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|  | |  | | --- | | **Program Registration and Apprenticeship Agreement** |   C:\Users\mknapps\Pictures\LWC Logo.jpgC:\Users\mknapps\Pictures\LWC-AP Logo small.jpg | | | | | | | | | | | | | | | | | | | | | |
| **Warning: This agreement does not constitute a certification under Title 29, CFR, Part 5 for the employment of the apprentice on Federally financed or assisted construction projects. Current certifications must be obtained from the Louisiana Workforce Commission – Apprenticeship Division (Item 24)** | | | | | | | | | The program sponsor and apprentice agree to the terms of the Apprenticeship Standards incorporated as part of this Agreement. The sponsor will not discriminate in the selection and training of the apprentice in accordance with the Equal Opportunity Standards in Title 29 CFR Part 30, and Executive Order 11246. This agreement may be terminated by either of the parties, citing cause(s), with notification to the registration agency, in compliance with Title 29, CFR, Part 29 | | | | | | | | | | | | |
| **PART A: TO BE COMPLETED BY APPRENTICE. NOTE TO SPONSOR: PART A SHOULD ONLY BE FILLED OUT BY APPRENTICE.** | | | | | | | | | | | | | | | | | | | | | |
| 1. Name (Last, First, Middle) and Address \*Social Security Number (voluntary)           -  -  (No., Street, City, State, Zip Code, Telephone Number) | | | | | | | | | Answer Both A and B (Voluntary)  (Definitions on reverse)  6. a. Ethnic Group (Mark one)  Hispanic or Latino  Not Hispanic or Latino  b. Race (Mark one or more)  American Indian or Alaska native  Asian  Black or African American  Native Hawaiian or other  Pacific Islander  White  Choose to Not Identify | | | | | | | | 7. Education Level (Mark one)  8th grade or less  9th to 12th grade  GED  High School Graduate or  Greater  Post Secondary or Technical  Training | | | | |
| 2. Date of Birth (Mo., Day, Yr.) | | | | | 5. Disability Status\* (Voluntary)  Disabled  Non-Disabled    Choose to Not Identify | | | |  | | | | | | | |  | | | | |
| 3. Sex (Mark one)  Male  Female | | | | |  | | | |  | | | | | | | |  | | | | |
| 4. Veteran Status (Mark one)  Non-Veteran  Veteran | | | | |  | | | |  | | | | | | | |  | | | | |
| 8. Career Linkage or Direct Entry (Mark one) (Instructions on reverse)  None  Adult Dislocated Worker  Youth    Job Corps  HUD/STEP-UP  Incumbent Worker  Other  Direct Entry: | | | | | | | | | | | | | | | | | | | | | |
| 9. Signature of Apprentice Date | | | | | | | | | 10. Signature of Parent/Guardian (if minor) Date | | | | | | | | | | | | |
| **PART B: SPONSOR: EXCEPT FOR ITEMS 6, 7, 8, 10a. -10c, REMAINDER OF ITEMS REPOPULATED FROM PROGRAM REGISTRATION.** | | | | | | | | | | | | | | | | | | | | | |
| 1. Sponsor Program No.  Sponsor Name and Address (No. Street, City, Parish, State, Zip Code) | | | | | | | | | 2a Occupation (The work processes listed in the standards are part of this agreement). | | | | | | | | | 2b Occupation Code:  2b.1. Interim Credentials  Only applicable to Part B, 3.b. and 3.c. (Mark one)  Yes  No | | | |
|  | | | | | | | | | 3. Occupation Training  Approach (Mark one)  3a.  Time-Based  3b.  Competency-Based  3c.  Hybrid | | | | | 4. Term  (Hrs., Mos., Yrs.) | | | | 5. Probationary Period  (Hrs., Mos., Yrs.) | | | |
|  | | | | | | | | | 6. Credit for Previous  Experience (Hrs., Mos., Yrs.) | | | | | | | 7. Term Remaining  (Hrs., Mos., Yrs.) | | | 8. Date Apprenticeship Begins | | |
| 9a. Related Instruction  (Number of Hours Per Year) | | | 9b. Apprentice Wages for Related Instruction  Will Be Paid  Will Not Be Paid | | | | | | | | | 9c. Related Training Instruction Source | | | | | | | | | |
| 10. Wages: (Instructions on reverse) | | | | | | | | | | | | | | | | | | | | | |
| 10a. Pre-Apprenticeship Hourly Wage $       10b. Apprentice’s Entry Hourly Wage $      10c. Journeyworker’s Hourly Wage $ | | | | | | | | | | | | | | | | | | | | | |
| Check Box | | Period 1 | | 2 | | 3 | 4 | | | 5 | | | 6 | | 7 | | 8 | | | 9 | 10 |
| 10d. Term  Hrs.,  Mos., or Yrs. | |  | |  | |  |  | | |  | | |  | |  | |  | | |  |  |
| 10e. Wage Rate  (Mark one) %  or $ | |  | |  | |  |  | | |  | | |  | |  | |  | | |  |  |
| 11. Signature of Sponsor’s Representative(s) Date Signed | | | | | | | | | | | 13. Name and Address of Sponsor Designee to Receive Complaints  (If applicable) | | | | | | | | | | |
| 12. Signature of Sponsor’s Representative(s) Date Signed | | | | | | | | | | |  | | | | | | | | | | |
| **PART C: TO BE COMPLETED BY REGISTRATION AGENCY** | | | | | | | | | | | | | | | | | | | | | |
| 1. Registration Agency and Address  Joseph Hollins, Director of Apprenticeship  Louisiana Workforce Commission – Apprenticeship Division  1001 N.23rd Street Baton Rouge, LA 70804 | | | | | | | | 2. Signature (Registration Agency) | | | | | | | | | | | 3. Date Registered | | |
| 4. Apprentice Identification Number (Definition on reverse): | | | | | | | | | | | | | | | | | | | | | |

