

AZ OPERATING ENGINEERS APPRENTICESHIP
"PLEASE PRINT"

Application #: _____ Application Location: Casa Grande Training Site
Application Returned: _____ Testing Date: _____
Verbal Test: _____ Math Test: _____ Comprehensive Test: _____ Total Score: _____

THIS BOX IS TO BE USED ONLY BY THE APPRENTICESHIP OFFICE.

How did you hear about the AZ OE Apprenticeship Program? _____

CLASSIFICATION: _____ Equipment Operator _____ Heavy Duty Mechanic _____ Plant Equipment Operator

NAME: (Last) _____ (First) _____ (Middle) _____

MAILING ADDRESS: _____ PHONE: _____
NUMBER STREET APT OR LOT #

_____ CITY STATE ZIP CODE

SOCIAL SECURITY NUMBER: _____ - _____ - _____ DATE OF BIRTH: _____ / _____ / _____

RACE (For BEO records ONLY): Anglo: _____ Black: _____ Mexican American: _____
Indian: _____ Tribe: _____ Other: _____

IN CASE OF EMERGENCY – NOTIFY: _____ PHONE: _____
(Use someone's name and number not at your address)

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EDUCATION:

Year graduated for High School: _____ if not, Years completed: _____

High School Equivalency (GED) _____ Date issued: _____

Last High School Attended: (Name) _____ (City) _____ (State) _____

College Attended: (Name) _____ (City) _____ (State) _____

Semesters Completed: _____ Major: _____ Reason For Leaving: _____

Name of Correspondence or Other School _____ Course Taken _____ Date & Length _____

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MILITARY SERVICE:

Branch of Service: _____ Service Period: _____

Date of Discharge: _____ Rank at Discharge: _____

National Guard: _____ Active Reserves: _____ Meeting Nights: _____

(OVER)

WORK RECORD: (Of at least 6 months):

Present Employer: _____ Wage: _____

Previous Employers:

Name	Type of Work	Location	Dates

GENERAL INFORMATION:

1. Have you ever submitted applications for other Apprenticeships? (YES) _____ (NO) _____

If yes, explain: _____

2. Have you ever been indentured as an Apprentice? (YES) _____ (NO) _____

If yes, explain: _____

3. In relation to working as an Operating Engineer' Apprentice, I consider my physical condition to be:

Excellent: _____ Good: _____ Fair: _____ Poor: _____

4. Will you accept training placements anywhere in the state of Arizona? (YES) _____ (NO) _____

5. Do you have suitable transportation? (YES) _____ (NO) _____

6. Why are you applying for the Arizona Operating Engineers Apprenticeship and Training Systems?

7. Do you understand that all applicants selected to enter the Apprenticeship Program will be required to take And pass a Substance Abuse Test. (This test will be paid for by the Arizona Operating Engineers' Apprenticeship.)

(YES) _____ (NO) _____

Having reviewed the Apprenticeship Standards, I understand and acknowledge the terms and conditions of the Apprenticeship. I will accept the decision of the Joint Apprenticeship Committee as final, regarding my qualifications for this training. The knowledge set forth in this application is true and correct to the best of my knowledge.

Date: _____ Signed: _____

"WE ARE AN EQUAL OPPORTUNITY EMPLOYER"
