

**APPLICATION for APPRENTICESHIP in the SHEET METAL TRADE**



**Sheet Metal Joint Apprenticeship and Training Committee**

**PLEASE PRINT**

**Date** \_\_\_\_\_

**Name** \_\_\_\_\_ **S.S. No.** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Age** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Phone (cell)** \_\_\_\_\_

**Phone (home)** \_\_\_\_\_ **Email** \_\_\_\_\_

**Height** \_\_\_\_\_ **Weight** \_\_\_\_\_ **Married** ( ) **Single** ( )

**Male** ( ) **Female** ( )

**Are you a member of any of the following minority groups as defined by Federal regulations?**

- ( ) **Black**
- ( ) **Hispanic**
- ( ) **American Indian or Alaska Native**
- ( ) **Asian or Pacific Islander**

**In case of an emergency, contact** \_\_\_\_\_

**Have you served in the armed forces?** Yes ( ) No ( )

**How long?** \_\_\_\_\_ **Which Branch?** \_\_\_\_\_

**Did you graduate from high school?** Yes ( ) No ( ) **When?** \_\_\_\_\_  
(Transcript will be required)

**Check courses you have completed:** Algebra 1<sup>st</sup> year ( ) Algebra 2<sup>nd</sup> year ( ) Geometry ( )  
Trigonometry ( ) General Science ( ) Physics ( ) Drafting ( ) Other Schooling \_\_\_\_\_

**Have you ever applied for apprentice training before?** Yes ( ) No ( ) **If so, where?** \_\_\_\_\_

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Will you be able to provide reliable transportation for yourself? Yes ( ) No ( )

List your present employer and one previous employer.

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Company	Address	No. Months	Kind of Work
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Company	Address	No. Months	Kind of Work
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Do you seek credit on apprenticeship term for previous experience? Yes ( ) No ( )

Before this application can be considered you must: provide an official transcript of your high school record, proof of age and physical condition and take the required aptitude and other tests.

If accepted as a Sheet Metal apprentice, I agree to attend school on my own time and pursue the prescribed course of study related to the Sheet Metal trade; to comply with local standards of apprenticeship for the Sheet Metal trade; and to abide by the decisions and rules of the persons responsible for conducting the apprenticeship program.

Signed \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

**SHEET METAL WORKERS  
JOINT APPRENTICESHIP TRAINING COMMITTEE  
840 W. BIRCHWOOD STREET  
MORTON, IL 61550**

**PHONE NUMBER: 309-682-3141  
EMAIL: [smwjatc@smw1.com](mailto:smwjatc@smw1.com)  
FAX NUMBER: 309-291-0346**

**INSTRUCTION TO APPLICANTS**

**Applicants for the apprenticeship in the Sheet Metal Trade must comply with the following:**

- 1. Obtain a photocopy of your high school diploma or equivalent**
- 2. Obtain a copy of your birth certificate. This must be a certified copy from the courthouse or health department.**
- 3. Request transcript of your high school grades. The school must mail this directly to the address above or fax directly to the fax number above.**
- 4. Obtain a small photograph of yourself – this photo will not be returned.**

**These items must be received with the application-any application without all the above items WILL NOT BE ACCEPTED.**

**After your application has been accepted, you will be notified when the next test period is scheduled. Tests are usually scheduled for the spring and/or the fall.**

**Applicants who qualify for personal interviews will be notified.**

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## PERSONAL EXPERIENCE FORM

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### Sheet Metal Workers' Joint Apprenticeship Committee Local 1

#### Marking Instructions

Use a No. 2 pencil

- \*Do not use ink, ballpoint, or felt tip pens.
- \*Make solid marks that fill the response completely.
- \*Erase cleanly any mark you wish to change.
- \*Make no stray marks on this form.

NAME: \_\_\_\_\_

SSN#: \_\_\_\_\_

#### Directions:

On the following pages you will be asked to indicate the extent to which you have experienced, have been educated in, or are currently active in areas related to apprentice training in sheet metal. Please be sure to read each question carefully, as different questions may require different responses (i.e., month, years, semesters, etc.). There are a total of 10 sections in all.

In order to ensure accurate scoring of all responses, using a #2 pencil only fill in each oval completely. If you make a mistake, be sure to erase as cleanly as possible.

You are expected to be honest and accurate when completing this form. False or misleading information to any of the questions below will result in immediate elimination as a candidate for the Sheet Metal Workers' Joint Apprenticeship program. Local 1.