**Program Definitions and/or Instructions**:

**Part A**

**Item 5. Definition :Disability.** With respect to an individual: (1) A physical or mental impairment that substantially limits one or more major life activities of such individual; (2) A record of such an impairment; or (3) Being regarded as having such an impairment.

*Disclosure of this information will not affect your right to be registered as an apprentice.*

**Item 6.a. Definition - Ethnic Group:**

**Hispanic or Latino.**  A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The

term, “Spanish origin,” can be used in addition to “Hispanic or Latino.”

**Item 6.b. Definitions - Race:**

**American Indian or Alaska Native**. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

**Asian**. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**Black or African American**. A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander**. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**White**. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Item 8. Instructions:**

Indicate any career linkage (definitions follow) or direct entry. Enter “None” if no career linkage or direct entry apply. Enter “Incumbent Worker” if the individual before becoming an apprentice was currently employed full-time by the sponsor or entities participating in the apprenticeship program. Career linkage includes participation in programs that provided employment, training and other services to adults, youth and dislocated workers. Funds for these activities are provided by the U.S. Department of Labor/Employment and Training Administration to states and local communities through their Business & Career Solutions Centers.

**Adult.**  Also includes individuals participating in Native American Programs, and/or Migrant and Seasonal Farmworker Programs.

**Youth.** Includes Youth ages 16-21 years, and other concentrated Youth programs in designated areas.

**Dislocated Worker.** Includes an individual that has been terminated or laid off and is unlikely to return to the industry or occupation. It also includes a displaced homemaker who has been providing unpaid services to family members in the home, is no longer supported, and is unemployed or underemployed.

**Job Corps.** Youth ages 16-24 years usually receiving services in a residential setting.

**HUD/STEP-UP.** Developed in conjunction with the U.S. Department of Housing and Urban Development (HUD). The program provides the actual apprenticeship experience and the framework for moving into high-skill Registered Apprenticeship.

**Direct Entry**. A graduate from an accredited technical training school, Job Corps training program or a participant in a military apprenticeship program, any of which training is specifically related to the occupation and incorporated in the Registered Apprenticeship standards. Also, fill in the name of the program.

**Part B**

**Item 2b. Occupation Code Instructions:**

Enter DOT or ONET code as specified in trade pages/work processes in the Standards of Apprenticeship previously approved by the Louisiana Workforce Commission – Apprenticeship Division.

**Item 2.b.1. Interim Credentials.** Based on program standards that utilize the competency-based or hybrid training approach, and, upon request of the program sponsor, the credentials are issued as certificates by the Registration Agency. Interim credentials provide certification of competency attainment by an apprentice.

**Item 3. Occupation Training Approach.** The program sponsor decides which of the three training methods to use in the program as follows:

3.a. Time-Based Training Approach - apprentice required to complete a specific number of hours of on-the-job learning (OJL) and related training instruction (RTI).

3.b. Competency-Based Training Approach - apprentice required to demonstrate competency in defined subject areas and does not require any specific hours of OJL or RTI; or

3.c. Hybrid-Training Approach - apprentice required to complete a minimum number of OJL and RTI hours and demonstrate competency in the defined subject areas.

