

Associated Builders and Contractors San Diego Chapter 13825 Kirkham Way | Poway, CA 92064 Phone: (858) 513-4700 | Fax: (858) 513-2373 | Email: reception@abcsd.org

APPRENTICESHIP PROGRAM APPLICATION

Date:		Time:				
Please indicate whi	ch of the foll	owing apprenti	ceship program	s you wish to appl	y for. (<u>Check on</u>	ly one)
☐ Sheet Metal [□ Plumbing	☐ Pipefitting	□ Electrical	☐ Electronic Syst	ems Technician ((Sound Tech)
Legal Name:						
	Last		First		Middle	
Social Security #:	-	-	Are you	u 18 years of age o	rolder? 🗆 Yes	s □ No
Address:						
	Street Addr	ress	Apt #	City	State	Zip Code
Mobile Phone:			Ho	ome Phone:		
Email Address:						
Are you currently e Name of Present Em		Yes □ No		e contact your pres Employer's Phon		
Did a contractor ref	-					
Have you applied for	or this progra	am before?	Yes □ No	If yes, when?		
Do you have reliabl	e transporta	tion to get to m	ultiple job sites	and school?	Yes □ No	
Electrical Applicant ☐ Yes ☐ No	ts <u>only</u> : have	you completed	a semester of A	Algebra and receive	ed at least a "C"	grade?
Do you anticipate c (Students that "test up"					□ Yes □ No	
Are you legally auth	norized to wo	ork in the United	I States? □ Ye	es 🗆 No		
Have you been enro	olled in any s	tate approved a	pprentice traini	ing program before	? □ Yes □ I	No
If yes: Where?	-					
Please indicate how	vou learned	d of our Annrent	ticeship Trainin	g Program:		
☐ Referral / Word	=		_	nool Name:		
☐ Internet Search				ocation:		
☐ Other – please s	specify					

Date From	<u>Date To</u>	Name & Address of Company	<u>Supervisor</u>	Telephone Number
Responsibilities			Position	Reason for Leaving
				-
<u>Date From</u>	Date To	Name & Address of Company	<u>Supervisor</u>	Telephone Number
Responsibilities			<u>Position</u>	Reason for Leaving
<u>Date From</u>	Date To	Name & Address of Company	<u>Supervisor</u>	Telephone Number
Responsibilities			<u>Position</u>	Reason for Leaving
<u>Date From</u>	<u>Date To</u>	Name & Address of Company	<u>Supervisor</u>	<u>Telephone Number</u>
Responsibilities			Position	Reason for Leaving
				-
EDUCATION		Name & Location of School	<u>Did you Graduate</u> # of Your or receive a degree Attention	
High School:			or certificate?	
College:				
Frade School:				
Vocational sub	ojects or s	pecial study related to the construc	ction industry:	
drug test prior the employers participation in I declare unde true and correct	nat if I am a to placeme I consent the progra r penalty o	accepted into the Associated Builders a ent with an employer. I further underst to such drug testing and understand t am for a period of six months. If perjury under the laws of the State of est of my knowledge and belief. I furthe and that prospective employers may sha	and that subsequent drug tests may hat a positive result will disqualify me California that the information supplier authorize investigation of all stater	be required by the program or e from placement and further ied by me in this application is
Applicant Si	gnature		Date	

^{**}Applications may be delivered, mailed, emailed or faxed to the ABC office and must include a copy of your HS Diploma or GED. Electrical applicants must also include a transcript that shows a semester of Algebra with a "C" grade or better**



Associated Builders and Contractors San Diego Chapter

13825 Kirkham Way | Poway, CA 92064

Phone: (858) 513-4700 | Fax: (858) 513-2373 | Email: reception@abcsd.org

Voluntary Affirmative Action Census

Date:									
Legal Name:									
Last		First				MI			
Please mark the appropriate categories below:									
□ White			Black or African American			Hispanic			
☐ American Indian or Alaskan Native									
☐ Asian or Pacific Islander									
☐ Asian - Asian Indian ☐ Asian — Chinese ☐ Asian — Cambodian ☐ Asian — Filipino ☐ Asian — Hmong ☐ Asian — Japanese ☐ Asian — Korean ☐ Asian — Laotian ☐ Asian — Malaysian ☐ Asian — Pakistani ☐ Other	☐ Asian – Chinese ☐ Asian – Cambodian ☐ Asian – Filipino ☐ Asian – Hmong ☐ Asian – Japanese ☐ Asian – Korean ☐ Asian – Laotian ☐ Asian – Malaysian ☐ Asian – Pakistani		Asian - Sri Lankan Asian – Taiwanese Asian – Thai Asian – Vietnamese Native Hawaiian – Fijian Native Hawaiian – Guamanian Native Hawaiian – Hawaiian Native Hawaiian – Samoan Native Hawaiian - Tongan						
SEX		Male	_ F	emale					
DISABLED		YES	□ N	10					
SPECIAL DISABLED/VET		YES	□ N	10					
VETERAN		YES		10					
VIETNAM ERA VETERAN		YES		10					