



CONNECTICUT DEPARTMENT OF LABOR APPLICATION FOR APPRENTICESHIP SPONSOR

EMPLOYER INFORMATION

Company Name _____

Contact Person (Name & Title) _____

Physical Location _____

Mailing Address _____

Telephone No.: (with area code) _____ Cell Phone No.: _____

Fax No: (with area code) _____ Email Address: _____

Type of Firm: (check only one) Corporation Partnership Sole Proprietorship LLC

How many years has the firm been in business? _____ Under the same name? Yes No

Is the company party to a collective bargaining agreement? Yes No

DESCRIPTION OF FACILITY, EQUIPMENT AND TRADE MATERIALS:

Building: (Check One) Own Rent Square Footage: _____

Equipment and Tools: (e.g. trucks, etc.) _____

Materials: (Inventory in stock) _____

BUSINESS AND TRADE OPERATION PROJECTION:

Major Projects Contracted: _____

Other Trade Operations: _____

PROSPECTIVE APPRENTICE INFORMATION:

- 1. Are you ready to register an apprentice? Yes No
- 2. Is this person 18 years of age or older? Yes No
- 3. Will this person be a full-time, permanent employee at the trade? Yes No
- 4. Is this person a technical school graduate? Yes No
- 5. Is this person currently a student? Yes No

If yes, check one: High School Technical School

WITHIN THE PAST FIVE YEARS HAS THE FIRM, ANY AFFILIATE, (INCLUDING ANY CONTRACTOR OF RECORD) ANY PREDECESSOR COMPANY OR ENTITY, OWNER OF 5.0% OR MORE OF THE FIRM'S SHARES, DIRECTOR, OFFICER, PARTNER OR PROPRIETOR BEEN THE SUBJECT OF THE FOLLOWING:

(Check any that apply and explain under employer remarks. It is imperative that a full explanation of the circumstances relating to a "yes" statement be submitted to ensure an objective evaluation by the Department. Attach additional pages if necessary.)

- A. Yes No A judgment of conviction for any business-related conduct constituting a crime under state or federal law?
- B. Yes No A currently pending indictment for any business-related conduct constituting a crime under state or federal law?
- C. Yes No A grant of immunity for any business-related conduct constituting a crime under state or federal law?
- D. Yes No Any federal determination of a violation of any labor law or regulation?
- E. Yes No Any OSHA violation?
- F. Yes No Any state determination of a violation of any labor law or regulation?
 Public work violation? Yes No Was this violation willful? Yes No
- G. Yes No A consent order with the Connecticut Department of Environmental Protection, or a federal or state enforcement determination involving a construction-related violation of federal or state environmental laws?
- H. Yes No A debarment from federal contracts for violation of the Davis-Bacon Act, 49 Stat 101(1931), 40 USC 276a-2 or pending enforcement proceeding for same.
- I. Yes No A debarment from state contracts for violation of Connecticut's prevailing wage law pursuant to Conn. Gen. Stat. Section 31-53a of the General Statutes, or pending enforcement proceeding for the same?
- J. Yes No A debarment or suspension for violation of any other state prevailing wage law or pending enforcement proceeding for same.
- K. Yes No Rejection of any bid or proposed subcontract or general contract for lack of responsibility pursuant to state law?
- L. Yes No Any determination by the Connecticut Department of Consumer Protection related to violations of a state occupational licensing statute or regulation or pending enforcement proceeding regarding the same.
- M. Yes No A consent order entered into with the Connecticut Department of Consumer Protection or any other State or Federal government agency.
- N. None of the above.

EMPLOYER'S REMARKS: *(If more space needed, attach separate sheet.)*

CERTIFICATION:

The undersigned acknowledges that this questionnaire is submitted for the express purpose of inducing the Connecticut Department of Labor to authorize the hiring of apprentices under its state apprenticeship program pursuant to Section 31-51d-1-12 of the Regulations of Connecticut State Agencies. Applicant acknowledges that the Department may, in its discretion, determine the truth and accuracy of all statements made herein. Applicant further acknowledges that intentional submission of false or misleading information in this application may constitute reasonable cause for invalidating the applicant's apprenticeship program pursuant to Section 31-51d-3a of the Regulations of Connecticut State Agencies. Applicant states and certifies under penalty of law (Conn. Gen. Stat. Section 53a-175 Class A Misdemeanor) that the information submitted in this questionnaire and any attached pages is true, to the best of his or her knowledge.

Date: _____

 Name and Title of Officer or Owner
Printed or Typed

 Signature of Officer or Owner

 Name of Contractor of Record *(If different than above)*
Printed or Typed

 Signature of Contractor of Record

 License Type & Number

 CT Unemployment Tax No.

 Trade Applying For

RETURN TO:

CT Department of Labor
200 Folly Brook Blvd.
Wethersfield, CT 06109

Or FAX to: 860-263-6088

For Office Use Only	
Date Received: _____	Date Received CO: _____
Apprenticeship Representative Initials _____	
Recommended Approval	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, reason:	<input type="checkbox"/> All aspects of trade not performed <input type="checkbox"/> No contractor of record/journeyperson <input type="checkbox"/> Unable to provide related instruction <input type="checkbox"/> No physical location in Connecticut