**Item 8. Date Apprenticeship Begins Instructions:**

Apprentices CANNOT be entered into RAPIDS (Registered Apprenticeship Program Information System) more than 45 days beyond the start date indicated in #16. Therefore, it is strongly advised that this date is recorded accurately and the form submitted to the Louisiana Workforce Commission – Apprenticeship Division within 35 days of this date.

**Item 10. Wage Instructions:**

10a. Pre-Apprentice hourly wage: sponsor enters the individual’s hourly wage in the quarter prior to becoming an apprentice.

10b. Apprentice’s entry hourly wage (hourly dollar amount paid): sponsor enters this apprentice’s entry hourly wage.

10c. Journeyworker’s wage: sponsor enters wage per hour.

10d. Term: sponsor enters in each box the apprentice schedule of pay for each advancement period based on the program sponsor’s training approach. See Part B, Item 3., and is available in the terms of the Apprenticeship Standards.

10e. Percent or dollar amount: sponsor marks one.

**Note:** 10c. If the employer is signatory to a collective bargaining agreement, the journeyworker’s wage rate in the applicable collective bargaining

agreement is identified. Apprenticeship program sponsors not covered by a collective bargaining agreement must identify a minimum

journeyworker’s hourly wage rate that will be the basis for the progressive wage schedule identified in Item 10e. of this agreement.

10d. The employer agrees to pay the hourly wage rate identified in this section to the apprentice each period of the apprenticeship based on the successful completion of the training approach and related instructions outlined in the Apprenticeship Standards. The period may be expressed in hours, months, or years.

10e. The wage rates are expressed either as a percent or in dollars and cents of the journeyworker’s wage depending on the industry.

**Example (Time-based approach) - 3 YEAR APPRENTICESHIP PROGRAM**

**Term Period 1 Period 2 Period 3 Period 4 Period 5 Period 6**

hrs., mos., yrs. 1000 hrs. 1000 hrs. 1000 hrs. 1000 hrs. 1000 hrs. 1000 hrs.

% 55 60 65 70 80 90

**Example (Time-based approach) - 4 YEAR APPRENTICESHIP PROGRAM**

**Term Period 1 Period 2 Period 3 Period 4 Period 5 Period 6** **Period 7** **Period 8**

hrs., mos., yrs. 6 mos. 6 mos. 6 mos. 6 mos. 6 mos. 6 mos. 6 mos. 6 mos.

% 50 55 60 65 70 75 80 90

**Item 13.** Identifies the individual or entity responsible for receiving complaints (Code of Federal Regulations, CFR, Title 29 part 29.7(k)).

**Part C.**

**Item 4. Definition:** The apprentice identification number is a unique number generated by RAPIDS (the Louisiana Workforce Commission – Apprenticeship Division database), which is used to identify the apprentice. It replaces the social security number to protect the apprentice’s privacy.

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| \*The submission of your social security number is requested. The apprentice’s social security number will only be used to verify the apprentice’s periods of employment and wages for purposes of complying with the Office of Management and Budget related to common measures of the Federal job training and employment programs for measuring performance outcomes and for purposes of the Government Performance and Results Act. The Office of Apprenticeship will use wage records through the Wage Record Interchange System and needs the apprentice’s social security number to match this number against the employers’ wage records. Also, the apprentice’s social security number will be used, if appropriate, for purposes of the Davis Bacon Act of 1931, as amended, U.S. Code Title 40, Sections 276a to 276a-7, and Title 29 CFR 5, to verify and certify to the U.S. Department of Labor, Wage and Hour Division, that you are a registered apprentice to ensure that the employer is complying with the geographic prevailing wage of your occupational classification. Failure to disclose your social security number on this form will not affect your right to be registered as an apprentice. Civil and criminal provisions of the Privacy Act apply to any unlawful disclosure of your social security number, which is prohibited. |
| The collection and maintenance of the data on ETA-671, Apprentice Registration – Section II Form, is authorized under the National Apprenticeship Act, 29 U.S.C. 50, and CFR 29 Part 29.1. The data is used for apprenticeship program statistical purposes and is maintained, pursuant to the Privacy Act of 1974 (5 U.S.C. 552a.), in a system of records entitled, DOL/ETA-4, Registered Apprenticeship Partners Information Management Data System (RAPIDS) at the U.S. Department of Labor, Office of Apprenticeship,. Data may be disclosed to Louisiana Workforce Commission to determine an assessment of skill needs and program information, and in connection with federal litigation or when required by law. |

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| Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average five minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond is required to obtain or retain benefits under 29 USC 50. Send comments regarding this burden or any other aspect of this collection of information including suggestions for reducing this burden to the U.S. Department of Labor, Office of Apprenticeship, 200 Constitution Avenue, N.W., Room N-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0023.) |