WISCONSIN ELECTRICAL APPRENTICESHIP & TRAINING

EMPLOYER APPLICATION

To

Train and Employ Electrical Construction Apprentices

(Reproduce or copy this form as necessary)

La Crosse (14L) Electrical Joint Apprenticeship Committee (JAC)

This form must be filled out in its entirety, **with only the local jurisdiction's workforce numbers of the local committee,** and submitted to the **NECA/IBEW Apprenticeship and Training Office** at the address below.

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 of 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 for less than One Year, please indicate the 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 ensure continuous employment for an apprentice without displacing Journeyworkers?	☐	☐
13. Have you read this area's local Apprenticeship Standards and Policy Statements?	☐	☐
14. Does your firm have policies against discrimination, harassment, and retaliation of employees?	☐	☐
Does the policy include procedures for filing, investigating, and resolving complaints?	☐	☐
15. Have all your Employees who interact with apprentices received **Harassment Training**?	☐	☐
16. Have you ever been qualified by another JAC/JATC to train apprentices?	☐	☐
If yes, the name of the JAC/JATC(s) who qualified you: _____		

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

Employer Signature _____ **Date** _____

2730 Dairy Drive
Suite 102
Madison, Wisconsin 53718
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A joint endeavor of Wisconsin Chapter
of NECA & IBEW Local Unions
14, 127, 158, 159, 388, 430, 577, & 890