

KAPHCC Apprentice School Application

Last Name: _____

APPLICATION DEADLINE 12 NOON: Wednesday, August 1, 2018
Applications received after deadline date are subject to approval by Committee.

2018-2019 School Year

Mail applications to: KAPHCC Apprentice School
c/o TAPHCC

9041 Executive Park Dr. Suite 220 Knoxville, TN 37923

Office contact info: Phone: 865-531-7422 Fax: 865-531-7045 email: appschool@taphcc.com

All classes held at Lincoln Park Technology & Trade Center, 535 Chickamauga Ave, Knoxville, TN 37917 or
Fulton High School, 2509 N. Broadway, Knoxville, TN 37917

CLASSES WILL START August 20, 2018 at Fulton High School Gymnasium

GENERAL REQUIREMENTS:

-Minimum Age 18 -High School Graduate or GED -Must Be Physically Able to Perform the Work

**NOTE: ALL REQUESTS FOR ADVANCE PLACEMENT FROM PRIOR SCHOOLING
MUST BE APPROVED BY THE COMMITTEE & SUBMITTED WITH APPLICATION**

NCCER certification requires you complete ALL test modules to receive certification.
If you advance past 1st year you must take all the test modules to receive NCCER certification.

PLEASE PRINT CLEARLY

DATE: _____ TRADE: (Circle one) PLUMBING HVAC SHEET METAL Year: _____ (1,2,3 or 4)

FULL NAME (first middle last): _____

Cell Phone: (school purposes only): _____ Home Phone: _____ Work Phone: _____

Age: _____ **ATTACH COPY OF DRIVERS LICENSE** Date of Birth: ___/___/___ Soc. Security #: _____

Mailing Address: _____
STREET CITY STATE ZIP

Email: _____

Circle One: HIGH SCHOOL GRADUATE GED **ATTACH COPY OF DIPLOMA OR GED**

SCHOOL, DATES ATTENDED & GRADUATION DATE: (High School, College, University or Technical School, include Formal Military Training)

Have you ever been in the US Armed Forces?: yes no

If yes: (Date of Discharge) _____ (Present Classification): _____ (Type of Discharge): _____

CURRENT EMPLOYER: _____ \$ _____
(Current Hourly Rate of Pay)

Supervisor Name: _____ Supervisor Phone: _____

Supervisor Email: _____

LIST THE LAST THREE (3) PRIOR EMPLOYERS BEGINNING WITH THE MOST RECENT:

Company	Address	Period Worked	Reason for Leaving
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

To be completed by KAPHCC Apprentice School:

Date Received: _____ Applicant Log # _____ Registered Date: _____ Rank # _____ Complete? _____

Request for Advance Placement (if qualified):

All requests for advancement past the 1st year must BE NOTED ON THE APPLICATION & include completed information below & provide copy of certificate or documentation from prior apprenticeship program or technical school to show proof of prior year's completed! No advancement will be given until proper documentation is received.

You must contact the office by July 1st for testing.

Advance Placement Testing and Rules: *Bring pencil and calculator*

- **REQUEST FOR ADVANCE PLACEMENT:** Applicant with one (1) year minimum work experience (2,000 work hours) may take the 1st year test and if successfully completed and passed may skip 1st year and advance to the 2nd year.
- **ADVANCEMENT WITH PRIOR SCHOOLING:** If you have completed prior apprenticeship schooling, include paperwork with application to verify completion and you may enter the KAPHCC where you left off.
- **ADVANCEMENT WITH PRIOR SCHOOLING:** If you have completed 1st year in a program after completion of high school you may skip the 1st year and advance to the 2nd year, even though you don't have work hours. However, your work hours must be completed for 4 full years. If you wish to skip the 2nd year also, you must take the 2nd year test modules to advance to 3rd year.
- **REQUEST TO TRANSFER INTO THE PROGRAM IN MIDYEAR:** Must submit proper paperwork with application to verify current school status. Applicant must take a test that includes all prior tests for the current year. They must successfully complete and pass the tests to enter the program.

REQUEST FOR ADVANCE PLACEMENT MUST BE INCLUDED IN THE APPLICATION. NO ADVANCEMENT APPROVED AFTER APPLICATION DEADLINE. THERE WILL ONLY BE ONE TEST DATE for advance placement!

