



**APPRENTICE REGISTRATION-SECTION II**

OMB No. 1205-0223 Expires: 10/31/2008

**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 shown below. (Item 22)**

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 30.3, 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**

Name (Last, First, Middle) and Address (No., Street, City, State, Zip Code)	*Social Security Number (Voluntary - See reverse)	Answer Both A and B (Voluntary) (Definitions on reverse)	5. Veteran Status (Mark one) <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Veteran
2. Date of Birth (Mo., Day, Yr.)		4. a. Ethnic Group (Mark one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino  b. Race (Mark one or more) <input type="checkbox"/> Am. Indian or Alaska native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White	6. Education Level (Mark one) <input type="checkbox"/> 8th grade or less <input type="checkbox"/> 9th to 12th grade <input type="checkbox"/> GED <input type="checkbox"/> High School Graduate <input type="checkbox"/> Post Secondary or Technical Training
3. Sex (Mark one) <input type="checkbox"/> Male <input type="checkbox"/> Female		7. Career Linkage or Direct Entry (Mark one) (Instructions on reverse) <input type="checkbox"/> None <input type="checkbox"/> Adult <input type="checkbox"/> Youth <input type="checkbox"/> HUD/STEP-UP <input type="checkbox"/> School-to-Registered-Apprenticeship <input type="checkbox"/> Incumbent Worker <input type="checkbox"/> Job Corps <input type="checkbox"/> Dislocated Worker <input type="checkbox"/> Direct Entry: _____	

8. Signature of Apprentice _____ Date _____	9. Signature of Parent/Guardian (if minor) _____ Date _____
---	---

**PART B: TO BE COMPLETED BY SPONSOR**

10. Sponsor Program No. MO 007-040006 Sponsor Name and Address (No. Street, City, County, State, Zip Code)  <b>ASSOCIATED BUILDERS AND CONTRACTORS, INC. HEART OF AMERICA CHAPTER KC METRO TRAINING FACILITY BUSINESS &amp; TECHNOLOGY COLLEGE 1775 UNIVERSAL AVENUE KANSAS CITY, MO 64120</b>	11a. Trade/Occupation (The work processes listed in the standards are part of this agreement).  <p style="text-align: center;"><b>Electrician</b></p>		
11b. Occupation Code <b>0159</b>		12. Term (Hrs., Mos., Yrs.) <b>4 Yrs.</b>	13. Probationary Period (Hrs., Mos., Yrs.)
14. Credit for Previous Experience (Hrs., Mos., Yrs.)		15. Term Remaining (Hrs., Mos., Yrs.)	16. Date Apprenticeship Begins

17a. Related Instruction (Number of Hours Per Year) <b>144 hours</b>	17b. Apprentice Wages for Related Instruction <input type="checkbox"/> Will Be Paid <input type="checkbox"/> Will Not Be Paid	17c. Related Training Instruction Source ASSOCIATED BUILDERS AND CONTRACTORS, INC. HEART OF AMERICA CHAPTER
---	---	--

18. Wages: (Instructions on reverse)

18a. Pre-Apprenticeship Hourly Wage \$ \_\_\_\_\_ 18b. Journeyworker's Hourly Wage **\$22.56** 18c. Apprentice's Entry Hourly Wage \$ \_\_\_\_\_

	Period 1	2	3	4	5	6	7	8	9	10
18d. Term (Hrs., Mos., Yrs.)	1000 hrs	1000 hrs	1000 hrs	1000 hrs	1000 hrs	1000 hrs	1000 hrs	1000 hrs		
18e. Wage Rate (Mark one) % <input checked="" type="checkbox"/> or \$ <input type="checkbox"/>	50%	55%	60%	70%	75%	80%	85%	90%		

19. Signature of Sponsor's Representative(s) _____ Date Signed _____	21. Name and Address of Sponsor Designee to Receive Complaints (If applicable) Sara Flaherty Associated Builders and Contractors 1775 Universal Avenue Kansas City, MO 64120
20. Signature of Sponsor's Representative(s) _____ Date Signed _____	

**PART C: TO BE COMPLETED BY REGISTRATION AGENCY**

22. Registration Agency and Address USDOL/OA 1100 Main Street - Suite 1010 Kansas City, MO 64105	23. Signature (Registration Agency)	24. Date Registered
---	-------------------------------------	---------------------

25. Apprentice Identification Number (Definition on reverse): \_\_\_\_\_

**Item 4.a. Definitions:**

**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 4.b. Definitions:**

**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. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."

**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 7. 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.

**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.

**School-to-Registered Apprenticeship.** Program designed to allow high school youth ages 16 - 17 to enter a Registered Apprenticeship program and continue after graduation with full credit given for the high school portion.

**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.

**Item 18. Wage Instructions:**

18a. Pre-Apprentice hourly wage, sponsor enters the individual's hourly wage in the quarter prior to becoming an apprentice.

18b. Journeyworker's wage, sponsor enters wage per hour.

18c. Apprentice's entry hourly wage, (hourly dollar amount paid), sponsor enters this apprentice's entry hourly wage.

18d. Term, sponsor enters in each box the apprentice schedule of pay for each advancement period.

18e. Percent or dollar amount, sponsor marks one.

**Note:**

18b. 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 18e. of this agreement.

18d. 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 on-the-job learning and the related instructions outlined in the Apprenticeship Standards. The period may be expressed in hours, months, or years.

18e. The wage rates are expressed either as a percent or in dollars and cents of the journeyworker's wage depending on the industry.

**Example - 3 YEAR APPRENTICESHIP PROGRAM**

<b>Term</b>	<b>Period 1</b>	<b>Period 2</b>	<b>Period 3</b>	<b>Period 4</b>	<b>Period 5</b>	<b>Period 6</b>
hrs., mos., yrs.	1000 hrs.	1000 hrs.	1000 hrs.	1000 hrs.	1000 hrs.	1000 hrs.
%	55	60	65	70	80	90

**Example - 4 YEAR APPRENTICESHIP PROGRAM**

<b>Term</b>	<b>Period 1</b>	<b>Period 2</b>	<b>Period 3</b>	<b>Period 4</b>	<b>Period 5</b>	<b>Period 6</b>	<b>Period 7</b>	<b>Period 8</b>
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 25. Definition:**

The apprentice identification number is a unique number generated by the Registered Apprenticeship Information System (the OATELS' database), which is used to identify the apprentice. It replaces the social security number to protect the apprentice's privacy.

\*The submission of your social security number is voluntary. 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., your social security number will be used to verify and certify to the U.S. Department of Labor, Employment Standards Administration, that you are a registered apprentice to ensure that the employer is complying with the geographic prevailing wage of your occupational classification. It will be used to verify your periods of employment and wages for purposes of complying with Memorandum M-02-06 of the Office of Management and Budget related to the President's Management Agenda for performance and budget integration of Federal Programs. Your response is voluntary. 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 Code of Federal Regulations 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, Apprenticeship Management System (AMS), at the Office of Apprenticeship Training, Employer and Labor Services, Employment and Training Administration, U.S. Department of Labor. Data may be disclosed to a State Apprenticeship Council to determine an assessment of skill needs and program information, and in connection with federal litigation or when required by law.

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 15 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. Send comments regarding this burden estimate 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 Training, Employer and Labor Services, 200 Constitution Avenue, N.W., Room N-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0223).