I understand that if I provide false or misleading information to any of the questions below, it will result in the immediate elimination as a candidate for the Sheet Metal Workers' Joint Apprentice program, Local 1 or dismissal from the apprentice program.

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Signature

Date

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## PERSONAL EXPERIENCE FORM

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### 1. Construction Experience.

For the following items, to calculate the total number of hours worked, multiply the total number of weeks you were employed by the number of hours you worked per week. For example:

If you worked 25 weeks as a sheet metal helper (only) and you worked 40 hours per week, then you have worked a total of 1000 hours in sheet metal.

$$25 \text{ wk} \times 40 \text{ hr.} = 1000 \text{ total hours worked}$$

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	0	up to 1000	up to 2000	2000+
Sheet Metal Worker    total hours worked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you ever worked as a:

Sheet Metal Worker Yes  No

Sheet Metal Worker Helper Yes  No

Truck Driver for a sheet metal company Yes  No

Customer relations or sales person (in sheet metal industry) Yes  No

Service/Maintenance/Repair person (in sheet metal industry) Yes  No

(Company Name) \_\_\_\_\_

	0	up to 1000	up to 2000	2000+
Service            total hours worked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Commercial Heating Yes  No

Commercial A/C Yes  No

Residential Heating & A/C Yes  No

(Company Name) \_\_\_\_\_

**Other Construction Experience**

	<b>0</b>	<b>up to 1000</b>	<b>up to 2000</b>	<b>2000+</b>
<b>total hours worked</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(i.e., laborer, trowel trades, carpenter, electrician, sheet metal, etc.)

(What Trade(s)) \_\_\_\_\_

**2. Vocational Training School or Career Academy.** Yes  No

(name of school) \_\_\_\_\_

**3. Pre-apprentice Training Certificate** Yes  No

(name of organization) \_\_\_\_\_

(length of program) \_\_\_\_\_

**4. Have you attended a J.A.C. sponsored open house at this Sheet Metal School?** Yes  No

**5. High School Mathematics, C average or better.**

semester(s) 0 1 2 3 4 5 6 7 8

(name of school(s)) \_\_\_\_\_

**6. High School Mechanical Drawing, C average or better.**

semester(s) 0 1 2 3 4 5 6 7 8

(name of school(s)) \_\_\_\_\_

**7. High School Shop/Vocational Classes, C average or better.**

(class) \_\_\_\_\_ semester(s) 0 1 2 3 4 5 6 7 8

(class) \_\_\_\_\_ semester(s) 0 1 2 3 4 5 6 7 8

(class) \_\_\_\_\_ semester(s) 0 1 2 3 4 5 6 7 8

(class) \_\_\_\_\_ semester(s) 0 1 2 3 4 5 6 7 8

**8. High School Organized Athletics.**

(sport) \_\_\_\_\_ years: 0 1 2 3 4  
(sport) \_\_\_\_\_ years: 0 1 2 3 4  
(sport) \_\_\_\_\_ years: 0 1 2 3 4

**9. High School Organized Student Activities**

(activity) \_\_\_\_\_ years: 0 1 2 3 4  
(activity) \_\_\_\_\_ years: 0 1 2 3 4  
(activity) \_\_\_\_\_ years: 0 1 2 3 4

**10. Post-High School Organized Activities (i.e., sports, organizational membership, etc.).**

**Team sports, athletics** years: 0 1 2 3 4 5 6 7 8  
Hrs/wk: 0-1 1-2 2-3 3-4 4+

**Individual sports, athletics** years: 0 1 2 3 4 5 6 7 8  
Hrs/wk: 0-1 1-2 2-3 3-4 4+

**Hobby clubs, photography, or crafts** years: 0 1 2 3 4 5 6 7 8  
Hrs/wk: 0-1 1-2 2-3 3-4 4+

**Volunteer/charitable/organization** years: 0 1 2 3 4 5 6 7 8  
Hrs/wk: 0-1 1-2 2-3 3-4 4+

**Can you provide documents to validate the above questions:** Yes  No   
(payroll stubs, w-2 forms, transcripts, certificates, etc.)

