



MAR 30 2021

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.

Section I

- A. Sponsor name: MACNY, The Manufacturers Association
B. Trade(s): 51-007, 51-368
C. Type of Apprenticeship Training Program (check one): 1 [] Individual Non-Joint 2 [] Individual Joint 3 [x] Group Non-Joint* 4 [] Group Joint (JAC/JATC)*
D. Name of entity completing this form: MACNY, The Manufacturers Association
E. Entity completing this form (check one): [] Individual Employer/Sponsor [] Union [] JAC/JATC [x] Association
F. Mailing address: Street: 5788 Widewaters Parkway
G. Email: [redacted] H. Phone: (315) 474-4201 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? [x] Yes [] No
M. Type of Entity (check one and provide attachments as noted in the instructions): [] Corporation [] Partnership [] Sole-Proprietor [] LLC [] LLP [x] Other
N. How many years has your organization been in business? 108
O. Within the past five (5) years, have you done business under a different name? [] Yes [x] 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? [x] Yes [] No

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 [x] No
2. Any indictment or pending indictment for conduct constituting a crime under state or federal law? [] Yes [x] No
3. Any grant of immunity for conduct constituting a crime under state or federal law? [] Yes [x] 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:

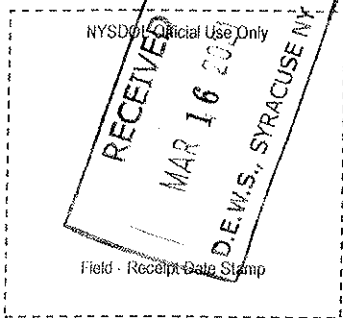
- That the Department may use its sole discretion to choose the means to determine the truth and accuracy of all statements made herein.
- That intentional submission of false or misleading information may constitute a Class A misdemeanor under Penal Law (PL § 210.35), and may be punishable by a fine 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.

Laury Ferguson 02/22/2021
 Signature of CEO, Chair, or representative granted legal authority to bind the Entity Date

Print name and title: Laury Ferguson, Associate Director of Apprenticeship

Sworn to me this: 22 day of February *Sandra M Sherlock*
 Signature of Notary Public or Commissioner of Deeds



SANDRA M. SHERLOCK
 Notary Public in the State of New York
 Qualified in Onon. Co. No. 015H4848879
 My Commission Expires Jan. 6, 2022

NYS Department of Labor
 Apprentice Training

MAR 30 2021



Apprentice Training Program Registration Agreement

Revision

Nature of Change: New Trade Registration

State Use Only	
AT Sponsor No.	<u>52218</u>
ATP Code	<u>51-007</u>
Effective Date of AT Program	

- 1. Name of Sponsor: MACNY, The Manufacturers Association
- 2. Mailing Address: 5788 Widewaters Parkway Syracuse NY 13214 Onondaga
(number & street) (city) (state) (zip code) (county)
- 3. Actual Address: Same
(number & street) (city) (state) (zip code) (county)
- 4. Telephone No.: 315-474-4201 Ext. 49 Fax No.: _____
- 5. E-mail Address: _____
- 6. Trade/Occupation: Auto Body Repairer & Painter, 51-007
- 7. No. Employees: 20 No. Apprentices: 1 No. Journeyworkers: 30 8. Ratio: 1:1, 1:1
- 9. DOT Code: 807.381-010 10. Length of Program: 48 months
- 11. Apprentice Probationary Period: 12 months 12. Work process: Standard or Revised
- 13. Minimum Journeyworker Rate: \$ _____ per AT-401 14. Effective Date of Wages: 02/22/21

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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*Per	AT-401									



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

17. [Signature] 3/1/21 18. _____
 Signature of Official Sponsor Representative Date Signature of Union Representative Date
Larry Ferguson _____
 Print Name and Title Print Name, Title, and Union Name

