



New York State ACCELERATED APPRENTICESHIP PROGRAM

Date: _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Phone: _____ Are you 18 years or older? Yes No

Are you currently employed? Yes No If yes, with whom? _____

Have you been previously employed by any of our employer partners? If yes, list which company and dates of employment:

Have you ever been let go, fired, or released from a job? Yes No

If yes, please explain:

<p>If required, would you agree to work overtime?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Have you ever served in the United States Armed Forces?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>What shifts are you available to work? Check all that apply:</p> <p><input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd</p>	<p>Do you currently hold a High School diploma or GED?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Can you furnish proof that you are either a U.S. Citizen, or otherwise legally permitted to work in the United States?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Can you perform all the essential functions of this program and job, with reasonable accommodation for any disability?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>



Select your local NYS Apprenticeship Program:

- MACNY (Central New York)
 RTMA (Rochester)
 COI (Hudson Valley)
 MAST (Southern Tier & Buffalo)
 CEG (Capital District)
 I'm not sure

Please initial next to each statement indicating that you have read and agree to the following:

I agree to the completion of pre-placement physical with an x-ray as required by my sponsoring employer.	
I agree to all background checks as required by my sponsoring employer.	
I agree to drug testing, and understand that a negative drug screen is required for employment.	

Under your current name or any other names, have you ever been convicted of a crime other than a minor infraction or moving violation? Crimes include misdemeanors and felonies. Failure to answer truthfully may result in failing the background screening.

- Yes
 No

Would you like to be contacted by our employer partners for future job opportunities?

- Yes
 No

By signing below, I certify that the information given by me to the NYS Apprenticeship Program is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me from further consideration and participation from the NYS Apprenticeship Program and may be considered justification for dismissal from the program, even if discovered at a later time.
