

EMPLOYER APPLICATION

To

Train and Employ Electrical Construction Apprentices

(Reproduce or copy this form as necessary)

_____ Area Electrical (Construction) JAC
(Local)

This form must be filled out in its entirety and submitted to the **NECA/IBEW Apprenticeship and Training Office** at the above address.

1. Name of Firm _____ Phone () _____

Contact Person(s) (Please print) _____

Email(s) _____

2. Business Address _____ FAX () _____

_____ Employer ID# _____ - _____

3. Number of **Apprentices being requested** by your firm: _____

4. Number of **Apprentices employed** by your firm on this date: _____

5. Number of **Journeyworkers employed** by your firm on this date: _____

6. Number of **Journeyworkers employed by your firm at least 39 weeks in the last calendar year:** _____

7. **Years Experience** in the Electrical Construction Industry. **As a contractor:** _____

As a Journeyworker: _____

8. Years your firm has been in **Business in Wisconsin:** _____

If in Business less than One Year, please indicate starting date: _____/_____/_____

9. Indicate if your employees are covered by the following **insurance:** **YES** **NO**

Worker's Compensation: _____

Unemployment Compensation: _____

If so, what is your U.C.#? _____

10. Is your firm subject to a **Collective Bargaining Agreement?** _____

Local Union # _____

11. Are you or your firm a member of an **Employer's Association?** _____

Name of Association: _____

12. Can your firm assure an Apprentice **continuous employment** without displacing

Journeyworkers? _____

13. Have you read the **Apprenticeship Standards and Policy Statements** for this area? _____

14. Have you ever been qualified by another JAC to train apprentices? _____

If yes, name of the JAC who qualified you: _____

I HEREBY AGREE TO ACCEPT AND ABIDE BY THE APPRENTICESHIP STANDARDS FOR THIS AREA AND THE DICTATES OF THE JOINT APPRENTICESHIP COMMITTEE.

Employer Signature _____

Date _____