19. _____
 Signature New York State Department of Labor Date

NYS Department of Labor
Apprentice Training

RECEIVED
 MAR 16 2021
 Apprenticeship Agreement

Please send to your regional DOL office: _____

I. Apprenticeship Agreement
 Central Office Sponsor No. 52218 ATP Code 51-007

Name of Apprentice (Last, First, M.I.) Kramak, Timothy S.		1. Name of Program Sponsor MACNY, The Manufacturers Association			
[Redacted]		Physical address of Program Sponsor (no. and street) 5788 Widewaters Parkway			
		City	County	State	Zipcode
		Syracuse	Onondaga	NY	13214
[Redacted]		Mailing address of Program Sponsor (no. and street) Rudy Schmid Total Car Care, 228 Hiawatha Blvd.			
		City	County	State	Zipcode
		Syracuse	Onondaga	NY	13208
6. Related and Supplemental Instruction (RI) Provider(s) and location(s) As per Group Sponsor (52218), AT-8 RI Availability		2. Trade: <input checked="" type="checkbox"/> Time-based <input type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid Auto Body Repairer and Painter			
8. Credit for previous training or experience: <u>10</u> Months		3. Start Date <u>2/28/21</u>			
[Redacted]		4. Length of program (Months) 48			
[Redacted]		5. DOL Apprentice Probation Period for Completion Rates (Months) 12			
[Redacted]		7. Minimum Journey-Worker Rate 21.00			
8. Credit for previous training or experience: <u>10</u> Months		RI Compensated <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input type="checkbox"/> Previous Experience (Employer name): <u>RUDY SCHMID TOTAL CAR CARE</u>		Points			
Points		Sections			

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

1	2	3	4	5	6	7	8	9	10
1000	1000	1000	1000	1000	1000	1000	1000		
12.50	13.50	14.50	15.50	16.50	17.50	18.50	19.50		

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

Timothy Kramak 02/28/2021 [Signature] 2/28/21
 Signature of Apprentice and Parent/Guardian if age 16-17 Date Signature of Official Sponsor Representative Date

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 Print Name

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

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

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	_____	_____

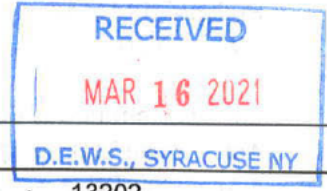
WE ARE YOUR DOL



Sponsor Code 52218
Trade Code 51-007

Related Instruction Availability

Trade: Auto Body Repairer & Painter
Sponsor Name: MACNY, The Manufacturers Association
Sponsor Representative: Laury Ferguson
Sponsor Address:
No. & Street: 5788 Widewaters Parkway City: Syracuse
County: Onondaga State: NY Zip Code: 13214
Sponsor Telephone No.: 315-474-4201
Proposed Number of Apprentices: 4



AT Office

Name: NYS Department of Labor
No. & Street: 450 S. Salina Street, Room 203
City: Syracuse State: NY Zip Code: 13202
Apprentice Training Representative: [REDACTED] Date Prepared: 2/22/21

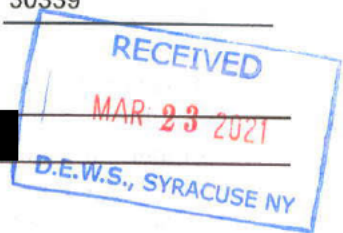
Related instruction is **not** available. Related instruction is available at:

School

Name: Inter-Industry Conference on Auto Collision Repair (I-CAR)
No. & Street: 5125 Trillium Blvd.
City: Hoffman Estates State: IL Zip Code: 60192
School Representative Contact Information:
Name: Paul Hill
Telephone No.: 717-590-0968 Email: [REDACTED]

School

Name: NAPA Autotech Classroom and Virtual Training
No. & Street: 2999 Wildwood Parkway
City: Atlanta State: GA Zip Code: 30339
School Representative Contact Information:
Name: James Goepfrich
Telephone No.: 800-292-6428 Email: [REDACTED]



DLEA

Name: [REDACTED]
No. & Street: 573 East Genesee Street
City: Syracuse State: NY Zip Code: 13202
Signature of DLEA [REDACTED] NYS Department of Labor Date Prepared: 3-18-21
Apprentice Training

AT-8
Additional Schools
MACNY, The Manufacturers Association

Alfred State College - SUNY
Automotive Service Technician Program
10 Upper College Drive
Alfred, NY 14802
Eric Wilmot

Columbia-Green Community College
Automotive Technology Program
4400 Route 23
Hudson, NY 12534
Marc Gilbert

Corning Community College
Automotive Technology Program
1 Academic Drive
Corning, NY 14830
Brian Halm

Delhi Community College
Auto Mechanics I
454 Delhi Drive
Delhi, NY 13753
Walter Peterson

Hudson Valley Community College
Automotive Technology Program
80 Vandenburg Ave
Troy, NY 12180
Daniel Honovic

Onondaga Community College
Automotive Technology Program
4585 West Seneca Turnpike
Syracuse, NY 13215
Ryan Beckley

SUNY Suffolk
Automotive Technology Program
Ammerman Campus
533 College Road
Selden, NY 11784
Jordan Berger

