

Nashville Electrical Joint Apprenticeship and Training Committee

310 Fesslers Lane

Nashville, Tennessee 37210

Mailing Address:

P.O. Box 290095

Nashville, TN 37229-0095

Telephone: (615) 242-9950

Fax: (615) 242-0329



Dear Sir or Madam:

Thank you for showing an interest in the Nashville Electrical Joint Apprenticeship and Training Committee.

You will find in this document an application along with instructions and a high school transcript request form.

If you decide to bring this application back to the NEJATC, please do so Monday through Thursday between 1:30 and 3:00 p.m.

IMPORTANT: Please download and read the entire application information. You can find the application information at http://www.nejatc.org/application/NEJATC_Information.pdf. It is important to become familiar with the NEJATC's Policy Statement especially as you will be questioned about it during the interview process.

We welcome any calls you make to this office if you have questions or need assistance with the application process.

Thank you,

Lisa Porter

Executive Assistant to the Director

Nashville Electrical Joint Apprenticeship and Training Committee

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INSTRUCTIONS FOR APPLICATION PROCESS

1. Download and print the entire application packet and fill out the application entirely.
The application packet consists of the following documents:
 - Signature sheet for receiving the NEJATC application information. **Please note:** You can find the application information at http://www.nejatc.org/application/NEJATC_Information.pdf.
 - Application request form
 - Application (2 pages)
 - Work History Summary Sheet
 - Supplemental Information Form
2. Read below “A SPECIAL NOTE REGARDING TRANSCRIPTS”.
3. Along with a \$20.00 money order or cashier’s check (no personal checks or cash), mail the complete application packet and transcripts back to:

Nashville Electrical JATC
PO Box 290095
Nashville TN 37229-0095
4. Applicants showing the Algebra 1 credit (or equivalent) on official transcripts will be scheduled for the next aptitude test and will be notified by mail of the date and time.
5. Applicants should feel free to call this office regarding their application.
6. Applications filled out incompletely will be returned to applicant for completion and will not be processed until all information is gathered.

A SPECIAL NOTE REGARDING TRANSCRIPTS

All applicants are required to supply this apprenticeship program with a high school transcript. If an applicant has received a GED, this apprenticeship program needs the GED test scores and the high school transcript. If an individual took Algebra 1 in college but not in high school, we will need a transcript from the high school and college. Remember, all **transcripts must be official copies and cannot be faxed to us**. A transcript request form has been included in the application packet for applicant to fill out and mail to their school. Applicants can mail application in without transcripts as applicants have 60 days from date the apprenticeship office receives application to get transcripts in. If transcript is available, it is acceptable to mail it in with the application.

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By signing below, I am attesting that I have received from the Nashville Electrical Joint Apprenticeship and Training Committee an applicant information packet that contains a copy of their ***Policy Statement and a Job Description for a Journeyman-Wireman*** on the date indicated below:

Print Name

Signature

Date

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Apprenticeship Application Request Form

Name _____ Date _____

Address _____ Phone Numbers (AM/PM) _____

City _____

St/Zip _____

APPLICATION FEE

IN ORDER TO RECEIVE THE APPLICATION FORM FOR THIS APPRENTICESHIP PROGRAM, AN APPLICATION FEE OF **\$20.00** MUST ACCOMPANY THIS APPRENTICESHIP APPLICATION REQUEST FORM. MAKE YOUR MONEY ORDER OR CASHIER'S CHECK PAYABLE TO: **NEJATC**.

*Documented economic hardships may be considered for waiver on a case by case basis. Contact the JATC for additional information.

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 THE APPLICANT MUST BE AT LEAST 17 YEARS OF AGE TO APPLY AND 18 YEARS OF AGE AT THE TIME OF INDENTURE. THE JATC DOES NOT, AND WILL NOT, DISCRIMINATE AGAINST A QUALIFIED INDIVIDUAL WITH A DISABILITY BECAUSE OF THE DISABILITY OF SUCH INDIVIDUAL.

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9. Do you have electrical construction work experience? Yes No
- 9a. If yes, how many months? Months

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10. Do you have other construction work experience? Yes No
11. Do you have any electrical/electronic work experience? Yes No
12. Have you applied with this apprenticeship program before? Yes No
- 12a. If YES, how many times? Times

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13. Are you now, or have you ever been, a registered apprentice? Yes No
- 13a. If "Yes", list apprenticeship sponsor or employer: _____
- 13b. If "Yes" are you still an active apprentice in that program? Yes No
14. Do you have a valid Driver's License? Yes No
15. Do you have a Commercial Driver's License (CDL)? Yes No
- 15a. If YES, what class CDL do you have? A B Other

INTERESTS & ABILITIES

16. List the main reason or reasons, you are applying for this apprenticeship program.

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 No
18. Are you able to get to and from work at job sites anywhere within the geographical area that this apprenticeship program covers? Yes No
19. Are you able and willing to attend all related classroom training as required to complete your apprenticeship? Yes No
20. Are you able to climb and work from ladders, scaffolds, poles and towers of various heights? Yes No
21. Are you able to crawl and work in confined spaces such as attics, manholes and crawlspaces? Yes No
22. Are you able to read, hear, and understand instructions and warnings? Yes No

WORK HISTORY

You Must Attach a Work History Summary Sheet Indicating your present and previous employers, if any.

