



2010 - 2011 Application For **FIRST YEAR** Apprenticeship Training

PLEASE PRINT

NAME: Last, First, Middle		Home Phone	Social Security #
Street Address	Apt. #	Date of Birth (M-D-Y)	Male Female
City, State, Zip Code		E-mail (required)	
(check only one) Race/Ethnic Group <input type="checkbox"/> White (not Hispanic) <input type="checkbox"/> Am. Indian/Alaskan <input type="checkbox"/> Black (not Hispanic) <input type="checkbox"/> Asian/Pacific Is. <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		I'll be attending: <input type="checkbox"/> First Year <input type="checkbox"/> Second Year (If interested in credit-by-exam to move into second year call 301-384-ACCA)	
Have you ever worked in the HVACR industry? <input type="checkbox"/> Yes <input type="checkbox"/> No Job Description:			
If under 18, name and address of parent or guardian:			
Parent/Guardian Signature	Name	Address	Phone
Apprentice's Employer		Address	Phone

EDUCATION / VETERAN STATUS

(check only one) Education Level <input type="checkbox"/> 9th grade or more <input type="checkbox"/> Some College <input type="checkbox"/> GED Certificate <input type="checkbox"/> College Graduate <input type="checkbox"/> High School Graduate	(check only one) Veteran Status <input type="checkbox"/> Vietnam Era (8/15/64 - 6/7/75) <input type="checkbox"/> Other Veteran <input type="checkbox"/> Non Veteran
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I certify that to the best of my knowledge the above information is correct. I also understand my responsibilities as stated on page 6 of the apprenticeship brochure.

Date: _____ Signature of Applicant: _____

REQUIREMENTS

MUST BE SUBMITTED WITH APPLICATION. (Incomplete forms will be returned.)

- Applicant **must** provide a copy of high school diploma, if graduated, GED certificate, or transcript of last grade completed. You must have a 9th grade education or better.
- Applicant, if **claiming** credit for training in trade, **must** provide proof of training.

ADDITIONAL REQUIREMENTS

- Applicant **must** be physically able to do work in the HVACR industry and must submit a doctor's certificate if requested.
- Applicant, if a veteran, **may** need to provide discharge papers.
- Applicant **may** be asked to provide written references from three (3) acquaintances.
- Applicant **must** provide tools of trade as required by employer.
- All first year apprentices **must** take a math assessment test, for placement purposes, during orientation in August.
- Must** obtain a Maryland Apprenticeship License by the completion of the first semester.

Please complete reverse side

TUITION PAYMENT (full payment must be included with completed application):

(includes tuition, books and materials for year)

Apprentices working for an ACCA-NCC participating contractor member:

- _____ \$50 Registration fee applies to all first-time applicants and former apprentices returning to the program. (Nonrefundable)
- _____ \$1,130 postmarked before July 1, 2010
- _____ \$1,200 postmarked before July 25, 2010
- _____ \$1,275 postmarked before August 1, 2010

Apprentices working for a non-ACCA-NCC contractor member or unemployed

(Can only participate in program for one year if apprentice does not become employed by an ACCA-NCC participating contractor member):

- _____ \$50 Registration fee applies to all first-time applicants and former apprentices returning to the program. (Nonrefundable)
- _____ \$1,800 postmarked before July 1, 2010
- _____ \$1,875 postmarked before July 25, 2010
- _____ \$1,950 postmarked before August 1, 2010

Some books are used throughout the four-year program. Apprentices that move into second-year via a credit-by-exam will be responsible to purchase books that are required all four years. Replacement books will be at the apprentice's own expense.

FULL PAYMENT MUST BE INCLUDED WITH COMPLETED APPLICATION

(Visa, MasterCard, and Amex accepted - make check payable to ACCA-NCC)

My tuition of \$_____, **PLUS** my registration fee of \$50, equaling my full payment of \$_____

is being paid by: Check Visa MasterCard Amex

Name on Card _____ Credit Card # _____ Exp. Date _____

Tuition Refund

Before orientation	minus \$75
Before first night of scheduled classes (with books returned in new condition*)	85%
Before second night of scheduled classes (with books returned in new condition*)	75%
Before third night of scheduled classes (no refund on books).....	50%
Before fourth night of scheduled classes (no refund on books).....	25%

*There will be a charge for books not returned or books that are not in new condition.

MUST BE COMPLETED BY EMPLOYER:

Enroll my employee, _____ as a registered apprentice.

I agree to continue as, or become, a registered participating employer.

Signature of Contractor: _____

Print Name: _____

E-mail: _____

Company: _____

NO APPLICATIONS ACCEPTED AFTER AUGUST 1, 2010

Mail to: ACCA-NCC
P. O. Box 4268
Silver Spring, MD 20914-4268
301-384-ACCA/Fax 301-384-9623