



New York State
Registered Apprenticeship Training Program

NYS Department of Labor
Apprentice Training

Sponsor Information Sheet and Instructions

OCT 13 2021

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.

Central Office

Section I

- A. Sponsor name: CareerWise New York
- B. Trade(s): Software Developer
- C. Type of Apprenticeship Training Program (check one):
 1 Individual Non-Joint 2 Individual Joint 3 Group Non-Joint* 4 Group Joint (JAC/JATC)*
 *For sponsors of group programs only (3 and 4) – See instructions for signatory list submission information.
- D. Name of entity completing this form: CareerWise New York
- 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: 349A State St.
 City/Town: Brooklyn State: NY Zip Code: 11217
- G. Email: [REDACTED] H. Phone: 718-852-0508 I. Fax: _____
- J. Federal Employer Identification Number (FEIN): [REDACTED]
- K. NYS Unemployment Insurance Employer Registration (ER) Number: [REDACTED]
- L. Is this entity required to report any employee wages under this FEIN to the NYS Department of Tax and Finance?..... Yes 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? 1
- O. Within the past five (5) years, have you done business under a different name?..... Yes No
 If 'Yes', provide attachments as noted in the instructions.
- 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? Yes No
 If 'Yes', provide attachments as noted in the instructions.

Section II

Complete all questions, (1 – 10), in this section and provide attachments as noted in the instructions.

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 the subject of:

- 1. Any conviction for a crime under state or federal law?..... Yes No
- 2. Any indictment or pending indictment for conduct constituting a crime under state or federal law?..... Yes No
- 3. Any grant of immunity for conduct constituting a crime under state or federal law?..... Yes No

** 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 for any bid in any state or municipality, or a voluntary exclusion agreement?..... Yes No
5. Any federal, state, or municipal debarments, including Workers' Compensation or Public Work?..... Yes 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 Board (NLRB) or the United States Department of Labor (USDOL) Wage and Hour Division?..... Yes No
7. a. Any pending or open Occupational Safety and Health Administration (OSHA) investigation?..... Yes No
 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 Division of Safety and Health, or the Division of Labor Standards?..... Yes No
 b. If 'Yes', was the violation determined to be willful?..... Yes 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 federal enforcement action (judicial or regulatory) **other than those covered above**?..... Yes No

After completing Sections I and II, you must sign Section III, and have it notarized.

Section III

Certification – I, the undersigned, recognize that I submit this questionnaire to permit the New York State Department of Labor to review the background of the applicant, sponsor, union, or signatory employers and association(s) serving as a member of the JAC/JATC or other governing body at the time of new program application, during program probation, at recertification, or as otherwise deemed appropriate by the Department.

I certify:

- That the Department may use its sole discretion to choose the means to determine the truth and accuracy of all statements made herein.
- 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)).
- That the information submitted in this questionnaire and any attachments is true, accurate, and complete.

The undersigned recognizes that any adverse information uncovered regarding any applicant, sponsor, signatory, or union participating in a Joint Apprenticeship Committee, or other sponsoring association, may adversely affect the sponsor's application request or program. Signing this document constitutes permission to release this information (Including UI information) concerning the entity completing this form to the program sponsor.

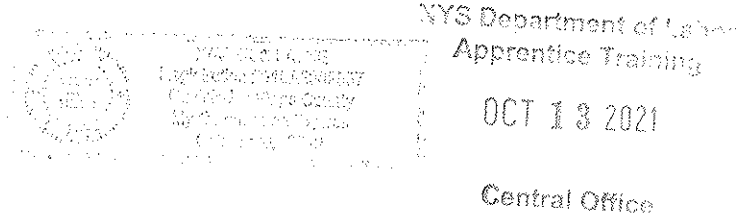
Signature of CEO, Chair, or representative granted legal authority to bind the Entity _____ Date 09 / 08 / 2021

Print name and title: Barbara Chang Executive Director

Sworn to me this: 17 day of Sept. 2021 Signature of Notary Public or Commissioner of Deeds _____

NYS DOL Official Use Only

Field Receipt Date Stamp





Apprentice Training Program Registration Agreement

Revision

Nature of Change: NEW PROGRAM

State Use Only
AT Sponsor No.
ATP Code
Effective Date of AT Program

- 1. Name of Sponsor: CareerWise New York
- 2. Mailing Address: 349A State St. Brooklyn NY 11217 Kings County
(number & street) (city) (state) (zip code) (county)
- 3. Actual Address: 349A State St. Brooklyn NY 11217 Kings County
(number & street) (city) (state) (zip code) (county)
- 4. Telephone No.: 718-852-0508 Ext. _____ Fax No.: _____
- 5. E-mail Address: _____
- 6. Trade/Occupation: Software Developer
- 7. No. Employees: 14 No. Apprentices: 52 No. Journeyworkers: 47 8. Ratio: 1:1,11
- 9. DOT Code: _____ 10. Length of Program: Compt. months
- 11. Apprentice Probationary Period: 9 months 12. Work process: Standard or Revised
- 13. Minimum Journeyworker Rate: \$ NA per AT401 14. Effective Date of Wages: 05/01/2020

15. Apprentice wage progression for each period – in months (M) or hours (H)

	1	2	3	4	5	6	7	8	9	10
M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>
H <input checked="" type="checkbox"/>	H <input checked="" type="checkbox"/>	H <input checked="" type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>
PER	401									

