



Please return completed application and **\$20 Registration Fee:**

City of Omaha Plumbing Board
 Omaha/Douglas Civic Center
 1819 Farnam St #1110
 Omaha, NE 68183

City of Omaha Plumbing Board Apprenticeship Agreement

Please list your full legal name. Include "Jr.", "Sr.", and "III" as appropriate.

Name: (Last)		(First)	MI
Address:			
City:		State:	Zip:
Phone (required):	Email (required):		

I certify that I have earned (check one): High School Diploma General Equivalency Diploma (GED)

This is an agreement between Apprentice and Employer Joint Committee Non-Committee

Name and Address of Sponsor (Employer):

Company Name:			
Address:			
City:		State:	Zip:
Phone (required):	Fax:	Email (optional):	

The program sponsor and apprentice agree to the terms of apprenticeship standards as 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 Section 30.3, Title 29, Code of Federal Regulation, Part 30.

Applicant Signature: _____ Date: _____

Parent of Guardian (If Minor) Signature: _____ Date: _____

Credit Requested for Experience*	Apprenticeship Start Date Requested**
*To be approved by Master Plumber and Concurred by the Plumbing Board	**YOU MUST SUBMIT a payroll summary as proof of employment if you are requesting credit for experience.

Authorized Official (Employer/Sponsor):

Signature: _____ Date: _____

Signature of Plumbing Board Chairman:

Signature: _____ Date: _____

Evaluation of Apprenticeship Program



Total employees: _____

Omaha Journeyman Plumber employed

Omaha Master Plumbers employed

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Omaha Apprenticeship Plumbers employed

Name	Race	Sex	Year		Name	Race	Sex	Year

Have any of your Apprenticeship Plumbers been set back? Yes No

If so, why? Please list their names.

Name	Reason

Are all job training records up to date? Yes No

Have copies been given to the Apprenticeship Plumbers? Yes No

Are the classroom records up-to-date? Yes No

Have you opened up the program in the past twelve months? Yes No

If the answer is yes, were the recruitment, selection, and employment of the Apprenticeship Plumbers in compliance with your Affirmative Action Plan on file with this board? Please furnish copies of all ads.

Sponsor:

Signature: _____

Date: _____

Signature of Master Plumber:

Signature: _____

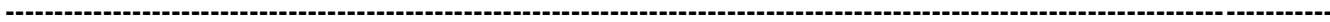
Date: _____

All applications for Apprenticeship must include the registration fee. No application will be processed without the registration fee.

Registration Fee for Apprentice Plumbers is \$20.00

Signature: _____

Date: _____



If you wish to pay by credit card please complete the following form.

I authorize the City of Omaha to charge my account for the attached fees.			
Name on credit card:			<input type="checkbox"/> I am paying my fee. <input type="checkbox"/> My employer is paying my fee.
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD	Card Number:	Expiration Date:	Security Code:
Billing Address:			City/State/Zip:
Signature	Print Name		Date

Visit the Planning Department's site on the Internet at www.cityofomaha.org/planning/