THE GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Transportation



The On-the-Job Training Program

APPRENTICE/TRAINEE APPROVAL REQUEST

NOTE: Submit this form for each proposed apprentice or trainee prior to their start date. The Prime Contractor is also required to submit this form for approval for its subcontractor(s)' apprentices or trainees prior to their start date.

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(1) PRIME CONTRACTOR				(2) CONTRACT NO.			(2a) FAP No.	
(3) SUBCONTRACTOR (IF APPLICABLE)				(4) PROJECT MANAGER				
APPROVAL IS R	EQUESTED TO	PROVIDE T	RAINING	FOR THE FOLLO	WING APP	RENTICE/	TRAINEE	
(5) NAME			(6) EMPLOYEE (LAST 4-DIGITS)			(7) CRAFT		
(8) ADDRESS, CITY, STATE, ZIP					(!	9) TELEPHON	E NUMBER	
(10) EMPLOYEE STATUS NEW HIRE TRANSFER	UPGRADE	(11) ESTIMATED HOURS FOR THIS PROJECT		(12) EMPLOYEE STAI	RT DATE			
(13) TYPE OF TRAINING APPRENTICESHIP/ ON-THE-JOB TRAINING (IN-HOUSE) /DDOT								
(14) ETHNIC GROUP Good Faith Effort (GFE) documentation MUST be provided if neither a Minority nor Female is proposed for training. Failure to provide GFE documentation could result in denial of this request.								
BLACK ASIAN NATIVE AMERICAN HISPANIC WHITE ATTACH COPY OF TRIBAL IDENTIFICATION CARD				NDER MALE FEMALE				
TERMINATION DATA								
				RAINING HOURS ON T	HIS	(18) HOURS TO COMPLETE FOR GRADUATION		
(19) REASON FOR TERMINATION GRADUATED LAY-OFF TRANSFERRED TO PROJECT # OTHER (Explain)								
(20) PRIME CONTRACTOR SIGNATURE			1) DATE	(22) SUB-CONTRACTOR SIGNATURE (IF APPLICABLE) (23) DATE			(23) DATE	
FOR DDOT OFFICE OF CIVIL RIGHTS USE ONLY								
REMARKS								
Starting Wage Rate \$						_		
APPROVED DENIED	SIGNATURE				DATE	TITLE		

INSTRUCTIONS FOR APPRENTICE/TRAINEE APPROVAL REQUEST

- 1. Name of Prime Contractor for this project
- 2. DDOT Contract Number ((2a) bundle number if applicable)
- 3. Name of Subcontractor providing training (If applicable)
- 4. Name of DDOT or Consultant Project Manager
- 5. Full name of apprentice/trainee (should be same as on social security card)
- 6. Social Security Number of apprentice/trainee (last Four Digits)
- 7. Craft Acceptable crafts are Carpenter, Cement Mason, Electrician, Equipment Operator, Ironworker, and Laborer. In addition, exact name of adopted in-house training program may be listed *for this contractor*.
- 8. Address, City, State, and Zip of apprentice/trainee
- 9. Telephone number of apprentice/trainee
- 10. Employee Status New Hire, Transfer (new hire is new to company, transfer is existing employee transferring to this project) or Upgrade
- 11. Estimated number of hours this trainee will receive on this project. *Hours listed here must match hours listed in the approved Training Program for this contractor and this craft.
- 12. Date the apprentice/trainee will start work on this project
- 13. Type of Training
 - a. Apprenticeship (Attach copy of dispatch slip)
 - b. On-the-Job Training (In-House) Attach copy of Training Program (i.e. Carpenter Trainee, etc.) signed and dated by both the trainee and a company representative
- 14. Ethnic Group If Native American is checked, attach copy of tribal identification
- 15. Gender (self explanatory)

NOTE:

If proposed apprentice/trainee is neither minority nor female, attach Good Faith Effort (GFE) documentation showing compliance with the EEO section of FHWA 1273, REQUIRED CONTRACT PROVISIONS FEDERAL-AID CONSTRUCTION CONTRACTS included in your contract.

The US DOL has held that the failure of a JATC or Union to refer a minority or female does not relieve the contractor of the EEO obligation.