16. The sponsor agrees to comply with the provisions on this side and on the reverse of this agreement.

17. [Signature] 09 / 08 / 2021
Signature of Official Sponsor Representative Date
Barbara Chang Executive Director
Print Name and Title

18. _____
Signature of Union Representative Date

Print Name, Title, and Union Name

19. _____
Signature New York State Department of Labor

NYS Department of Labor
Apprentice Training

OCT 13 2021

Central Office



NOV 04 2021

Apprenticeship Agreement

Please send to your regional DOL office:

9 Bond Street, 4th Floor, Room 4570, Brooklyn NY

I. Apprenticeship Agreement Central Office Sponsor No. _____ ATP Code _____

Name of Apprentice (Last, First, M.I.) MOCK AT401		Social Security Number		1. Name of Program Sponsor CareerWise New York /JPMorgan Chase	
Address of Apprentice (no. and street)				Physical address of Program Sponsor (no. and street) 349A State St.	
City	County	State	Zip code	City	County
				Brooklyn, NY, 11217	
Answer both A and B A. Ethnic Group <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino B. Race <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander				Mailing address of Program Sponsor (no. and street) 349A State St.	
				City County State Zip code Brooklyn, NY, 11217	
Sex <input type="checkbox"/> M <input type="checkbox"/> F	Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Home & Cell phone numbers H C	Birth date	2. Trade: <input type="checkbox"/> Time-based <input checked="" type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid Software Developer	
Has the apprentice received any Certificate of Completion from a State or Federal Apprenticeship Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," Trade State			3. Start Date	4. Length of program (Months) COMPENTEN	5. DOL Apprentice Probation Period for Completion Rates (Months) 9 months
6. Related and Supplemental Instruction (RI) Provider(s) and location(s)				RI Compensated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7. Minimum Journey-Worker Rate PER 401
8. Credit for previous training or experience: Months Points Sections <input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input type="checkbox"/> Previous Experience (Employer name):					

9. Apprentice Wage Progression (Without Benefits) for each Period. Choose one: Months Hours Points Sections

1	2	3	4	5	6	7	8	9	10
H	H	H							
\$20	\$21	\$22							

The Sponsor and the Apprentice Agree to the Terms on Page 2 of this Form.

Signature of Apprentice and Parent/Guardian if age 16-17 _____ Date _____ Signature of Official Sponsor Representative _____ Date **6.9.21**

Registered by the New York State Department of Labor:

Signature New York State Department of Labor _____ Date _____

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Rank Verify	_____	_____
Data Entry	_____	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS AGREEMENT WITHIN 30 CALENDAR DAYS OF THE REQUESTED START DATE.

II. Worksite Training Completion or Termination

Check one: Completed Worksite Training Terminated for Cause (Explain in Comments) Quit (Lack of Work) Layoff (Lack of Work) Program Termination Transfer

Completion or Termination Date _____
Comments _____

Signature of Official Sponsor Representative _____ Date **6.9.21** Print Name **Barbara Chang**

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS FORM WITHIN 30 CALENDAR DAYS OF THE COMPLETION/TERMINATION DATE.

STATE USE ONLY

III. RI Completion

Apprentice has satisfied the RI requirements. Completion date: _____
 Apprentice has not satisfied the RI requirements.

Signature of DLEA Representative _____ Date _____ Print Name _____

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____



NOV 04 2021

Apprenticeship Agreement

I. Apprenticeship Agreement

Sponsor No. _____

ATP Code _____

Name of Apprentice (Last, First, M.I.) MOCK AT401		Social Security Number		1. Name of Program Sponsor CareerWise New York /Mastercard	
Address of Apprentice (no. and street)				Physical address of Program Sponsor (no. and street) 349A State St.	
City	County	State	Zip code	City	County
				Brooklyn, NY, 11217	
Answer both A and B A. Ethnic Group <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino B. Race <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander				Mailing address of Program Sponsor (no. and street) 349A State St.	
				City County State Zip code Brooklyn, NY, 11217	
Sex <input type="checkbox"/> M <input type="checkbox"/> F	Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Home & Cell phone numbers H C	Birth date	2. Trade: <input type="checkbox"/> Time-based <input checked="" type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid Software Developer	
E-mail address					
Has the apprentice received any Certificate of Completion from a State or Federal Apprenticeship Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," Trade			3. Start Date	4. Length of program (Months) COMPENTEN	5. DOL Apprentice Probation Period for Completion Rates (Months) 9 months
6. Related and Supplemental Instruction (RI) Provider(s) and location(s)				RI Compensated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7. Minimum Journey-Worker Rate PER 401
8. Credit for previous training or experience: Months Points Sections <input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input type="checkbox"/> Previous Experience (Employer name):					

9. Apprentice Wage Progression (Without Benefits) for each Period. Choose one: Months Hours Points Sections

1	2	3	4	5	6	7	8	9	10
H	H	H							
\$18	\$19	\$20							

The Sponsor and the Apprentice Agree to the Terms on Page 2 of this Form.

