

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
APPRENTICESHIP COUNCIL

4058 Minnesota Ave., N.E. Room 3900  
Washington, D.C. 20019

Form-ID: DCAC  
Form2  
Rev. 5/02

APPRENTICESHIP AGREEMENT AND REGISTRATION FORM  
Title 36. Chapter 1-A. D.C. of Laws (65 Stat. 204)

The sponsor and apprentice whose signatures appear below agree to these terms of apprenticeship.

WITNESSETH THAT: The SPONSOR agrees to be responsible for the selection, placement and training of the APPRENTICE, and to abide by the D.C. State Plan for Equal Employment Opportunity in Apprenticeship and Training, and that the Apprentice agrees to apply himself diligently and faithfully to the work of the trade named therein during the period of apprenticeship, in accordance with the terms and conditions of the:

NECA/IBEW Local #26 Electrical JATC Apprenticeship Program  
(Name of the Apprenticeship Standards)

Incorporated in and made a part of this agreement; or, as covered by the terms and conditions on the reverse side of this agreement.

This AGREEMENT may be terminated by mutual consent of the parties, citing cause(s) with notification to the Registration Agency			TRAINING DATA	
NAME OF APPRENTICE <div><div></div><div></div><div></div></div> (first name, middle initial, last name)			Trade <div>Electrician</div>	Apprentice ship Term <div></div> Years.
			StepUp? <input type="checkbox"/>	
SOCIAL SECURITY NO. <div></div>	Phone Number <div></div>	eMail Address <div></div>	Probationary Period <div><div></div><div>Days</div></div>	Credit for previous experience <div></div>

			hrs.
<b>ADDRESS</b>  Number and Street <input type="text"/>  City, State, ZIP Code <input type="text"/>  <div>Alabama <input type="button" value="v"/></div> <input type="text"/>		<b>Completion Date</b> <input type="text"/>	<b>Date Apprenticeship begins</b>  <input type="text"/>
<b>NAME OF PARTICIPATING EMPLOYER OR SPONSOR AND ADDRESS</b>  NECA/IBEW Local #26 Electrical JATC 4371 Parliament Place Suite A Lanham MD 20706		<b>TO BE COMPLETED BY THE APPRENTICE</b>  <b>DATE OF BIRTH</b> (Month Day Year) <input type="text"/>	
<b>SIGNATURE OF AUTHORIZED COMPANY OFFICIAL</b>  <input type="text"/>	<b>DATE</b>  <input type="text"/>	<b>SEX</b> <input type="checkbox"/> <b>MALE</b> <input type="checkbox"/> <b>FEMALE</b>	
<b>APPROVED BY JOINT APPRENTICESHIP COMMITTEE</b>  <input type="text"/>	<b>Date</b>  <input type="text"/>	<b>A. ETHNIC Group</b> (Check one)  <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino  <b>B. RACE</b> (Check one)  <input type="checkbox"/> American 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"/> Caucasian or White <input type="checkbox"/> Others	
APPROVED BY NON-JOINT COMMITTEE OR ASSOCIATION  <input type="text"/>	Date  <input type="text"/>	<b>VETERAN STATUS</b>  <input type="checkbox"/> Vietnam <input type="checkbox"/> Vietnam Era <input type="checkbox"/> Special Disabled <input type="checkbox"/> Disabled <input type="checkbox"/> Other Eligible <input type="checkbox"/> Veteran <input type="checkbox"/> Non Veteran	
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL, DISTRICT OF COLUMBIA APPRENTICESHIP COUNCIL        <input type="text"/>        DIRECTOR		<b>HIGHEST EDUCATION LEVEL</b> (Check Highest grade completed)  <input type="checkbox"/> 8th Grade or Less <input type="checkbox"/> 9th Grade <input type="checkbox"/> 10th Grade <input type="checkbox"/> 11th Grade <input type="checkbox"/> 12th Grade or More <input type="checkbox"/> GED	
		DATE (Month Day Year)  <input type="text"/>	Registratio n No.  <input type="text"/>

## TERMS AND CONDITIONS

1. A. During the below Listed period of probation the apprenticeship agreement may be terminated by either party to the agreement upon written notice to the registration agency without cause.

