

Southwest Washington Electrical JATC

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Tony Lewis, Training Director



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Training Center

Apprenticeship Application Request Form

Print Name: _____

Print Mailing Address: _____

Phone Number: _____

E-Mail Address: _____

Driver's License #: _____ **Expiration:** _____

JATC OFFICE ONLY:

Application #: _____

Date Mailed: _____

Date Returned: _____

Payment Method: _____

I hereby request an application form to apply for apprenticeship with the following program: (There is a \$25.00 fee for each application. Each program is separate.)

Construction **Low Voltage** **Residential**

I have read and understand the requirements for the program I am applying for. I understand and accept full responsibility for completing my application form and submitting all subsequent required documents and information within the specified time frame. I understand that it is my responsibility to keep the apprenticeship program's office informed of my current mailing address and telephone number.

**** APPLICATION FEE ****

A \$25.00 (cash, check, or money order) application fee must accompany this Apprenticeship Application Request Form. Once this form has reached our office an application will be mailed out to you at the mailing address listed above. Please make sure that your address is legible. We will not be held responsible for any applications that are returned to us as undeliverable from the USPS.

You have 10 days from the date of the application being mailed to you to return it to our office at the address listed above. Failure to return the application within the 10 days will result in your application being cancelled.

Please note: The application fee is non-refundable. If you pay by check and your check is returned by your banking institution, your application will be withheld from further processing until full payment is properly made – including reimbursement for any returned check charges.

The recruitment, selection, employment, and training of apprentices during their apprenticeship, shall be without discrimination because of race, color, religion, national origin, sex or age – except the applicant must be at least 18 years of age to apply. The JATC does not, and will not discriminate against a qualified individual with a disability because of the disability of such individual.

Applicant's Signature: _____ **Date:** _____

By signing, I acknowledge that if any requirement is not met, the application fee will be forfeited.