Signature of Apprentice and Parent/Guardian if age 16-17 _____ Date / / Signature of Official Sponsor Representative  Date 6.9.21

Registered by the New York State Department of Labor:

Signature New York State Department of Labor _____ Date / /

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Rank Verify	_____	_____
Data Entry	_____	_____


THE DEPARTMENT OF LABOR MUST RECEIVE THIS AGREEMENT WITHIN 30 CALENDAR DAYS OF THE REQUESTED START DATE.

II. Worksite Training Completion or Termination

Check one: Completed Worksite Training Terminated for Cause (Explain in Comments) Quit Layoff (Lack of Work) Program Termination Transfer

Completion or Termination Date _____

Comments

Signature of Official Sponsor Representative  Date 6.9.21 Print Name Barbara Chang

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS FORM WITHIN 30 CALENDAR DAYS OF THE COMPLETION/TERMINATION DATE.

STATE USE ONLY

III. RI Completion

Apprentice has satisfied the RI requirements. Completion date: _____
 Apprentice has not satisfied the RI requirements.

Signature of DLEA Representative _____ Date _____ Print Name _____

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____



NOV 04 2021 Apprenticeship Agreement

I. Apprenticeship Agreement


Sponsor No. _____ ATP Code _____

Name of Apprentice (Last, First, M.I.) MOCK AT401		Social Security Number		1. Name of Program Sponsor CareerWise New York /Amazon	
Address of Apprentice (no. and street)				Physical address of Program Sponsor (no. and street) 349A State St.	
City	County	State	Zip code	City	County State Zip code
Answer both A and B A. Ethnic Group <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino B. Race <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander				Mailing address of Program Sponsor (no. and street) 349A State St.	
Sex <input type="checkbox"/> M <input type="checkbox"/> F Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No Home & Cell phone numbers H C Birth date E-mail address				2. Trade: <input type="checkbox"/> Time-based <input checked="" type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid Software Developer	
Has the apprentice received any Certificate of Completion from a State or Federal Apprenticeship Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," Trade _____ State _____				3. Start Date	4. Length of program (Months) COMPENTEN
6. Related and Supplemental Instruction (RI) Provider(s) and location(s)				RI Compensated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7. Minimum Journey-Worker Rate PER 401
8. Credit for previous training or experience: _____ Months _____ Points _____ Sections <input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input type="checkbox"/> Previous Experience (Employer name): _____					

9. Apprentice Wage Progression (Without Benefits) for each Period. Choose one: Months Hours Points Sections

1	2	3	4	5	6	7	8	9	10
H	H	H							
\$18	\$19	\$20							

The Sponsor and the Apprentice Agree to the Terms on Page 2 of this Form.

Signature of Apprentice and Parent/Guardian if age 16-17 _____ Date / / Signature of Official Sponsor Representative  Date **6.9.21**

Registered by the New York State Department of Labor:

Signature New York State Department of Labor _____ Date _____

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Rank Verify	_____	_____
Data Entry	_____	_____


THE DEPARTMENT OF LABOR MUST RECEIVE THIS AGREEMENT WITHIN 30 CALENDAR DAYS OF THE REQUESTED START DATE.

II. Worksite Training Completion or Termination

Check one: Completed Worksite Training Terminated for Cause (Explain in Comments) Quit (Lack of Work) Layoff (Lack of Work) Program Termination Transfer

Completion or Termination Date _____

Comments

Signature of Official Sponsor Representative  Date **6.9.21** Print Name **Barbara Chang**

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS FORM WITHIN 30 CALENDAR DAYS OF THE COMPLETION/TERMINATION DATE.

III. RI Completion

Apprentice has satisfied the RI requirements. Completion date: _____
 Apprentice has not satisfied the RI requirements.

Signature of DLEA Representative _____ Date _____ Print Name _____

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____



NOV 04 2021

Apprenticeship Agreement

Please send to your regional DOL office:
9 Bond Street, 4th Floor, Room 4570, Brooklyn NY

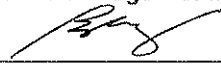
I. Apprenticeship Agreement Central Office Sponsor No. _____ ATP Code _____

Name of Apprentice (Last, First, M.I.) MOCK AT401		Social Security Number		1. Name of Program Sponsor CareerWise New York /Unqork	
Address of Apprentice (no. and street)				Physical address of Program Sponsor (no. and street) 349A State St.	
City	County	State	Zip code	City	County
				Brooklyn, NY, 11217	
Answer both A and B A. Ethnic Group <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino B. Race <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander				Mailing address of Program Sponsor (no. and street) 349A State St.	
				City County State Zip code Brooklyn, NY, 11217	
Sex <input type="checkbox"/> M <input type="checkbox"/> F	Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Home & Cell phone numbers H C	Birth date	2. Trade: <input type="checkbox"/> Time-based <input checked="" type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid Software Developer	
E-mail address					
Has the apprentice received any Certificate of Completion from a State or Federal Apprenticeship Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," Trade State			3. Start Date	4. Length of program (Months) COMPENTEN	5. DOL Apprentice Probation Period for Completion Rates (Months) 9 months
6. Related and Supplemental Instruction (RI) Provider(s) and location(s)				RI Compensated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7. Minimum Journey-Worker Rate PER 401
8. Credit for previous training or experience: Months Points Sections <input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input type="checkbox"/> Previous Experience (Employer name):					

9. Apprentice Wage Progression (Without Benefits) for each Period. Choose one: Months Hours Points Sections

1	2	3	4	5	6	7	8	9	10
H	H	H							
\$15	\$16	\$17							

The Sponsor and the Apprentice Agree to the Terms on Page 2 of this Form.

