



Plumbers & Steamfitters Local 400 Youth Apprenticeship Program



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Application for Employment with a Signatory Contractor

An Equal Opportunity Employer: All signatory contractors are equal opportunity employers. This application will be forwarded to them for employment consideration. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

Date: _____

STUDENT INFORMATION:

Name: _____
First Middle Initial Last

Address: _____
Street City State Zip Code

Phone Number: _____ Email Address: _____

Are you currently a student, at least 16 years of age, enrolled at a school with a work-based learning program sponsored by an accredited school, the technical college system or Department of Workforce Development's Youth Apprenticeship Program? Yes No

Do you have reliable transportation to and from work? Yes No

What date are you available to start work: _____

Hours Available to Work: Full Time, Summer Employment
 Part Time, School Year Employment (indicate the hours you are available to work below)
(check all that apply)

	Mon.	Tue.	Wed.	Thur.	Fri.	Sat.
Start Time:						
End Time:						

PARENT/GUARDIAN INFORMATION:

Name: _____
First Last

Phone Number: _____ Email Address: _____

SCHOOL INFORMATION:

Name of High School: _____ Phone Number: _____

School's Youth Apprenticeship Program Administrator:

Youth Apprenticeship Coordinator _____
First Name Last Name

Guidance Counselor _____
First Name Last Name

Other: _____
Title First Name Last Name

Phone Number: _____ Email Address: _____

PREFERRED POSITION/TRADE:

Please select desired Youth Apprenticeship below:

Pipe Welding (Fabrication Shop) HVAC Service Steamfitter Plumber

PLEASE LIST ANY VOLUNTEER OR COMMUNITY SERVICE ACTIVITIES YOU HAVE PARTICIPATED IN (SCHOOL, COMMUNITY, ETC.).

Activity	Organization	Date(s) of Service

PLEASE LIST ANY EDUCATIONAL COURSES, TRAINING PROGRAMS, AND/OR WORK EXPERIENCES YOU HAVE WHICH MAY AID IN EVALUATING YOUR APPLICATION FOR THE YOUTH APPRENTICESHIP PROGRAM.

Course, Program and/or Experience	Date(s) of Completion

PLEASE LIST ANY RESPONSIBILITIES AND/OR OBLIGATIONS THAT YOU HAVE AFTER NORMAL SCHOOL HOURS (I.E. SPORTS, WORK, SCHOOL OR COMMUNITY ACTIVITIES, ETC.).

Responsibility and/or Obligation	Start & End Time	Frequency

PLEASE EXPLAIN WHY YOU ARE APPLYING FOR THE YOUTH APPRENTICESHIP PROGRAM (MINIMUM OF 2 PARAGRAPHS IN LENGTH). A SUCCESSFUL ESSAY WILL INCLUDE INFORMATION AS TO WHY A YOUTH APPRENTICESHIP WILL CONTRIBUTE TO YOUR OVERALL ACADEMIC AND FUTURE CAREER GOALS. YOU MAY ALSO WANT TO SHARE THE RELATED/TECHNICAL COURSEWORK YOU HAVE TAKEN IN YOUR YA AREA OF INTEREST. *If additional room is needed, attach additional page(s).

A minimum of one (1) formal Letter of Recommendation from a (non-relative) instructor, school staff member (counselor, principal, etc.), or current employer must accompany your Youth Apprenticeship Application.

Signature of Student

Date

You will be receiving a confirmation email within 1 business day of submission from career@ua400.org; check your inbox and/or spam email messages. If you do not receive the email, please call 920-462-0400, ext. 0.