔾	No O	C. O	I understand that I must furnish certain specific documentation to provide evidence that I meet the qualifications required for entry into the pool of eligible candidates for this apprenticeship.
	13a. If 'Yes', list apprenticeship sponsor or employer:				
	13b. If 'Yes' are you still an active apprentice in that program?	Yes O	No O	D. O	I understand it is my responsibility to see that all OFFICIAL transcripts and other required documents are provided in a timely manner. If I fail to do so, my application will become null and void
14.	Do you have a valid Driver's License?	Yes 🔿	No O	E. O	I understand that interviews for qualified applicants will be conducted in the order in which applications are completed.
15.	Do you have a Commercial Driver's License (CDL)?	Yes 🔿	No O	F. O	I understand that any false information provided as part of my
	15a. If YES, what class CDL do you have? A C		Other O	1.0	application shall be just cause for denial of oral interview, or termination of my apprenticeship indenture agreement, should I be selected for the program.
16.	List the main reason or reasons, you are applying for this a	ipprenticeship p	orogram.	G. O	I understand that an incomplete or unsigned application form will <u>NOT</u> be processed.
				н. О	I understand that if selected, I may be required to complete examinations which may include a physical examination or a drug
17.	Are you physically and mentally able to safely perform or learn to safely perform essential functions of the job either with or without reasonable accommodations?	Yes 🔾	N₀ O		test, if required by the sponsor; either before and/or after signing an indenture.
18.	Are you able to get to and from work at job sites anywhere within the geographical area that this apprenticeship program covers?	Yes O	N₀ O	1.0	I understand that only this <u>ORIGINAL</u> application form will be processed, and that Photocopies are <u>NOT</u> acceptable.
19.	Are you able and willing to attend all related classroom training as required to complete your apprenticeship?	Yes O	No O	my u	have darkened all the above (A thru I) to indicate inderstanding, and state that all information
20.	Are you able to climb and work from ladders, scaffolds,	Yes 🔾	No O		ided on this form is true and accurate. I hereby
	poles and towers of various heights?	103 🔾	110 0		permission to all former employers and references I to disclose any information concerning my past
21.	Are you able to crawl and work in confined spaces such as attics, manholes and crawlspaces?	Yes O	No O	empl	oyment and/or qualifications, unless I have indicated rwise(23a.). I agree that any false statements made
22.	Are you able to read, hear, and understand instructions and warnings?	Yes 🔿	N₀ O	for d	e on this application form shall constitute grounds isqualification of my selection or grounds for my
	WORK HISTORY				arge, if false information is discovered after being ted for apprenticeship.
	You <u>Must</u> Attach a Work History Summa Indicating your present and previous emplo				
23.	Are you presently employed?	Yes 🔾	N₀ O	1	hereby apply for an apprenticeship indenture with
	23a. If YES, do you request that we NOT contact your present employer at this time?	Yes O	N₀ O	of th	ponsor and agree that if selected, I will abide by all e sponsor's Standards, Rules and Policies and the nture (Apprenticeship Agreement).
24.	Did you have any part-time or summer jobs while attending school?	Yes 🔿	N₀ O	SIGN	NED:
25.	Do you have the legal right to work in the United States of America?	Yes 🔾	N₀ O		D PROVIDE DATE:

Supplemental Information Form

Marking Instructions

For optimum accuracy, please print all numbers in black or blue ink. Avoid contact with the edge of the box. Completely fill in the oval(s) that reflect the correct response. All Responses should look like the examples below.

Numeric Example: 0 1 2 3 4 5 6 7 8 9

Oval Example:

roor Application 140.10.									
uppe	number-righ rentice	nt cor	ner o	f the					

Your Application No. is.

Apprenticeship Application EEOC Supplemental Information Form

THIS APPRENTICESHIP SPONSOR IS COMMITTED TO EQUAL OPPORTUNITY FOR ALL APPLICANTS. THE RECRUITMENT, SELECTION, EMPLOYMENT AND TRAINING OF APPRENTICES DURING THEIR APPRENTICESHIP, SHALL BE WITHOUT DISCRIMINATION BECAUSE OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, GENDER OR AGE - EXCEPT THAT THE APPLICANT MUST MEET THE MINIMUM AGE REQUIREMENT. THE JATC DOES NOT, AND WILL NOT, DISCRIMINATE AGAINST A QUALIFIED INDIVIDUAL WITH A DISABILITY BECAUSE OF THE DISABILITY OF SUCH INDIVIDUAL. WE RESPECTFULLY REQUEST THAT YOU RETURN THIS FORM ALONG WITH YOUR COMPLETED APPLICATION FORM FOR APPRENTICESHIP.

— Please Complete the Following —

THE INFORMATION VOLUNTARILY PROVIDED BELOW IS SIMPLY FOR EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) PURPOSES. THIS INFORMATION WILL ASSIST US IN OUR EFFORTS TO PROVIDE ACCURATE INFORMATION IN COMPLIANCE WITH EEOC REGULATIONS AND REQUIREMENTS.

Race: (DARKEN ONLY ONE) O American Indian or Alaskan No	ative	Ethnic Group: (DARKEN ONLY ONE) O Hispanic Orgin			
○ Asian or Pacific Islander		○ Not of Hispanic Orgin			
○ Black					
○ White		Gender: ○ Male ○ Female			
How did you become aware of t	his apprenticeship o	opportunity?			
○ Word-of-Mouth	 Teacher/Instru 	uctor			
○TV	Outreach Org	ganization			
○ Career Day	○ Radio				
○ Posted Announcement	○ Newspaper N	AME OF PAPER:			
○ Guidance Counselor	Other				

WORK HISTORY

NAME

LAST	FIRST	MIDDLE	Email Address
			NT EMPLOYER. PROVIDE DATES (FROM AND TO)
O SHOW HOW LONG YOU WE	RE EMPLOYED WITH EACH EMPL	OYER.	
mployer:			
address:			
ity:			
tate:	ZIP:		
rom:		To:	
Phone:		-	
iive job title, work perfo	rmed and indicate reason	for leaving:	
mployer:			
ddress:			
ity:			
tate:	ZIP:		
rom:	ZIF.	To:	
hone:			
Give job title, work perfo	rmed and indicate reason	for leaving:	
mployer:			
ddress:			
ity:			
tate:	ZIP:		
rom:		To:	
hone:			
Give job title, work perfo	rmed and indicate reason	for leaving:	