Signature of Apprentice and Parent/Guardian if age 16-17 _____ Date / / Signature of Official Sponsor Representative  _____ Date 6.9.21 / /

Registered by the New York State Department of Labor:

Signature New York State Department of Labor _____ Date / /


State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Rank Verify	_____	_____
Data Entry	_____	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS AGREEMENT WITHIN 30 CALENDAR DAYS OF THE REQUESTED START DATE.

II. Worksite Training Completion or Termination

Check one: Completed Worksite Training Terminated for Cause (Explain in Comments) Quit (Lack of Work) Layoff (Lack of Work) Program Termination Transfer

Completion or Termination Date _____
Comments _____

Signature of Official Sponsor Representative  _____ Date 6.9.21 / / Print Name Barbara Chang

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____

THE DEPARTMENT OF LABOR MUST RECEIVE THIS FORM WITHIN 30 CALENDAR DAYS OF THE COMPLETION/TERMINATION DATE.

III. RI Completion

Apprentice has satisfied the RI requirements. Completion date: _____
 Apprentice has not satisfied the RI requirements.

Signature of DLEA Representative _____ Date _____ Print Name _____

State Use Only		
	Date	Init.
To ATC	_____	_____
To DLEA	_____	_____
Data Entry	_____	_____

WE ARE YOUR DOL



Apprenticeship Training Program

Sponsor Code _____

Trade Code _____

Related Instruction Availability

Trade: Software Developer

Sponsor Name: CareerWise New York

Sponsor Representative: Barbara Chang

Sponsor Address:

No. & Street: 349A State Street City: Brooklyn

County: Kings County State: NY Zip Code: 11217

Sponsor Telephone No.: 718-852-0508

Proposed Number of Apprentices: 52

AT Office

Name: NYC Office of Apprentice Training

No. & Street: 9 Bond Street

City: Brooklyn State: NY Zip Code: 11201

Apprentice Training Representative: [REDACTED] Date Prepared: _____

Related instruction is not available.

Related instruction is available at:

School

Name: Guttman Community College (CUNY)

No. & Street: 50 W. 40th Street

City: New York State: NY Zip Code: 10018

School Representative Contact Information:

Name: Ljubica Depovic

Telephone No.: 718-254-7192 Email: [REDACTED]

School

Name: Borough of Manhattan Community College (CUNY)

No. & Street: 199 Chambers Street

City: New York State: NY Zip Code: 10007

School Representative Contact Information:

Name: Sunil B. Gupta

Telephone No.: (212) 346 8449 Email: [REDACTED]

DLEA

Name: _____

No. & Street: _____

City: _____ State: _____ Zip Code: _____

Signature of DLEA _____ Date Prepared: OCT 18 2021

NYS Department of Labor
Apprentice Training

WE ARE YOUR DOL



Sponsor Code _____

Trade Code _____

Related Instruction Availability

Trade: Software Developer

Sponsor Name: CareerWise New York

Sponsor Representative: Barbara Chang

Sponsor Address:

No. & Street: 349A State Street City: New York

County: Kings County State: NY Zip Code: 11217

Sponsor Telephone No.: 718-852-0508

Proposed Number of Apprentices: 52

AT Office

Name: NYC Office of Apprentice Training

No. & Street: 9 Bond Street

City: Brooklyn State: NY Zip Code: 11201

Apprentice Training Representative: [REDACTED] Date Prepared: _____

Related instruction is **not** available.

Related instruction is **available** at:

School

Name: Lehman College (CUNY)

No. & Street: 250 Bedford Park Boulevard

City: West Bronx State: NY Zip Code: 10468

School Representative Contact Information:

Name: Jane MacKillop

Telephone No.: (718)960-8512 Email: [REDACTED]

School

Name: _____

No. & Street: _____

City: _____ State: _____ Zip Code: _____

School Representative Contact Information:

Name: _____

Telephone No.: _____ Email: _____

DLEA

Name: _____

No. & Street: _____

City: _____ State: _____ Zip Code: _____

Signature of DLEA _____ Date Prepared: _____

NYS Department of Labor
Apprentice Training

OCT 13 2021

Central Office



New York State Department of Labor

Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor Code _____
Trade Code _____

CareerWise New York _____, located at _____
(Sponsor)

349A State St. Brooklyn, NY 11217 _____
(Address)

is presently accepting applications for an estimated 0 _____ apprentice training positions in
(No. of Openings)

the occupation of Software Developer _____
(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: 16 _____

Minimum Education: Applicants should be enrolled in high school, be a rising junior. _____

Physical Condition: Be physically able to perform the work required as determined by

Background checks

(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:

Other:

Other:

Application Forms May be Obtained From: _____ Dates: From: _____ To: _____
Name: CareerWise New York _____ Days: _____
Address: _____ Times: _____
349A State St. Brooklyn, NY 11217
Phone Number: (718) 852 - 0508 _____ Email Address: _____

Special Instructions:

All Applications Must be (please check) Received Postmarked no Later Than: _____



Department of Labor

New York State Department of Labor

Sponsor Code _____
Trade Code(s) _____

Apprentice Training Program Affirmative Action Plan

New Program
 Amended
 Renewal

To be Administered by: CareerWise New York
Sponsor's Name

Address: _____
349A State St.
Brooklyn, NY 11217
Zip Code

Plan is Effective From: February 1, 20 To: _____
Date Date

On behalf of the above named sponsor, I certify that it is our intent to fulfill this Affirmative Action Plan.