1. B. After the probation period the agreement may be cancelled at the request of the apprentice and may be suspended, cancelled or terminated by the sponsor only for good cause with due notice to all parties concerned.

Probationary period:  months. or  hours

2. In the event there are controversies arising out of the agreement and they cannot be adjusted locally, either party should contact the registration agency listed on the face of this document.

3. The participating employer shall be responsible for the employment, supervision and training of the apprentice currently registered.

4. Schedule of Work Process in Which the Apprentice is to Receive Adequately Supervised instruction and Experience of Which a Record will be Kept and Periodically Evaluated:

(a) LIST Major divisions of the trade and  
HERE: work tasks required under each:

(b) LIST HERE:

Approximate time, in  
hours, months, or  
percent of  
apprenticeship:

Per Approved Standards

5. Wage Rate To Be Paid the Apprentice Each Period of Apprenticeship: (Period may be expressed in hours, months, or years; rate shall be expressed in percent of journeyman's wage)

PERIODS:	RATES:	PERIODS:	RATES:	PERIODS:	RATES:
1st	<u>1000 Hrs.</u> <u>45.00%</u>	5th	<u>1500 Hrs.</u> <u>70.00%</u>	9th	<u>0 Hrs.</u> <u>0.00%</u>
2nd	<u>1000 Hrs.</u> <u>47.00%</u>	6th	<u>1500 Hrs.</u> <u>80.00%</u>	10th	<u>0 Hrs.</u> <u>0.00%</u>
3rd	<u>1500 Hrs.</u> <u>50.00%</u>	7th	<u>0 Hrs.</u> <u>0.00%</u>	11th	<u>0 Hrs.</u> <u>0.00%</u>
4th	<u>1500 Hrs.</u> <u>60.00%</u>	8th	<u>0 Hrs.</u> <u>0.00%</u>	12th	<u>0 Hrs.</u> <u>0.00%</u>

Journeyworker's /Mentor's rate as of  is \$  per

6. Number of Hours per Week or per Day To Be Worked by the Apprentice:

(a) Hours per week

(b) Hours per day

7. Number of Hours Related instruction:

(144 hours per year - 4 hours per week, during regular school year, is normally considered necessary. Where classes are not available through the local school, other organized trade, industrial, or correspondence course or equivalent value may be substituted only on approval by the Registration agency.)

(a)  /week or  /year

(b) School or course

(c) Apprentice ☒ will ☐ will not be compensated for hours spent in related instruction after regular working hours.

8. Other Provisions:

(a) There is reasonable certainty that the trade/occupation which the apprentice is being trained will be available to him/her upon completion of his/her apprenticeship.

(b) The apprentice will be accorded equal opportunity in all phases of apprenticeship employment and training without discrimination because of race, color, religion, national origin or sex.

(c) Upon request by the Joint Apprenticeship Committee or sponsor, a Certificate of Completion will be granted the apprentice by the Registration Agency upon satisfactory completion of the required number of hours actually worked in the trade/occupation as well as the satisfactory completion of the required number of hours of related instruction, in accordance with standards covered herein.

(d) This project was funded by a grant awarded by the U.S. Department of Labor's Employment and Training Administration. The collection of this information helps to track the long term success of this training program. Your personal information is kept confidential and secure and will not be shared with any outside agencies other than those involved with the support or oversight of the grant received by Department of Employment Services (DOES) and issued by the U.S. Department of Labor. Your information will never be sold or shared with third party agencies through your participation in grant supported training activities. Please direct any additional questions concerning the use of your personal information to Gemma Thomas at [Gemma.thomas@dc.gov](mailto:Gemma.thomas@dc.gov).

In addition, to requesting a range of information from project participants, including demographic information, the use of your Social Security Number is also requested in order to access wage and employment information through state databases. Although you cannot be

denied service for failure to provide your Social Security Number, we strongly encourage you to do so in order to enable the project to quantify specific employment-related outcomes. Your personal information will be kept confidential.

9. I, the undersigned apprentice, have read all of the above and fully understand the responsibilities and requirements of this agreement.

Signature of Apprentice	Date (Mo., Day, Yr.) <div></div>
Signature of Parent or Guardian if Apprentice is a Minor <div></div>	Date (Mo., Day, Yr.) <div></div>