Call 531-7422 to confirm you will be taking the advance placement test and to be advised of the test date by July 1.

Tests will be given at the Lincoln Park Technology & Trade Center, 535 Chickamauga Ave, Knoxville, TN 37917

Have you ever been in an apprenticeship program: (Plumbing/HVAC/Sheet Metal) YES NO

Name of Program: _____ **Dates/Location:** _____

Years Completed _____

*Paperwork verifying prior schooling & past work hours must be submitted with application.

*The Apprenticeship Committee must approve advanced placement based on work experience or prior schooling.

*All required tests must be passed before the current school year if advancement is desired.

I UNDERSTAND THAT FALSE STATEMENTS ON THIS APPLICATION ARE CAUSE FOR DISMISSAL FROM THE APPRENTICESHIP PROGRAM. I VERIFY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS TRUE.

APPLICANT SIGNATURE: _____ DATE: _____

**U.S. DEPARTMENT OF LABOR OFFICE OF APPRENTICESHIP
REGISTER NEW APPRENTICE FORM**

Please fill out all the information below as this information is required by the U.S. Dept. of Labor:

REGISTER NEW APPRENTICE

**Program Registration and
Apprenticeship Agreement**
Office of Apprenticeship Training,
Employer and Labor Services

U.S. Department of Labor
Employment and Training Administration

OMB No. 1205-0223 Expires: 05/31/05

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 Bureau of Apprenticeship and Training or the recognized State Apprenticeship Agency show below. (Item 22)

The program sponsor and apprentice agree to the terms of 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 30.3, 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 29.6.

PART A: TO BE COMPLETED BY APPRENTICE. NOTE TO SPONSOR: PART A SHOULD ONLY BE FILLED OUT BY APPRENTICE

<p>1. Name (Last, First, Middle), and Address (No., Street, City, State, Zip Code)</p> <p>Last Name: <input type="text"/></p> <p>First Name: <input type="text"/></p> <p>Middle Initial: <input type="text"/></p> <p>SSN: <input type="text"/> Not Provided <input type="checkbox"/></p> <p>Address: <input type="text"/></p> <p>City: <input type="text"/></p> <p>State: TN <input type="text"/></p> <p>Zip Code: <input type="text"/> - <input type="text"/></p>		<p>Answer Both A and B (Definitions on reverse)</p> <p>4. a. Ethnic Group (mark one)</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> Not Provided</p> <p>b. Race (mark one)</p> <p><input type="checkbox"/> Am. Indian or Alaska native</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or other Pacific Islander</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> Not Provided</p>	<p>5. Veteran Status (mark one)</p> <p><input type="checkbox"/> Non Veteran</p> <p><input type="checkbox"/> Veteran</p> <p><input type="checkbox"/> Not Provided</p>
<p>2. Date of Birth (Mo., Day, Yr.)</p> <p><input type="text"/> (Ex.mm/dd/year)</p>	<p>3. Sex (mark one)</p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female</p>	<p>6. Highest education level (mark one)</p> <p><input type="checkbox"/> 8th grade or less</p> <p><input type="checkbox"/> 9th to 12th grade</p> <p><input type="checkbox"/> GED</p> <p><input type="checkbox"/> High School Graduate or Greater</p>	
<p>8. Signature of Apprentice</p> <p>Date</p>	<p>9. Signature of Parent/Guardian(if minor)</p> <p>Date</p>		

10. Do you have a disability? Yes No Not Provided

KAPHCC Apprentice School

c/o TAPHCC 9041 Executive Park Dr. Suite 220 Knoxville, TN 37923

865-531-7422

appschool@taphcc.com

KAPHCC RULES FOR PLUMBING, SHEET METAL AND HVAC APPRENTICE PROGRAMS:

Classes are held at the Lincoln Park Technology & Trade Center, 535 Chickamauga Ave, Knoxville, TN 37917 or Fulton High School, 2509 N. Broadway, Knoxville, TN 37917.

