#### **WE ARE YOUR DOL**

NYS Department of Partment of Labor Apprentice Training	

NYSDOL Use Only:	Sponsor No	
NYSDOL Use Only: Sponsor No  ✓ New Program □ Reactivation □ Revision □ Recertification		

MAY 02 2022

New York State

Registered Apprenticeship Training Program

### **Central Office**

## **Sponsor Information Sheet and Instructions**

Form AT 9 is used to collect data regarding sponsors and signatories for the New York State (NYS) Registered Apprenticeship Training Program. Please read the instructions on pages 3 and 4 before completing this form.

Sect	tion I	
A.	Sponsor name: Altium Packaging, LP	
B.	Trade(s): 46-518 Plastic Process Technician, 66-378A Plant Maintenance Mechanic	<u>c (4</u> year
C.	Type of Apprenticeship Training Program (check one):  1.☑ Individual Non-Joint 2.☐ Individual Joint 3.☐ Group Non-Joint* 4.☐ Group Joint (JAC/JATC)	)*
*Fe	or sponsors of group programs only (3 and 4) - See instructions for signatory list submission information.	•
D.	Name of entity completing this form: Individual Employer/Spansor (Altium Packaging, LP)	
E.	Entity completing this form (check one):	
	☑ Individual Employer/Sponsor ☐ Union ☐ JAC/JATC ☐ Association	
	☐ Employer/Signatory company serving on the JAC/JATC, Board of Directors, or other governing body	
F.	Mailing address: Street: 2500 Windy Ridge Parkway, Suite 1400	
G.	City/Town: Attacta State: <u>GA</u> Zip Code: <u>30339</u> Email: H. Phone: <u>(678)529 - 2029</u> I. Fax:	
J.	Federal Employer Identification Number (FEIN):	
K.	NYS Unemployment Insurance Employer Registration (ER) Number:	
L.	Is this entity required to report any employee wages under this FEIN to the NYS Department of Tax and Finance?	□No
M.	Type of Entity (check one and provide attachments as noted in the instructions):  ☑ Corporation ☐ Partnership ☐ Sole-Proprietor ☐ LLC ☐ LLP ☐ Other	
N.	How many years has your organization been in business?23	
0.	Within the past five (5) years, have you done business under a different name? Yes If 'Yes', provide attachments as noted in the instructions.	No
P.	If this is part of a new program application or if your entity is new to an existing program, within the past five (5) years, has your organization, any substantially owned-affiliated entity,** any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any officer, any partner, or any proprietor been a sponsor of, or signatory to, a NYS Registered	-
	Apprenticeship Program?	☑ No
	ion II slete all questions, (1 – 10), in this section and provide attachments as noted in the instructions.	
Withir prede office	the past five (5) years, has your organization, any substantially owned-affiliated entity,** any cessor company or entity, any owner of 10% or more of the entity's shares, any director, any r, any partner, or any proprietor been the subject of:	
1.	Any conviction for a crime under state or federal law?	☑ No
	Any indictment or pending indictment for conduct constituting a crime under state or federal law? \sum Yes	Ø№
3.	Any grant of immunity for conduct constituting a crime under state or federal law?	☑ No

AT 9 (09/21)

<sup>\*\*</sup> For the definitions of a 'substantially owned-affiliated entity' see the end of Section I in the instructions.