Signature of Sponsor: 09 / 08 / 2021
Date
The above signature must be the employer's Chief Executive Officer or the Chair of the Joint Apprenticeship Committee or their authorized representative.

Print Name: Barbara Chang

Title: Executive Director

Do not write below this line.

NYS Department of Labor
Apprentice Training

OCT 13 2021

Central Office

Approved by: _____
NYS Department of Labor Date

Title: _____

Part I – Equal Opportunity Standards

- A. Provide a brief description of the nature and extent of the Sponsor's business, the geographic area or jurisdiction where the business is performed, and the county or counties where the sponsor will recruit.
CareerWise New York (CWNY), powered by HERE to HERE, is an innovative intermediary that is being established to address both the skilled worker shortage and the unrealistic expectation that K-12 schools alone can adequately prepare students for today's in demand jobs without the involvement of industry and practice in the real world. CWNY is specifically set up to promote and embed youth apprenticeship as a systemic solution to hiring challenges. In partnership with the Department of Education, partner high schools and the City University of New York (CUNY), employers will work side-by-side to help train high school juniors and seniors in critical 21st Century skills in careers with growth potential and that are in high demand.

CareerWise New York (CWNY) is located in New York and provides apprenticeship opportunities to students throughout Manhattan, The Bronx, Queens, Brooklyn and certain parts of New Jersey such as Jersey City and Hoboken. The counties CareerWise New York (CWNY) recruits are The Bronx, Manhattan, Queens, Brooklyn, and possibly Staten Island.

B. Equal Opportunity Pledge

The sponsor recognizes that all qualified persons shall have equal opportunity in apprenticeship training, agrees that the commitments contained in the Affirmative Action Plan shall not be used for discriminatory purposes, and agrees to adhere to the following **Equal Opportunity Pledge**:

The recruitment, selection, employment, and training of apprentices during their 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, and 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.

C. Affirmative Action Policy Statement /1

Attach a statement of the sponsor's affirmative action policy. This statement must be the official policy available for public and internal distribution, be on sponsor letterhead and signed and dated by the Chief Executive Officer or the Chair of the Joint Apprenticeship Committee.

If responsibility for plan implementation has been delegated to other than the individual signing the Affirmative Action Policy Statement, that individual must be named in the Policy Statement.

D. Sexual Harassment Policy Statement /1

Attach a statement of the sponsor's sexual harassment policy. This statement must be the official policy available for public and internal distribution, be on sponsor letterhead and signed and dated by the Chief Executive Officer or the Chair of the Joint Apprenticeship Committee.

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/1 Sponsors needing assistance in developing an Affirmative Action and/or Sexual Harassment Policy Statement should contact the New York Department of Labor's Division of Equal Opportunity Development.

Part II – Labor Force Analysis/Utilization Study

A. The total labor force is 4,104,325 in the following county(counties):

<u>Kings</u>	<u>Bronx</u>	<u>New York</u>
<u>Queens</u>	<u>Richmond</u>	

The labor force includes: /1

Minorities

African American	<u>925,495</u>	<u>22.55</u>	%
Hispanic	<u>1,076,915</u>	<u>26</u>	%
Other Minorities /2	<u>619,825</u>	<u>15</u>	%
Total Minorities	<u>2,622,225</u>	<u>64</u>	%
 Women	 <u>1,997,905</u>	 <u>49</u>	 %

B. The total minority and women staffing goals of this program are the percentage of these groups in the labor force in the county (counties) of recruitment

Goal for Total Minorities:	<u>63.89</u>	%
Goal for Women:	<u>6.9</u>	%

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/1 Data on labor force is supplied by the New York State Department of Labor Research and Statistics Division, Bureau of Labor Market Information, State Office Bldg. Campus, Bldg. #12, Room 402, Albany, NY 12240, telephone: (518) 457-6657.
/2 Other Minorities: Native Americans; Alaskan Natives; Pacific Islanders; Asians.

Part III – Current and Projected Staffing and Annual Goals

Title of Trade Software Developer

A. Current Staffing in the Above Trade

	Total	African American		Hispanic		Other Minority		Women	
		No.	%	No.	%	No.	%	No.	%
Active Journeyworkers	[REDACTED]								
Registered Apprentices									

B. Projected Number of Apprentices Indentures /1

Year	20	21	22	23	24	25	Totals
New Positions	[REDACTED]						
Vacancies from Turnover /2							
Total Indentures							

C. Annual Goals

Based on the data and projections above, the sponsor's annual goals are to indenture minorities and women in apprentice programs as follows: /1

Year	20	21	22	23	24	25	Totals
African American	[REDACTED]						
Hispanic							
Other Minority							
Women							
Total Indentures							

The sponsor's good faith efforts to meet these annual goals will be evaluated based on whether the sponsor is following the Affirmative Action Plan. The sponsor understands that if the annual goals are not being met, it may be necessary to re-evaluate and change the Affirmative Action Plan in order to increase its effectiveness.