- **All fees are the responsibility of the apprentice and are due the 1st night of class unless paid by employer.** Tuition must be paid by check or money order (no cash). If you work for a NON-PHCC MEMBER, the KAPHCC Apprentice School yearly tuition is \$1275 and includes your book.
- **CLASS STARTING TIME-** Classes begin promptly at 5PM. Students must sign in (note time) and verify that employer name is correct. If you are late, this will be noted on the roll sheet and may accumulate into an absence(s). Attendance is recorded from the sign in sheet so be sure to sign in each night.
- **CLASS ATTENDANCE-** KAPHCC attendance policy supersedes KCS policy. There are **NO excused absences** from class. If you are asked to work late on a school night, remind your employer that you must attend class. If for any reason you will miss class, you must inform the KCS CTE Director by text or phone, (phone number will be provided at registration).
- **KAPHCC classes will run on the Knox County Schools SNOW SCHEDULE.**
- **YEARLY REQUIREMENTS-** 2000 yearly work hours at employer and **160 yearly classroom school hours** (40 total nights)
- **70** minimum grade point average for advancement: **A** 93-100 **B** 84-92 **C** 76-83 **D** 70-75 **F** below 70
- **OUT-OF-WORK LIST-** If you are laid-off, sign the out of work list in the KAPHCC office. The KAPHCC will attempt to keep you employed by a KAPHCC member; however, **it is the responsibility of the apprentice to keep the KAPHCC informed of your current employer.**
- **WORK CARDS-** Apprentices fill out monthly work cards and turn in to your employer. You must work for a KAPHCC member to receive credit for your monthly work hours. Employers will collect work cards from apprentices and turn in to KAPHCC at end of each month to be kept in the student file. Companies who wish to register their apprentices with BAT must turn in work cards.
- **DEPT OF LABOR OFFICE OF APPRENTICESHIP-** Registration and 4th year program completion certificates are only available to registered apprentices working for KAPHCC members. **Only KAPHCC members who meet KAPHCC Standard guidelines may register their apprentices with the Dept. of Labor.**
- **KAPHCC APPRENTICE RECORDS-** Please keep the KAPHCC App School office updated on your current mailing address, phone number and email in case we need to notify you with KAPHCC App School information.
- **BREAK TIME-** There will be two 5 minute breaks. Break time to be at the discretion of the instructor.
- **UNRULY CONDUCT-** Unruly conduct on school property will not be tolerated. Anyone reported disrupting class will be brought before the Apprenticeship Committee and subject to dismissal from school. Anyone caught destroying school property will be responsible for damages and subject to dismissal. Abusive or offensive language will not be tolerated. Weapons or carrying objects with the intent to go armed on school property will be grounds for dismissal. Alcohol or drugs on school property will not be permitted. Smoking including vaping and electronic cigarettes are prohibited on KCS property and strictly enforced. No one will be allowed to attend class who is suspected of being under the influence of alcohol or drugs.
- **NO SOLICITATION OR DISTRIBUTION ALLOWED-** There will be no solicitation distribution of printed or electronic media of any nature allowed by anyone (students, contractors, anyone) during school hours or on school property or in connection with the KAPHCC programs. Breaking of this rule will warrant dismissal from program.
- **CLASS ENDING TIME-** Class ends at 9:00PM. Students will sign out at 9pm and will be given class assignments for the following week.
- **CLASS RULES-** Turn off cell phones during class. No meals during class; please eat before you arrive; only snacks or soft drinks allowed.
- **PROBATION-** All 1st year students are on a six (6) month probation period.

I, apprentice _____ have read and understand the above rules and agree to abide by them.
Print Full Name

Apprentice Signature: _____ Date: _____ Craft & Year: _____

RULE SHEET IS INCLUDED WITH APPLICATION & WILL BE IN EFFECT DURING STUDENTS ENTIRE APPRENTICESHIP TRAINING.

RANKING

KAPHCC Apprentice School

APPLICANT NAME: _____

CURRENT EMPLOYER: _____

Last 4 digits Social Security # XXX-XX- _____

Please answer yes or no to the following questions.

Do not calculate points. This will be done by KAPHCC.

	(Yes or No)		<u>POINTS</u>
1. Do you work for a participating contractor member?	_____	50	_____
2. Do you have adequate transportation to/from work?	_____	20	_____
3. Are you physically able to perform the required work?	_____	10	_____
4. Do you have prior work experience in this trade?	_____	10	_____
5. Have you served in the military?	_____	10	_____
		TOTAL POINTS:	_____

If not completed, you will receive a zero (-0) ranking.

To be completed by KAPHCC: Date application received: _____	TOTAL POINTS: _____	RANK #: _____
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