



IMPORTANT INFORMATION ABOUT APPLYING TO THE WECA ARIZONA APPRENTICESHIP PROGRAM

In order to be eligible to apply for our apprenticeship program, you must submit your **completed application** along with a **clear and legible copy** of the following documents:

1. **Education prerequisites for entry:** A High School Diploma or an equivalent General Educational Development Certificate, a High School Proficiency Certificate, a College Diploma or equivalent education.
2. **Proof of age. You must be at least 18 years of age.** A passport, birth certificate, or a valid state- issued identification card/driver's license is sufficient to show proof of age.

ALL INCOMPLETE APPLICATIONS WILL BE RETURNED!!!

Mail or email your completed applications and supporting documentation to:

WECA – Arizona Apprenticeship Application Processing
3695 Bleckely Street
Rancho Cordova, CA 95655
Email: azapprenticeship@goweca.com

Upon receiving your information, we will review and, if complete, accept your application. **When we have apprenticeship opportunities available, you will be scheduled for a color identification test, basic skills test (measurement, reading & arithmetic) and a multi-craft aptitude test.** If you pass the color test, basic skills test and multi-craft aptitude test, an oral interview will be scheduled for you. Once you have passed all required testing and oral interviews, you must complete an orientation session and pass a drug test. All scores (basic skills test, multi-craft aptitude test and oral interviews) are blended for ranking. Applicants will then be contacted when work is available. Once you begin working with a Member Contractor you become an “**Indentured Apprentice**” and are registered with the Arizona Department of Economic Security Apprenticeship Office (DES).



Western Electrical Contractors Association, Inc.

Apprenticeship Application

APPLICANT INFORMATION

Full Name: _____
Last First M.I.

Date: _____ Social Security Number: _____

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Primary Phone: () _____ Type: Mobile Home

Alternate Phone: () _____ Type: Mobile Home

Email: _____

Preferred Contact Method for Correspondence:
(If you do not select your preferred correspondence method, the default will be email.) Regular Mail Email

If accepted into this program, can you present proof of US Citizenship or proof of your legal right to live and work in the US? YES NO

Are you currently employed by a WECA Member? YES NO If yes, who? _____

WORK AREAS

Please indicate the counties where you are willing to work. You will be required to commute up to 80 miles one-way from your home. The more willing you are to work in multiple counties the more work opportunities that will be available to you.

- | | |
|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Apache | <input type="checkbox"/> Mohave |
| <input type="checkbox"/> Cochise | <input type="checkbox"/> Navajo |
| <input type="checkbox"/> Coconino | <input type="checkbox"/> Pima |
| <input type="checkbox"/> Gila | <input type="checkbox"/> Pinal |
| <input type="checkbox"/> Graham | <input type="checkbox"/> Santa Cruz |
| <input type="checkbox"/> Greenlee | <input type="checkbox"/> Yavapai |
| <input type="checkbox"/> La Paz | <input type="checkbox"/> Yuma |
| <input type="checkbox"/> Maricopa | |

REFERRAL SOURCE

How did you find out about this opportunity?

- | | |
|---|---|
| <input type="checkbox"/> Friend / Co-Worker | <input type="checkbox"/> Received Email / Mail from WECA |
| <input type="checkbox"/> Web Search | <input type="checkbox"/> Contacted by WECA Employee |
| <input type="checkbox"/> Career Fair / Trade Show | <input type="checkbox"/> Referred by Another WECA Student |
| <input type="checkbox"/> Contractor or Employer | <input type="checkbox"/> Radio Ad. |
| <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Other (please specify) _____ |

ELECTRICIAN PHYSICAL REQUIREMENTS AND SIGNATURE

Below is a list of tasks that electrician apprentices are required to do. These tasks require different levels of physical exertion.

The tasks include, but are not limited to:

1. Identifying and separating wires by color.
2. Digging trenches and working in trenches.
3. Breaking concrete with jackhammer or other power tools.
4. Assisting in the moving of heavy electrical equipment.
5. Lifting, positioning and fastening objects such as wire, conduit, and motors.
6. Carrying material and tools from location to location or floor to floor.
7. Working from A-Frames, extension ladders and scaffolds at various heights.
8. Crawling under floors and working in attics where space is limited.
9. Working under hot and cold weather conditions, indoors and outdoors.
10. Lifting and working with tools and equipment above head.

I acknowledge that I have read the above physical requirements. I have reviewed in my own mind the types of conditions and physical exertion that may be required. By signing below, I certify that I can do the tasks listed above with or without reasonable accommodation.