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/1 Where no apprentice indentures are planned for a particular group or year, enter "0".

/2 Includes program graduates and non-graduates, (e.g. voluntary quits, dismissals prior to completion).

Part IV – Action Plans and Requirements

A. Outreach and Positive Recruitment Plan

Detail all the specific activities the sponsor will undertake to expand the opportunities for minority and female participation in the apprenticeship program. (Attach additional sheets if necessary.) The extent of outreach and recruitment activities may vary with the size and type of program and its resources. Refer to Equal Employment Opportunity in Apprenticeship Training Regulations Section 600.5 (c) for examples of outreach and positive recruitment.

Outreach and Recruitment Activities:

Direct Entry Provider(s): (See <https://www.labor.ny.gov/apprenticeship/direct-entry.shtm>.)

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Part IV – Action Plans and Requirements (continued)

B. Recruitment

It is agreed that the sponsor will recruit applicants for apprenticeship by (Check One):

1. Requesting the NYS Department of Labor's approval to conduct an area-wide public recruitment in accordance with the Department Regulations on Equal Employment Opportunity in Apprenticeship Training (Part 600).

An area-wide public recruitment will publicize the following information:

- a. Estimated number of apprentice job openings to be filled.
- b. Eligibility requirements.
- c. Where and when applications may be obtained.
- d. When applications are to be submitted.
- e. Affirmative Action policy of the sponsor.

2. Listing all apprentice openings including minimum qualifications and selection standards with the NYS Job Bank (www.newyork.us.jobs/) for a minimum of five full working days before any selections are made.

3. Limiting recruitment to present employees of the sponsor and/or present members of the union sponsoring the apprenticeship program. Employees must have been hired and/or union members have been admitted without discrimination based on race, creed, color, religion, national origin, age, sex, disability, veteran status, marital status or arrest record. Sponsors are encouraged to list all resulting vacancies with the NYS Job Bank (www.newyork.us.jobs/).

4. Recruiting apprentices by methods other than those in B 1, 2, or 3 above. A detailed statement of the recruitment method to be used **must be attached to be submitted to the Commissioner of Labor** for review and approval prior to being used. /1

C. Methods for Selection of Apprentices

Selection of apprentices will be made under one of the following four methods. (Check One):

1. Selection on basis of rank from a candidate list (only available for area-wide public recruitments). Composed of those eligible applicants who meet the minimum qualifications and complete the selection process.
- a. When this method is used; (1) the qualifications of each eligible applicant will be evaluated and scored on each of the selection standards used; (2) the scores will be added to obtain a total score for each applicant; (3) each applicant who completes the evaluation process will be placed on a list of candidates for apprenticeship in order of rank based on the total score. Seniority of employment and/or seniority of union membership may be one of the selection standards.
 - b. The list of candidates will remain valid for a minimum period of two years, or until the list is exhausted.
 - c. At least 10 days prior to the time when each eligible applicant is first required to demonstrate his/her qualifications, each eligible applicant will be notified in writing of the qualifications on which he/she will be evaluated, the time and place for submitting evidence of qualifications, and the time and place for testing and/or interview.

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/1 A sponsor using this method of recruitment should contact their Apprentice Training Representative for technical assistance.

Part IV -- Action Plans and Requirements (continued)

C. Methods for Selection of Apprentices (continued)

2. Selection on basis of rank from a candidate list (available for non area-wide public recruitments). Composed of those eligible applicants who meet the minimum qualifications and complete the selection process.

- a. When this method is used, the applicants will be evaluated and ranked on the basis of predetermined minimum qualifications and selection standards. These qualifications and standards are to be included in all notices regarding apprentice openings.
- b. The list of candidates will remain valid for a minimum period of two months or until the list is exhausted, unless otherwise specified by the collective bargaining agreement. /1

3. Selection on a random basis. From a candidate list composed of applicants who meet the minimum qualifications and complete the selection process.

- a. The method of random selection shall be subject to approval by the Commissioner of Labor.
- b. Supervision of the random selection process shall be by an impartial person or persons, selected by the sponsor, not associated with the administration of the apprenticeship program.
- c. The expected time and place of the selection shall be indicated in the recruitment notice.
- d. The place of the selection shall be open for all applicants and the public.
- e. The names of candidates drawn by this method shall be placed on a list of candidates for apprenticeship in the order drawn.
- f. The list of candidates will remain valid for a minimum period of two (2) years, or until it is exhausted.

4. Alternative selection methods. /2

If apprentices are to be selected by other methods than in C 1, 2 or 3 above, a detailed statement of the selection method to be used **must be attached and submitted to the Commissioner of Labor** for review and approval prior to being used.

D. Minimum Selection Standards and Evaluation.

It is agreed that the minimum qualifications and selection standards utilized will be those listed on Form AT 505, *Apprentice Training Recruitment Notification and Minimum Qualifications*, and/or on Form AT 508, *Selection Standards and Evaluations*, attached.

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/1 Sponsors are advised to keep all applications for a minimum of one year.

/2 A sponsor using this method of selection should contact their Apprentice Training Representative for technical assistance.