**In the space below, give one additional fact about yourself, which you feel, will make you a successful sheet metal apprentice.**

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## **SHEET METAL WORKERS' JOINT APPRENTICESHIP COMMITTEE INFORMATION SHEET**

**The following information is provided to any person interested in choosing the sheet metal trade as a career:**

1. The apprenticeship term is four years including a probation period as determined by the Joint Apprenticeship Committee.
2. An apprentice works on-the-job during the day and attends two (2) nights of training a week for four years. Each night consists of three (3) hours of schooling. The school year normally runs from September to April.
3. School classes include plan reading, drawing, mathematics, shop work including welding and soldering.
4. An apprentice must maintain a "C" average minimum when attending school.
5. An apprentice applicant will take an aptitude test. Applicants will be ranked by test scores.
6. An apprentice applicant will fill out a Personal Experience Form. This information will be scored and combined with aptitude test scores.
7. Individuals who have previously been apprentices in the program and who have been dismissed two or more times will not be ranked or selected for an apprenticeship.
8. An apprentice candidate must pass a drug test and possibly a physical as a condition of employment. (Failure will cause the applicant to be dropped from the program.)
9. An apprentice must have and maintain a valid driver's license and transportation to get to the job and drive the employer's vehicles as a condition of employment and for the term of apprenticeship.
10. Apprentices are eligible for health and welfare benefits after accruing 600 hours in covered employment.
11. Apprentices are initiated into the local union upon satisfactory completion of the apprenticeship and payment of the initiation fee.
12. All apprentices are subject to rules and regulations established by the Joint Apprenticeship Committee.
13. Apprentices must comply with a dress code.



**SHEET METAL WORKERS' JOINT APPRENTICESHIP COMMITTEE**  
**INFORMATION SHEET**  
**ESSENTIAL FUNCTION FORM**

The purpose of this Essential Function Form is to list the functions the candidate must be able to safely perform to be an apprentice sheet metal worker. Safe performance includes the safety of the apprentice and other individuals. The necessary functions and working conditions may be fulfilled with reasonable accommodations, which do not create an undue hardship or financial burden to the sheet metal worker contractor or the apprenticeship program in the three (3) categories listed below:

**I. PHYSICAL**

- A. Color Visual Acuity-Plan Reading-Depth Perception-Peripheral Vision
- B. Exercise-Walking-Climbing Stairs
- C. Standing for Two 4-hour periods
- D. Kneeling-Crawling-Sitting-Squatting-Stooping
- E. Manual Dexterity-Reaching-Stretching-Bending-Pushing
- F. Lifting 50 pounds
- G. Working-8 Hours-Possible Overtime Required-Saturday-Sunday
- H. Working Outdoors-Extreme Hot and Cold Temperatures
- I. Sun Exposure-Wind
- J. Dirt-Dust-Mud-Grease-Fumes and Chemicals must be tolerated.

**II. MENTAL**

- A. Heights-Ladders-Scaffold-Hoist
- B. Confined Spaces-Pipe Chases or Shafts-Ditches
- C. Insects-Basements
- D. Animals-Dogs-Cats-Rodents
- E. Foul Odors
- F. Assuming Responsibilities
- G. Termination (Laid Off)
- H. Seasonal Work
- I. Following Directions
- J. Driving or Operating Equipment
- K. Testing-Related Studies-Academic Performance

**III. SOCIAL**

- A. Communications with Home Owner-Boss-Employees
- B. Accepting Responsibility
- C. Job Priority
- D. Taking Orders and Getting Along with Others
- E. Long Travel Time and Distance to Job
- F. Customer Relations
- G. Working with a Partner
- H. Professional Appearance and Work Ethics
- I. Start as Low Person on Job (Lack of Seniority)

**SHEET METAL WORKERS' JOINT APPRENTICESHIP COMMITTEE  
INFORMATION SHEET  
COMPLAINT PROCEDURE**

**TITLE 29, CFR**

**SECTION 30.11(a) AND (b)**

Any Apprentice or applicant for apprenticeship who believes that he or she has been discriminated against on the basis of race, color, religion, national origin, or sex, with regard to apprenticeship or that the equal opportunity standards with respect to his or her selection have not been followed in the operation of an apprenticeship program, may personally or through an authorized representative, file a complaint with the Department of Labor. The complaint must be filed, in writing, not later than 180 days from the date of the alleged discrimination or specified failure to follow the equal opportunity standards. The complaint must include the name, address and telephone number of the person allegedly discriminated against, the program sponsor involved, and a brief description of the circumstances of the failure to apply the equal opportunity standards and must be signed by the complainant.