Signature

Printed Name

Date

AGREEMENT

If accepted as a WECA Electrical Apprentice, I agree to attend school on my own time, pursue the prescribed course of study related to the electrical trade, and comply with the local standards of apprenticeship for the electrical trade. I will abide by the decisions, rules and regulations of the persons responsible for conducting the apprenticeship program.

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for apprenticeship, as it may be necessary in arriving at a selection decision.

I understand that omissions, misrepresentations or falsifications of information will result in rejection or termination from the WECA Apprenticeship Program. I also understand that I am required to abide by all rules and regulations of the companies for which I may work.

Signature

Printed Name

Date

EQUAL OPPORTUNITY PLEDGE

WECA will not discriminate against Apprentice Applicants or Apprentices based on race, color, religion (including religious dress and grooming practices), religious creed, sex (including pregnancy, childbirth, breastfeeding and related medical conditions), sexual orientation, gender, gender identity, gender expression, transgender, national origin or ancestry, marital status, registered domestic partner status, age (40 years old or older), physical or mental disability, medical condition (including cancer or a record or history of cancer and genetic characteristics), genetic information, military or veteran status, or any other status protected by law. WECA will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required by the Arizona Civil Rights Act, Arizona municipalities and/or by Title 29 of the Code of Federal Regulations, part 30, as applicable.

Further, WECA is committed to prohibiting unlawful sexual harassment and other unlawful harassment related to race, color, religion (including religious dress and grooming practices), religious creed, sex (including pregnancy, childbirth, breastfeeding or related medical conditions), sexual orientation, gender, gender identity, gender expression/gender identity/transgender, national origin or ancestry, marital status, registered domestic partner status, age (40 years old or older), physical or mental disability, medical condition, (including cancer or a record or history of cancer and genetic characteristics), genetic information, military and veteran status, or any other status protected by law.

Your Right to Equal Opportunity

It is against the law for a Sponsor of an Apprenticeship Program to discriminate against or harass an Apprenticeship Applicant or Apprentice based on race, color, religion, religious creed, sex (including pregnancy, childbirth or related medical conditions), sexual orientation, gender, gender identity, gender expression, national origin or ancestry, marital status, registered domestic partner status, age (40 years or older), physical or mental disability, medical condition, genetic information, military and veteran status. If you think that you have been subjected to discrimination or harassment, you may file a complaint within 300 days from the date of the alleged discrimination or failure to follow the equal opportunity standards with: U.S. Department of Labor, Office of Apprenticeship, 200 Constitution Ave., NW, Washington, DC 20210, Attn: Apprenticeship EO Complaints, (202) 693-2909, ApprenticeshipEEOcomplaints@dol.gov. Applicants and Apprentices may also be able to file complaints directly with the Equal Employment Opportunity Commission (EEOC). If those offices have jurisdiction over the Apprenticeship Program Sponsor/Employer, their contact information is listed below:

Equal Employment Opportunity Commission: 1-800-669-4000 (toll-free) or 1-800-669-6820 (toll-free TTY number for individuals with hearing impairments). EEOC field office information is available at www.eeoc.gov or in most telephone directories in the U.S. Government or Federal Government section.

Each complaint filed must be made in writing and include the following information:

1. Complainant's name, address, and telephone number, or other means for contacting the complainant.
2. The identity of the respondent (i.e. the name, address, and telephone number of the individual or entity that the complainant alleges is responsible for the discrimination).
3. A short description of the events that the complainant believes were discriminatory, including but not limited to when the events took place, what occurred, and why the complainant believes the actions were discriminatory (for example, because of their race, color, religion, religious creed, sex (including pregnancy, childbirth or related medical conditions), sexual orientation, gender, gender identity, gender expression, national origin or ancestry, marital status, registered domestic partner status, age (over 40), physical or mental disability, medical condition, genetic information, or military and veteran status).
4. The complainant's signature or the signature of the complainant's authorized representative.

WECA will not intimidate, threaten, coerce, retaliate or discriminate against any Applicant or Apprentice because they have filed a complaint alleging discrimination or harassment; opposed a practice prohibited under this provision or any other Federal or State equal opportunity law; furnished information to, or assisted or participated in any manner, in any investigation, compliance review, proceeding or hearing under this provision or any Federal or State equal opportunity law; or otherwise exercised any rights and privileges under these provisions. In addition, WECA will not knowingly permit such actions by others. If an Applicant or Apprentice is subjected to such retaliation, a report of the incident should be submitted in writing immediately to the ATC in accordance with the Internal Complaint Procedures outlined above.