Part IV – Action Plans and Requirements (continued)

E. Notification and Appointment of Candidates for Apprenticeship.

It is agreed that whether selection is made from a certified list established by rank, random selection, list of current employees or union members, or alternative methods, the following notification procedure will prevail:

1. Each candidate who met the requirements for admission to the eligibility pool shall be notified in writing. This notification shall include a copy of the Complaint Procedure, Part 600.12.
2. Each candidate who did not meet the requirements for admission to the eligibility pool shall be notified in writing of the reasons for rejection and of the requirements for admission to the eligibility pool. This notification shall include a copy of the Complaint Procedure, Part 600.12.
3. Each qualified candidate selected for appointment shall be notified in writing at least 10 days prior to the commencement of the apprenticeship term. Such notification shall be sent by certified mail, return receipt requested.
4. After the commencement of the term of an apprenticeship program, the program sponsors may appoint available additional or replacement apprentices from the list in the order of their ranking thereon. Notice of such appointment will be in writing and shall be sent by certified mail return receipt requested. No candidate on the list may be deleted from the list because of unavailability unless the candidate's unavailability extends seven days after delivery of notice.

Part V – Discrimination Complaint Procedure

It is agreed that complaints will be filed in accordance with Part 600.12, Complaint Procedures, as defined under Equal Employment Opportunity in Apprenticeship Training Regulations.

Part VI – Distribution

Send the original Affirmative Action Plan to your Apprentice Training Representative.

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Outreach and Positive Recruitment Plan

Detail all the specific activities the sponsor will undertake to expand the opportunities for minority and female participation in the apprenticeship program. (Attach additional sheets if necessary.) The extent of outreach and recruitment activities may vary with the size and type of program and its resources. Refer to Equal Employment Opportunity in Apprenticeship Training Regulations Section 600.5 (c) for examples of outreach and positive recruitment.

Outreach and Recruitment Activities

The CareerWise New York (CWNY) team is split into two core teams: the employer-side and the educator-side, where each team has their specific outreach goals.

The Education team is comprised of four team members, responsible for pitching, recruiting, and preparing teachers, school administrators, and students, to be successful in adapting the apprenticeship program to the school's program model and supporting students in gaining an apprenticeship opportunity at a partner company. The Education team expands opportunities for minority and female participation in the apprenticeship program by partnering with the New York City Department of Education Central Office to select schools and keep superintendents and senior leadership informed. Through the 18-month recruitment process, the team engages school and school staff in student recruitment and parent engagement efforts by providing supplemental materials, resources, technical/logistical support to understand our program and to fulfill the application requirements presented by both the apprenticeship program and employer. Throughout the year, the team holds in-person or virtual meetings to inform, engage, and support school administrators on the best practices and critical responsibilities to be successful in their roles. These meetings enlighten school administrators on the student recruitment process and strengthen their understanding and relationship with the CareerWise New York (CWNY) Apprenticeship Program.

The Employer team is comprised of three team members, responsible for promoting the apprenticeship program to new employers by interacting with department leaders and potential supervisors and coaches. Potential employers are identified in targeted new industries where there is a tremendous demand in talent, in example the healthcare and education industry. The Employer team supports new and existing employers throughout the recruitment cycle by posting jobs on the hiring portal, selecting and preparing students for interviews, and interview training. To ensure employers are prepared for the experiences of the apprenticeship program, the Education team puts together a series of employer trainings for supervisors and coaches to inform them about the expectations of supervising a high school student. To showcase various employers to students, the CareerWise New York (CWNY) team coordinates open houses and virtual fairs. In terms of expanding opportunities to female and minority students, the team works alongside partner companies t



Recruitment

Recruiting apprentices by methods other than those in B 1, 2, or 3 above. A detailed statement of the recruitment method to be used must be attached to be submitted to the Commissioner of Labor for review and approval prior to being used. /1

Our recruitment process does not fit any of the above choices listed on the AT603 form, therefore we will be choosing option 4 and will be attaching our recruitment method on a separate CareerWise New York letterhead.

Our recruitment method involves our two core teams: The Education and Employer teams, engaging with three stakeholders: students, employers, and schools. The span of the recruitment process spans for many months, whereby the core teams are expanding partnerships with new schools and employers, engaging with students face to face or virtually with resume and cover letter preparation, assisting school leaders with technical and student support with the Hiring HUB (our online application portal to apply for positions at participating companies) and training incoming apprentices through a seven-week boot camp before they start their positions.

The Education team's recruitment model is an 11-month recruitment process spanning from September 15, 2020 to May 30, 2021. The team starts off their recruitment process by reaching to various existing and new schools at the beginning of September, where schools attend a virtual pitch if they are a new school or complete our School Partner Survey. Our Education team is holding virtual pitches over Zoom webinars to engage new school partners if they want to learn more about CareerWise New York programmatic model and to see if there is a fit between the apprenticeship model and the school. The school application comprises an intake survey to understand the school model, student demographics, leadership, and existing activities and opportunities available to enrolled students. The form allows our team to broadly comprehend what resources are available to students in career and college preparation, such as resume, cover letter, and career pathway exposure through embedded work-based learning programming. On the school application, we ask for designated school leaders to carry out the student support activities to develop, train, and allow students to submit their applications through our online Hiring HUB, where students can apply for various roles at respective companies. The initial selection process of schools is chosen within a two-week span and schools receive a notification of acceptance by October 5th.

