

# CARPENTERS APPRENTICESHIP

## INSTRUCTIONS FOR APPRENTICESHIP APPLICATION

In order to meet the basic requirements for the apprenticeship programs each applicant must:

1. Be 18 years of age or older.
2. Be an Alaska resident for a minimum of 30 days prior to the closing date of accepting applications.
3. Possess a high school diploma or equivalent .
4. Possess a valid driver's license.
5. Possess a social security card.
6. Possess DD-214 if you have been in the military.
7. Legally eligible to work in the United States of America.
8. **IF ACCEPTED AS AN APPRENTICE, YOU MUST BE WILLING TO SUBMIT TO (AND PASS) A DRUG AND ALCOHOL SCREENING AND COMPLY WITH ALL DRUG AND ALCOHOL POLICIES OF THE TRAINING CENTER.**
9. Be mentally and physically capable of performing the essential functions of the occupation without endangering the health and safety of themselves and/or fellow workers.
10. Be able to read, write, and speak the English language in order to comprehend instructions on the job, in related training classes, and to ensure personal and coworker safety on the job.
  - a. Persons with hearing or speech impairments may contact RelayAlaska at their TDD/TTY number, 800-770-8973, and they will assist you in contacting the training center.

**The following documentation must be submitted with your application (APPLICATIONS WITHOUT ALL OF THE REQUIRED DOCUMENTATION LISTED BELOW WILL NOT BE ACCEPTED):**

1. Copy of valid driver's license.
2. Copy of social security card.
3. Proof of Alaska residency (permanent fund receipt, hunting/fishing license, piece of mail, etc.).
4. Copy of high school diploma/GED AND transcripts (can be unofficial).
5. Copy of DD-214, (if applicable).

**PLEASE RETURN COMPLETED APPLICATIONS AND PAPERWORK TO:**

**ANCHORAGE TRAINING CENTER - EMAIL: [ANCTC@swmsctf.org](mailto:ANCTC@swmsctf.org) PH: 907-344-1541**

**FAIRBANKS TRAINING CENTER - EMAIL: [FBTC@swmsctf.org](mailto:FBTC@swmsctf.org) PH: 907-452-4626**

**\*APPLICATION MUST BE FILLED OUT ELECTRONICALLY TO BE ACCEPTED\***

## APPLICANT INFORMATION

Trade(s) applying for:

- Carpenter       Piledriver/Diver       Industrial Scaffold       Millwright

Training Center applying for:

- Fairbanks Training Center       Anchorage Training Center

Name: \_\_\_\_\_

(FIRST)

MIDDLE

LAST)

My Preferred Name Is: \_\_\_\_\_ Gender:  Male  Female  Do not wish to answer

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Social Security No: \_\_\_\_\_ Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Valid Driver's License:  Yes  No #: \_\_\_\_\_ ST: \_\_\_\_\_ Do you have reliable transportation:  Yes  No

AK Resident:  Yes  No If yes, how long: \_\_\_\_\_ Legally eligible to work in the U.S.:  Yes  No

Are you able to obtain a security clearance (i.e.; base access, TWIC card, etc.):  Yes  No

## MILITARY SERVICE

Are you a Veteran:  Yes  No Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

## EDUCATION

Do you have a high school diploma or G.E.D.:  Yes  No If yes, Graduation/Completion Date: \_\_\_\_\_

Do you have college experience:  Yes  No Degree/Major(s): \_\_\_\_\_

## ADDITIONAL EDUCATION

Have you attended any of the following: Apprenticeship, Alaska Works Partnership, Job Corps, Trade School, Vocational College, or another trade program?  Yes  No

Did you complete the program:  Yes  No Number of weeks/months/years completed: \_\_\_\_\_

If yes, name and location of school(s): \_\_\_\_\_

Course(s)/trade studied: \_\_\_\_\_

Have you ever been expelled from an apprenticeship program:  Yes  No

If yes, what program and why: \_\_\_\_\_

Have you ever been a member of the United Brotherhood of Carpenters (UBC):  Yes  No

Do you currently work for a signatory contractor:  Yes  No If yes, who: \_\_\_\_\_

## ADDITIONAL INFORMATION

Work in the trades requires hard physical labor, repetitively lifting over 50 pounds, working in confined spaces, remote sites, climbing, working at heights, long hours, and frequent exposure to the elements. Are you physically and mentally able to learn and safely perform the work of this trade, either with or without reasonable accommodation?

Yes  No

Are you able and willing to attend all related classroom instruction as required to complete your apprenticeship, a minimum 4-year commitment?

Yes  No

Why are you interested in applying for this apprenticeship: \_\_\_\_\_

Briefly describe any construction experience you have: \_\_\_\_\_

List any trade skills, knowledge, certifications, etc., that you may have related to this/these trades: \_\_\_\_\_

## APPRENTICESHIP APPLICATION EEOC SUPPLEMENTAL INFORMATION FORM

The organization 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, sex, or age – except that applicants must be 18 years of age. Please return this form along with your completed application 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:

- Alaska Native/ American Indian
- Asian
- Hawaiian/ Pacific Islander
- African American/ Black
- Caucasian

#### Are you of Hispanic or Latino Heritage:

- Yes
- No

#### How did you hear about our program:

- AGC: We Build Alaska
- Alaska Works Partnership
- Career Day/Job Fair
- School/ Guidance Counselor
- Union member: \_\_\_\_\_
- Business Rep.: \_\_\_\_\_
- Posted Announcement: \_\_\_\_\_
- Other: \_\_\_\_\_

**If you experience a disability, are you able to perform the essential functions of this job or training program with or without reasonable accommodation?**

- I do not have a disability
- Yes, I can perform the essential functions
- No, I cannot perform the essential functions

## **DISCLAIMER AND SIGNATURE**

**Completeness and accuracy of information:** I certify that all of the statements and information given now or hereafter given by me, in support of my application for apprenticeship, is true and complete to the best of my knowledge. I understand that any false or misleading information will disqualify me from consideration for apprenticeship or subject me to immediate dismissal from the apprenticeship program at any time throughout my apprenticeship.

**Authorization and release of information:** I authorize the verification of any information provided during the application process by appropriate individuals, companies, organizations, or agencies. I also authorize them to release such information as necessary, including my prior disciplinary record and drug test results, without any obligation to provide me with written notice of disclosure. I hereby release all parties involved from any liability resulting from such inquiries and disclosures. A photocopy or electronic reproduction of this authorization is legally binding and may be relied upon.

I acknowledge that I have read, understood, and accepted the above statement in its entirety, and have had the opportunity to ask questions regarding any aspect of this application and that I accept the above terms.

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**Signature**

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**Date**