4.	Any suspension, bid rejection, or disapproval by any governmental entity of any proposed contract or subcontract for lack of responsibility, or denial or revocation of pre-qualification	
		☑ No
5.	Any federal, state, or municipal debarments, including Workers' Compensation or Public Work?	☑ No
6.	Any pending or open investigation of a possible violation, or determination of a violation of any federal law or regulation including, but not limited to, investigations by the National Labor Relations	
		☑ No
7.		□ No
7.	b. Any OSHA citation that resulted in a final determination classified as serious, willful, or repeat? ✓ Yes	□ No
8.	a. Any pending or open investigation of a possible violation, or determination of a violation of New York State law or regulation, any other state law or regulation, or any municipal law or regulation including, but not limited to, investigations by the Bureau of Public Work, the	
		☑ No
	b. If 'Yes', was the violation determined to be willful?	☑ No
9.	Any investigations, claims, or lawsuits before the US Equal Employment Opportunity Commission (EEOC), USDOL Office of Federal Contract Compliance Program (OFCCP), NYS Division of	
	Human Rights, federal or state courts, or local Civil Rights Commissions? ✓ Yes	☐ No
10.	Any stipulations, settlement, consent order, or like agreement involving any state, municipal, or	
		☑ No
	After completing Sections I and II, you must sign Section III, and have it notarized.	
Secti	on III	
Certifi	ication – I, the undersigned, recognize that I submit this questionnaire to permit the New York State	
Depart serving	tment of Labor to review the background of the applicant, sponsor, union, or signatory employers and associat g as a member of the JAC/JATC or other governing body at the time of new program application, during progra ion, at recertification, or as otherwise deemed appropriate by the Department.	
I certi	ify:	
	90 - W	
•	<ul> <li>That the Department may use its sole discretion to choose the means to determine the truth and accuracy of all statements made herein.</li> </ul>	у
•	<ul> <li>That intentional submission of false or misleading information may constitute a Class A misdemeanor under Penal Law (PL § 210.35), and may be punishable by a fine of up to \$1,000 (PL § 80.05(1)) and/or imprisonment of up to one year (PL § 70.15(1)).</li> </ul>	
	<ul> <li>That the information submitted in this questionnaire and any attachments is true, accurate, and complete</li> </ul>	
particip	ndersigned recognizes that any adverse information uncovered regarding any applicant, sponsor, signatory, or pating in a Joint Apprenticeship Committee, or other sponsoring association, may adversely affect the sponsor	's
applica	ation request or program. Signing this document constitutes permission to release this information (including L	Л
IIIIOIIII	ation) concerning the entity completing this form to the program sponsor.	77
0: 1	2-14-20	2
Signati	ure of CEO, Chair, or representative granted legal authority to bind the Entity Date	
Print na	ame and title: Ut, I alot and Development,	_
Sworn	to me this: 14 day of February 2022 finding M Will	_
	Signature of Motary Public or Commissioner of Deeds NYSDOLOGIE Use Only NYS Department of Labor	
.11	Applentice Training	
The	** AMMIC **	
ET!	Apprenticeship Unit MAY 0 2 2022	
FULTON	MAR 2 2022	
FO.	Central Office	
30	ROCHESTER	
20	New Year Burgaran State	
AT 9 (	09/21)	2 of 4

MAY 02 2022

#### WE ARE YOUR DOL

Department — of Labor www.labor.ny.gov

Central Office

# **Apprentice Training Program Registration Agreement**

	Revisi									State	e Use Only	
	Either S. Rimmer, C. Toy, or D. Riley are able to make program changes.								AT Sponsor No.			
									ATP Code 4C F10			
										46-518		
										Effective Date of AT Program		
1.	Name of	Sponsor	Altiun	n Pack	aging	, LP						
2.	Mailing A	Address:	18 Cham	peney Te	errace	Roches	ter	NY		14605	Monroe	
			(number			(city)			(state)	(zip code)	(county)	
3.	Actual A	ddress:	Same as			(-'t-\)			( 1			
		- 1	(number 8			(city)			(state)	(zip code)	(county)	
4.	Telephor	ne No.: \	585)672	-1255			Ext	Fax	κ No.: NO	JINE		
5.	E-mail A											
6.	Trade/O	ccupation	Plasti	ic Proc	ess	Γechnici	an					
7.	No. Emp	loyees:	71	No. Appre				neyworker	.s: 10	8. Ratio: 1:	1;1:1	
9.	DOT Coo	<sub>le:</sub> 556	.260-5	40			1	0. Leng	th of Proc	<sub>iram:</sub> 48	months	
										Standard o		
										of Wages: 4/1/2		
13.	Minimu	n Journe	yworker R	(ate: \$	-1004 8000-200	_ per		14. Епес	ctive Date	of wages:		
15.	Apprent	ice wage	progress	ion for eac	ch perio	d – in mont	ths (M) or	hours (H)				
	1	2	3	4	5	6	7	8	9	10		
	M 🔳	M ·	M <b>•</b>	M 🔳	М	М	М	М	М	М		
	H 🔲	н 🔲 12	н 🔲 12	н 🔲 12	н 🗆	н	н	н 🗆	н 🗆	н 🗆		
	\$20	\$21.50	\$23.00	\$24.50								
16	There				41		bis states					
16.	THE SP	orisor agr	ees to col	mply with	trie pro	VISIONS ON L	ilis side ai	id on the	reverse o	f this agreement.		
17.	10	n	1/2			04/2	6/2027 18	s. C	A	-6-	4/26/2023	
	Signature	e of Offici	al Sponso	r Represe	entative	Date		Signa	ture of U	<del>nion</del> Representativ	e Date	
	Steven F		HR Analys							a HR Specialist		
		Pri	nt Name a	and Title					Print Nar	ne, Title, and <del>Unior</del>	Name	
10												
19.		Signa	ture New	York Stat	e Depa	rtment of La	abor				Date	
	(	\	10					1				
			101				4	4/24/2	2			
0 (11	/20)	D. R	ILEY -	Product	100 A	ANAGER	DA	TE				