Once schools are chosen and meet our programmatic criteria, our team will work closely with the partnership point person to train them in the material students would need to submit for various positions and are available for strategic support with schools. The Designated Approvers attend monthly virtual meetings, where we go over key tips and lessons learned from previous recruitment seasons and information they would need to know. Designated Approver meetings are held the first week of every month and are held after students are dismissed from school. Once our team and school leaders define a clear strategy, school leaders will embed the CareerWise New York into their school, through their own process, and will allow rising 11th-grade students to apply.



Students are the central piece to this programmatic model. Students will be exposed to career exploration and application processes through the recruitment process. School leaders and our Education team members will hold various school, class, or group pitches to gauge and explore the interest of our program to students. Once students are interested in the program and see the opportunities presented to them, they will talk to the Designated Approvers at their school to see how and what they would need to apply. Interested students will work on their resumes, cover letters, and interviewing skills in specific time periods in our program.

The application process for Students

- Build a concise resume from November 1, 2020 through December 15, 2020.
- Build a cover letter from December 1, 2020 through February 2, 2021,
- Practice interviewing skills from February 2, 2021 through April 6, 2021.
- Students can create a profile on the Hiring HUB anytime from November 9, 2020 through February 22, 2021.

Throughout the process, students can create a profile to apply to jobs through an online recruitment portal called “*The Hiring HUB*” based on the Salesforce CRM platform. The Hiring HUB will be open from November 9, 2020 through February 22, 2021. On this platform, students will be able to see all of the available positions at companies and would be able to apply when they have their profile and materials approved by their school’s Designated Approver.

Once students apply, the employer partner reviews the students application thoroughly and may invite them for a virtual interview through HireVue or an in-person interview. Our team will be able to support students in this step by offering one on one or group interview preparation over a Zoom call. If the student and employer partner feel like there is a fit, the interview process will continue until the employer makes an offer to a student. The student has a limited time to accept the offer.

The last piece of our programmatic strategy is to get employer partners onboard to offer positions to students. The employer partners have the opportunity to participate in any year, depending on their budget and availability of positions.

Employer Hiring Cycle

- Employers post their roles on the Hiring HUB throughout the recruitment cycle from November 9, 2020 through February 22, 2021.
- They have the option of posting roles on the Hiring HUB even after February 22, 2021, if they want to recruit for more positions. At any given time, roles can be filled and removed from the Hiring HUB.
- There will be two rounds of interviews.
 - 1st round of interviews: March 8 through March 17, 2021,
 - 1st round offers will go out to students one week later from March 19 through March 26, 2021.
 - 2nd round of interviews: April 19 through April 28, 2021
 - 2nd round offers will go out one week later from April 30 through May 7, 2021.



- Students accept their offer and are invited to attend a seven week bootcamp training held from July 6, 2021 through August 20, 2021, where they are learning the in-demand soft and technical skills required for their role.

Students will learn skills in communication, personal branding, email etiquette and much more before heading into the world of work. If students have a satisfactory participation and attendance and completed all assignments, they will be allowed to continue with their apprenticeship. If not they do not meet the requirements of Bootcamp, there is a possibility their position will be rescinded by their employer.

C. Methods Selection and Evaluation

Alternative selection methods.

If apprentices are to be selected by other methods than in C 1, 2 or 3 above, a detailed statement of the selection method to be used must be attached and submitted to the Commissioner of Labor for review and approval prior to being used.

Primarily, the methods of selection and evaluation of students for this program will be done by the school and employer partners.

The first step in selection and evaluation is: school partners allow all rising juniors to apply for this program, given they have a vested interest in the three year apprenticeship and complete the requirements on the Hiring HUB. The requirements on the Hiring HUB include filling out a job posting completely with their resume, cover letter, and additional application items needed for the specific role. In a few circumstances, the role may have students go to the company's HR portal and fill out an application for the same position or for a HireVue interview process.

The employers have a selection and evaluation process of their own that is very similar to a normal hiring process for a full-time employee, where apprentices application materials are reviewed, they undergo multiple interviews and accept a job offer. Further, employers evaluate the applicant's application materials thoroughly to see if they are eligible to be invited for an interview. Employers are searching for students who have an interest in the field/position, have relevant experience for the position, and are coachable for the role. Once apprentices receive and accept a full time job offer, they will be sent an offer letter by their employer and an agreement of understanding from our team to fill out. The contract is an agreement between the apprentice and our team around the expectations, responsibilities, and employer information: work schedule, manager, hourly wage, and specific instructions to follow in the event of a school cancellation or holiday vacation time. These forms must be filled out immediately after students receive them.

The last part of the selection and evaluation process for apprentices who accepted an offer will be to attend a seven week bootcamp in the summer to gain the employable skills and knowledge to be successful in the workplace. The bootcamp is an overview of the critical soft and technical skills apprentices will have to refine in order to have a successful and enjoyable time at their apprentice company. Further, this helps the apprentice clarify their goals going into



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the experience through an active career exploration and development activities within the last few weeks of the bootcamp. The bootcamp is a serious commitment for our team and employers, where apprentices must have active participation, attendance, complete learning modules, fill out their agreement and submit a survey at the end of the course. If apprentices do not fulfill all of these requirements, our team can provide feedback to their employer and the employer can possibly rescind their offer.