Haun Welding Supply
5921 Court Street Road
Syracuse, NY 13206
Joshua Haun

Citi BOCES
179 County Rte 64
Mexico NY 13114
Jerald Wickham

OCM BOCES
110 Elwood Drive Road
Liverpool, NY 13088
Mari Ukleya

Western Suffolk BOCES
507 Deer Park Ave
Dix Hills, NY 11746
Nancy Kelsey

Capital Region BOCES
900 Watervliet-Shaker Road
Albany, NY 12205
Jeff Murphy

NYS Department of Labor
Apprentice Training

MAR 30 2021

Central Office



Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor Code 52218

Trade Code 51-007

MACNY, The Manufacturers Association, located at (Sponsor)

5788 Widewaters Pkwy Syracuse, NY 13214 (Address)

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

the occupation of Auto Body Repairer and Painter (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

Minimum Education: High School Diploma or High School Equivalency (HSE) - GED/TASC

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

(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:

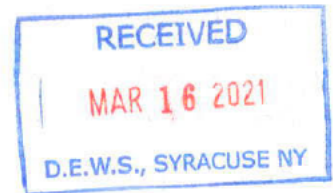
NYS Department of Labor Apprentice Training

Other:

MAR 30 2021

Other:

Central Office



Application Forms May be Obtained From:

Name: MACNY, The Manufacturers Association

Address:

5788 Widewaters Pkwy Syracuse, NY 13214

Phone Number: (315) 474 - 4201

Dates: From: To:

Days: Monday - Friday

Times: 9:00 AM - 5:00 PM

Email Address: [Redacted]

Special Instructions:

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



Selection Standards and Evaluations

Name of Candidate, Trade, Address, City, State, Zip

Table with columns for Maximum Points Allowable, Number of Years Credited, and Score. Rows include Educational Achievement, Work Experience, Seniority, Job Aptitude, and Oral Interview.

Total Allowable Points 70 Total Score ->

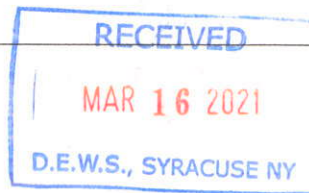
Rank

Evaluated by (Name) Date

Sponsor Name MACNY, The Manufacturers Association

Sponsor Address 5788 Widewaters Pkwy., Syracuse, NY

AT 508 (5-16)



NYS Department of Labor Apprentice Training MAR 30 2021 Central Office



Department of Labor

New York State Department of Labor

Sponsor Code 52218
Trade Code(s) See attached

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DEC 16 2019
D.E.W.S., SYRACUSE NY

Apprentice Training Program Affirmative Action Plan

- New Program
- Amended
- Renewal

To be Administered by: MACNY, The Manufactures Association
Sponsor's Name

Address: 5788 Widewaters Parkway
Syracuse NY 13214
Zip Code

Plan is Effective From: 3/1/2017 To: 2/28/2022
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: *[Signature]* 12/12/2019
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: Martha Ponge

Title: Director of Apprenticeship

Do not write below this line.

Approved by: [Redacted] 2/20/2020
NYS Department of Labor Date

Title: Workforce Programs Specialist

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.

Sponsor is a not-for-profit 501(c)(6) association representing over 300 businesses and organizations across New York State. The provide services such as skills training activities, advocacy and human resources consultation. The group non-joint program is currently operating statewide.

- 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.

/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 9,781,799 in the following county(counties):

All Counties in New York State		

The labor force includes: /1

Minorities

African American	<u>1,357,968</u>	<u>13.88</u>	%
Hispanic	<u>1,574,085</u>	<u>16.09</u>	%
Other Minorities /2	<u>872,695</u>	<u>8.92</u>	%
Total Minorities	<u>3,804,749</u>	<u>38.90</u>	%
 Women	 <u>4,712,440</u>	 <u>48.18</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>38.90</u>	%
Goal for Women:	<u>6.9</u>	%

NYS Department of Labor

DEC 20 2019

Central Office

/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 Auto Body Repairer and Painter

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 Apprentice 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.



/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:

The sponsor communicates apprenticeship openings with area community colleges.

They communicate openings with area Workforce Investment Boards.

They communicate openings with local veterans organizations such as Clear Path and the Institute for Veterans and Military Families.

They provide information to five different staffing agencies.

They provide information to 70 school districts.

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

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DEC 20 2019

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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.

/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.

DEC 30 2019

/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.