AT 10 (11/20)

## NYS Department of Labor Apprentice Training

MAY 02 2022

## **WE ARE YOUR DOL**

NEW YORK STATE OF THE PROPERTY	Department ————of Labor					
Apprenticeship Training Program						

Sponsor Code	
Trade Code 46-518	_

#### **Central Office**

## **Related Instruction Availability**

Trade: Plastic Process Technician			•	
Sponsor Name: Altium Packaging, LP				
Sponsor Representative: Steven Rimmer				
Sponsor Address:				
No. & Street: 18 Champeney Terrace		City: Ro	chester	
County: Monroe	_ State: NY		Zip Code: 1460	5
Sponsor Telephone No.: 678-529-2029				
Proposed Number of Apprentices: 2				
AT Office				
Name: NYSDOL - Apprenticeship Training Unit				
No. & Street: 276 Waring Road				
City: Rochester	State: NY		Zip Code: 146	09
Apprentice Training Representative:			_ Date Prepared:	
Related instruction is <b>not</b> available.	Related instr	uction is	available at:	
School				
Name: Monroe Community College - Applied Technolog	gy Ctr			
No. & Street: 2485 West Henrietta Rd				
City: Rochester	_ State: NY		_ Zip Code: 1462	23
School Representative Contact Information:				
Name: Mike Smith				
Telephone No.: (585) 685-6305	Email:			
School				
Name: Penn Foster (Online)				
No. & Street: http://www.workforcedevelopment.com/ap	prenticeship.h	ntml		
City:	_ State:		_ Zip Code:	
School Representative Contact Information:				
Name: Harold Ayers				
Telephone No.: 800-672-9377	Email: ,			· · · · · · · · · · · · · · · · · · ·
DLEA				
Name:				
No. & Street: 30 Hart Street				
City: Rochester	State: NY		Zip Code: 146	305
Signature of DLEA		_ Dat	e Prepared:	

## NYS Department of Labor Apprentice Training

MAY 02 2022

### WE ARE YOUR DOL

Sponsor Code:	
Trade Code:	46-518

**Central Office** 



**Apprentice Training Recruitment Notification and Minimum Qualifications** 

Sponsor: Altium Packaging, LP
Located at: (Address) 18 Champeney Terrace, Rochester, NY 14605
Is presently accepting applications for Apprenticeship Training Positions: List estimated number of openings:
In the occupation of: (List Trade)
If you are interested in taking advantage of this training opportunity and meet the following qualifications, you are eligible to apply.
Minimum Qualifications  Minimum Age: 18 yrs Minimum Education: HSD, or equivalency (TASC, or GED)
Physical Condition: Be physically able to perform the work required as determined by:
Verbal Statement. Must take and pass a drug test and background investigation, Audiogram, paid by the sponsor at time of hire, or prior to enrollment. Must have manual dexterity.
(Note: Costs for medical examination, if required, are at the expense of the sponsor. Additionally, any testing fees and permitted application fees charged to an applicant may not result in a profit for the sponsor.)
Other: Must be able to stand, or sit for prolonged periods of time. Must be willing to work in an industrial setting, which may include strong smells/odors and loud noises.
Other: Must be legally able to work in the United States. Must be able to lift a minimum of 40 lbs unassisted.
Other: Must have reliable transportation to and from work and related classroom instruction at the approved school. Must be willing to work nights, weekends, and holidays, as needed.
Application forms may be obtained: From: To:
Name: Catherine Toy - Area HR Specialist
Address: 18 Champeney Terrace, Rochester, NY 14605
Days: Monday - Friday Times 9am -3pm
Phone: (585) 672-1259 Email:
Special Instructions:
All Applications Must be (please check) Received Postmarked No Later Than:

MAY 0 2 2022

WE ARE YOUR DOL

_	NEW YORK STATE	Department of Labor	
	7	or.ny.gov	

Sponsor Code		_
Trade Code(s)	46-518	

Central Office

# Selection Standards and Evaluations

Name of Candidate:	Trade: Plastic Process Technician				
Address: City:					
Only those checked apply.  Educational Achievement		Maximum Points Allowable	Number of Years Credited	Score	
√ 2 Points for Each Year of Education Past Grade 12 or	Total	28			Total
Equivalent as Recognized by Local Educational Authorities		8		Suff War	
Points for Each Year of Related Technical Education Past Grade 10 or Equivalent as Recognized by Local Educational Authorities	-	12	ш	1000	de de la come
√ 4 Points for Each Trade Related Adult or Continuing Education Course		8			de especial
Completed Other:				27 pt 18	
Work Experience	Total	20			Total
✓ 2 Points for Each Year of Trade Related Work Experience		10	La ly digni	To the same of	a programme
Points for Each Year of Active Military Experience		10			SINGE STREET
Points for Each Year of General Work Experience		T TI B	a They		Lance of 1998
Other :					
Seniority	Total	10			Total
✓ 5 Points for Each Year of Employment with The Sponsoring Firm		10		BICHER!	the good of this
Other:				1915	Lya-rumai
Job Aptitude	Total				Total
Name of Aptitude Test:		FIRST TON			
Administered by		1 10	The Control		uni dipose
Other:					
Oral Interview: Not to Exceed 40% of Total Score	Total	20			Total
✓ 1-5 Ability to Communicate		5	(1.44 m) (1.488)		I I I TARAGO
✓ 1-5 Willingness to Accept Obligation of Apprenticeship		5			100
✓ 1-5 Ability to Reason and Comprehend		5			
✓ 1-5 Interest and Motivation					
Other:		(- I)			
Other:					_
Total Allowable Points	$\rightarrow$	78	Total Score →	ning e	
		Rank _			
Evaluated by:		Date:			and the second
(Name)			11 2 11	1	9 44 55 11
Sponsor Name: Altium Packaging, LP	011001100		ng William		and unincide
Sponsor Address: 18 Champeney Terrace, Rochester, NY 14605					

#### NYS Department of Labor Apprentice Training

MAY 02 2022

WE ARE YOUR DOL



www.labor.ny.gov

Received Apprenticeship Unit

APR 2 7 2022

Central Office

## Non-Discrimination Plan (Short Form)

ROCHESTER

A. Equal Opportunity Pledge: Our company recognizes that all persons shall have equal opportunity in employment and apprenticeship training, and agrees to adhere to the following:

The recruitment, selection, employment, and training of apprentices during the apprenticeship shall be without discrimination because of race, creed, color, religion, national origin, age, sex, disability, veteran status, marital status, or arrest record. The sponsor will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required under Title 29 of the Code of Federal Regulations, Part 30; Title 12 of the Official Compilation of Codes, Rules and Regulations of the State of New York, Part 600; and the Americans with Disabilities Act of 1990.

B. **Sexual Harassment Prevention Policy:** Our policy is that sexual harassment is **prohibited**. This policy applies to internal activity towards employees, interaction between employees and actions and treatment directed towards employees, from any person or persons at the worksite whether or not they are employees of this organization.

Equal Employment Opportunity Commission (EEOC) guidelines provide that verbal or physical conduct of a sexual nature may constitute sexual harassment when:

- Submission to such contact is made either explicitly or implicitly a term or condition of an individual's employment;
- Submission to, or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; and/or
- Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

When an employee has a complaint of sexual harassment, the complaint should be brought promptly to the attention of his/her immediate supervisor, or to the next level of supervision. These persons have the authority and responsibility to resolve the complaint. If the complaint is not satisfactorily resolved, the employee has the right to contact the NYS Division of Human Rights and the Federal Equal Employment Opportunity Commission. The complaint will be investigated; if substantiated, prompt action will be taken to stop the harassment immediately and prevent recurrence.

If an employee is an **apprentice**, the program's apprenticeship administrator and the NYS Apprenticeship Director **must** be notified of the complaint.

C. Minimum Qualifications and Selection Standards: It is agreed that the minimum qualifications and selection standards

			on form AT 505, Apprentice Training Recruitment Notification and Nodes and Evaluations, on file with the Department.	Minimum Qualifications, and form
D.	Recruit	tment: It is agreed t	that the sponsor will recruit applicants for apprenticeship by (Check	One):
		Listing all appren days before selec	tice openings with the NYS Job Bank $(\underline{www.newyork.us.jobs/})$ for a ctions are made.	minimum of five full working
	$\square$		ent to present employees of the sponsor and/or union members of this program. Resulting vacancies will be listed with the NYS Job Bank	, ,
		0 1 1	ntices by methods other than those above. A detailed statement of that attached and approved by the Commissioner of Labor prior to being	
beha	alfofthe	sponsor, I certify th	nat it is our intent to fulfill these Equal Opportunity Standards.	
n atur	re of Spo	onsor:	1-1/2	04/27/2022
.,,	о		The above signature must be the employer's Chief Executive Officer or the Chair of the Joint Apprenticeship Committee or their authorized representative.	Date
	S	teven Rimmer	HR Analyst	

	Print Name and Title		
pproved by:	New York Otata Davada and Clabor		
	New York State Department of Labor		Date
ponsor Name Altium Packaging, LP	Sponsor Code	No. of Apprentices	

On

Sig