23. Are you presently employed? Yes No
- 23a. If YES, do you request that we NOT contact your present employer at this time? Yes No
24. Did you have any part-time or summer jobs while attending school? Yes No
25. Do you have the legal right to work in the United States of America? Yes No

STATEMENTS OF UNDERSTANDING

You Must Darken the Oval for Each of the Statements (A through I) Below to Indicate Your Knowledge and Understanding.
NOTE: If You Need Clarification On Any Item Do NOT Hesitate to Ask.

- A. I am aware that it is my responsibility to keep this program informed of any change in my address or phone number.
- B. I have read and understand the basic qualifications for entry into the program.
- C. 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.
- D. 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.
- E. I understand that interviews for qualified applicants will be conducted in the order in which applications are completed.
- F. I understand that any false information provided as part of my application shall be just cause for denial of oral interview, or termination of my apprenticeship indenture agreement, should I be selected for the program.
- G. I understand that an incomplete or unsigned application form will NOT be processed.
- H. I understand that if selected, I may be required to complete examinations which may include a physical examination or a drug test, if required by the sponsor; either before and/or after signing an indenture.
- I. I understand that only this ORIGINAL application form will be processed, and that Photocopies are NOT acceptable.

I have darkened all the above (A thru I) to indicate my understanding, and state that all information provided on this form is true and accurate. I hereby grant permission to all former employers and references listed to disclose any information concerning my past employment and/or qualifications, unless I have indicated otherwise(23a.). I agree that any false statements made by me on this application form shall constitute grounds for disqualification of my selection or grounds for my discharge, if false information is discovered after being selected for apprenticeship.

I hereby apply for an apprenticeship indenture with this sponsor and agree that if selected, I will abide by all of the sponsor's Standards, Rules and Policies and the Indenture (Apprenticeship Agreement).

SIGNED: _____
APPLICANT MUST
ALSO PROVIDE DATE: _____

Work History Summary Sheet

Name: _____ Application #: _____

Date: _____

Employment History:

1. Company:
Address:
Phone number: ()
Duration of employment: From: _____ To: _____
Job Title and description:
2. Company:
Address:
Phone number: ()
Duration of employment: From: _____ To: _____
Job Title and description:
3. Company:
Address:
Phone number: ()
Duration of employment: From: _____ To: _____
Job Title and description:
4. Company:
Address:
Phone number: ()
Duration of employment: From: _____ To: _____
Job Title and description:
5. Company:
Address:
Phone number: ()
Duration of employment: From: _____ To: _____
Job Title and description:

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:



Your Application No. is:

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This number is located at the upper-right corner of the Apprenticeship Application Form

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)*

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

Ethnic Group: *(DARKEN ONLY ONE)*

- Hispanic Orgin
- Not of Hispanic Orgin

Gender: Male Female

How did you become aware of this apprenticeship opportunity?

- | | |
|---|--|
| <input type="radio"/> Word-of-Mouth | <input type="radio"/> Teacher/Instructor |
| <input type="radio"/> TV | <input type="radio"/> Outreach Organization |
| <input type="radio"/> Career Day | <input type="radio"/> Radio |
| <input type="radio"/> Posted Announcement | <input type="radio"/> Newspaper NAME OF PAPER: _____ |
| <input type="radio"/> Guidance Counselor | <input type="radio"/> Other _____ |

THIS FORM WILL NOT BECOME PART OF YOUR PERSONAL FILE. IT WILL BE MAINTAINED IN A SEPARATE FILE, USED ONLY FOR EEOC AND AFFIRMATIVE ACTION REPORTING PURPOSES

22745



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DATE: _____

Registrar or Principal

Name of School

Street Address of School

City, State and Zip Code of School

Dear School Official:

For the purpose of completing admissions requirements, please mail a complete transcript of my records to:

**Nashville Electrical J.A.T.C.
P.O. Box 290095
Nashville, TN 37229-0095**

I last attended your school in: _____

For Identification purposes, my social security number is: _____

My date of birth is: _____

If there is any charge for this service, please bill me at the address below:

Name

Address

City, State and Zip Code

Signature

NOTE: Transcripts should be sent after final grades are recorded.

If your high school work was completed by a G.E.D., please submit a copy of your G.E.D. scores and your high school transcript.

IT IS THE APPLICANT'S RESPONSIBILITY TO MAIL THIS FORM TO THE APPROPRIATE INSTITUTION OR SCHOOL

IMPORTANT NOTE: WE DO NOT ACCEPT FAXED TRANSCRIPTS.