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HERE

# Pennsylvania Heavy and Highway Apprenticeship and Training Fund

## Apprentice Application

**APPLYING FOR: (Please check the appropriate box)**

- Construction Laborer
- Heavy Equipment Operator
- Electrician
- Form Carpenter
- Cement Mason
- Heavy Equipment Mechanic

DATE: \_\_\_\_\_

### Applicant Information

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Are you at least 18 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If No, please advise of when you will turn 18: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_  
(Apt #)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Are you a citizen of the United States or authorized to work in the United States? \_\_\_\_ Yes \_\_\_\_ No

Date Available to Begin Apprenticeship Program: \_\_\_\_/\_\_\_\_/\_\_\_\_

If selected for program, are you willing to perform a drug screening? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If No, please provide an explanation: \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you own a car? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If Yes, are you willing to travel for work? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If you can travel, what is the maximum distance that you can travel daily roundtrip? \_\_\_\_\_

# EDUCATION

<b><u>Schools/Trade Programs</u></b>	<b><u>School/Trade Program Address/Phone #</u></b>	<b><u>Months/Years of Program Attendance</u></b>	<b><u>Graduation Date</u></b>	<b><u>Certification or License/Degree</u></b>
<b>High School/GED</b>				
<b>College</b>				
<b>Trade School</b>				
<b>Trade School</b>				

**WORK HISTORY**

**PLEASE LIST EMPLOYMENT STARTING WITH YOUR CURRENT POSITION  
(OR MOST RECENT, IF PRESENTLY UNEMPLOYED)**

<b><u>Start Date/ End Date</u></b>	<b><u>Employer Name/ Address/Phone #</u></b>	<b><u>Work Duties</u></b>	<b><u>Reason for Leaving</u></b>	<b><u>May We Contact Employer?</u></b>

**CERTIFICATIONS/LICENSES**

<u>Date Awarded</u>	<u>Certificate/License Type</u>	<u>Issuing Institution</u>

**MILITARY SERVICE**

From \_\_\_\_\_ To \_\_\_\_\_

Branch of Service \_\_\_\_\_

Are you still serving? \_\_\_\_\_ Yes \_\_\_\_\_ No

If No, Date of Discharge? \_\_\_\_\_

Type of Discharge \_\_\_\_\_

**APPLICANT REFERRAL**

How did you become aware of the Apprenticeship and Training Program?

(please check the box that corresponds to how you learned of the program and state the name below)

\_\_\_ H&H Participating Contractor (name of company) \_\_\_\_\_

\_\_\_ United Steelworker Representative (name of contact) \_\_\_\_\_

\_\_\_ State Job Service (name and city) \_\_\_\_\_

\_\_\_ Internet Source (name) \_\_\_\_\_

\_\_\_ Other \_\_\_\_\_

**CONSENT**

I hereby consent to the Pennsylvania Heavy and Highway Apprenticeship and Training Fund (“Fund”) verifying all the information that I have provided within this application. I further agree and release the Fund from any and all liability or responsibility for any and all events that may result during the collection of such information contained and discussed within this application.

I understand that nothing contained within this application shall be construed as intending to create an employment contract, or any other contract, between myself and the Fund. I also hereby understand that this application shall in no way be construed as a promise that is binding upon the Fund or its Trustees and Fund representatives. I understand that I have the right to terminate my application at any time and that the Fund retains a similar right.

I understand that any falsehoods or misrepresentations (whether stated in this application or omitted therefrom) that I make during this application process shall be sufficient for rejection of my application, or if I am selected for enrollment, my immediate termination from the Fund’s Apprenticeship and Training Program regardless of the point in which my misrepresentation, concealment and/or falsehood is discovered.

**APPLICANT SIGNATURE** \_\_\_\_\_

**APPLICANT NAME PRINTED** \_\_\_\_\_

Date of Application \_\_\_\_\_