

Carpenter Apprenticeship Application

APPLICATION INSTRUCTIONS:

- Fill out **all** of the information (Please print)
- Mail to:

**Attn: Application Department
Carpenters Training Committee
2350 Santa Rita Road
Pleasanton, CA 94566
(925) 462-9644**



NorCalCarpenters-Training.org

Valid April 4, 2022 - March 2024

Office Use Only

ARL# _____

Date _____

Social Security #: _____
LAST NAME

NOTE: We are required to collect your Social Security # by the California Division of Apprenticeship Standards (DAS). All application information is kept in strict confidence by Nor Cal Carpenters Training

FIRST NAME

Name: _____

Apartment/Room/Space

Address: _____

City: _____ **State:** _____

Zip: _____ **County:** _____

Area Code

The division of California that you live in (e.g., Alameda, Contra Costa).

Phone: _____

One number where you can **always** receive calls or messages.

***Email:** _____

*Email address is optional.

1. Do you have a High School Diploma, GED, or *Equivalent? YES NO

*Equivalent qualifications are explained in the "Minimum Qualifications" of this application.

*Please understand: If you have answered NO, your application will be returned. If you have answered YES, we will require that you present documentation prior to program entry.

2. Last High School you attended: _____

Located in City: _____ **State:** _____ **Did You Graduate?** YES NO

3. Are you a housing authority resident? YES NO **Name of housing authority:** _____

4. Do you have a current California Driver License? YES NO **5. Are you a Veteran with an honorable discharge?** YES NO

Sign Your Name Here: **X** _____

This application is no good without your signature.

Please use an X to mark the following boxes that apply:

A. Gender:

- Male
 Female
 Unstated

B. Race or Ethnic Derivation: (Check one box only)

- American Indian/Alaskan Native Black (Not of Hispanic Origin) Hispanic
 Asian or Pacific Islander Filipino White (Not of Hispanic Origin)

Defined in Sec. 2(i) California Plan for Equal Opportunity in Apprenticeship (Cal. Labor Code, Ch. 4, Div. 3, Sec. 151)

Note: Refusal to accept a referral in the craft or geographical area you have selected in C and D will void your application, and you will need to reapply.

C. I will accept referral to the following Craft Apprenticeship Training Program(s):

- Acoustical Installers Scaffold Erectors Hardwood Floorlayers Shinglers
 Carpenters Drywall/Lathers* Insulators

D. I will accept referral to the following geographical area(s):

- Alameda County San Francisco County
 Contra Costa County San Mateo County

*Applicants must accept referral to all geographical areas listed.

