

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

New York State Registered Apprenticeship Training Program

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 the Training Program.

Cook	ion I	ТАРР	restace tr	ammg
Sect A.	Sponsor name. Moth	ership Food LLC dba The Tailor and the Cook	UL 122	021
В.	Trade(s): Cook (Che	f), Baker, Retail and Cook	C/C. 3. 10 D.	
C.	Type of Apprentices		Central Off	
*Fc	or sponsors of group	programs only (3 and 4) - See instructions for signatory list submission inf	ormation.	
D.		leting this form: Tim Hardiman	CENTRAL SINGLE-STORE PROFESSIONALS	
E.	Entity completing this	•		
	✓ Individual Employ	er/Sponsor 🗌 Union 🔲 JAC/JATC 🗎 Association		
	☐ Employer/Signate	ry company serving on the JAC/JATC, Board of Directors, or other governing	g body	
F.		eet: 94 Genesee Street		
	City/Town: Utica	State: N Y Zip Code:	13502	
G.	Email:	H. Phone: 315-624-3663 J. Fax:		
J.	Federal Employer Ide	entification Number (FEIN):		
ĸ.	NYS Unemployment	Insurance Employer Registration (ER) Number		
<u>L</u> .	Is this entity required	to report any employee wages under this FEIN to the NYS Department		
	of Tax and Finance?		🔽 Yes	□ No
M		one and provide attachments as noted in the instructions): Partnership Sole-Proprietor ZLC LLP Other		
N.	How many years has	your organization been in business? 10		
Q.		5) years, have you done business under a different name? hments as noted in the instructions.	✓ Yes	ПNо
P.	the past five (5) year predecessor compan- any officer, any parts Apprenticeship Progr	program application or if your entity is new to an existing program, within s, has your organization, any substantially owned-affiliated entity,** any y or entity, any owner of 10% or more of the entity's shares, any director, er, or any proprietor been a sponsor of, or signatory to, a NYS Registered am?	. Ll Yes	☑ No
	If 'Yes', provide attac	hments as noted in the instructions.		
Secti	on II			
Compl	ete all questions, (1 +	10), in this section and provide attachments as noted in the instructions.		
predec	essor company or en	has your organization, any substantially owned-affiliated entity,** any lity, any owner of 10% or more of the entity's shares, any director, any roprietor been the subject of:		
1.		rime under state or federal law?		☑ No
2.		nding indictment for conduct constituting a crime under state or federal law?.	****	☑ No
3.	Any grant of immunit	y for conduct constituting a crime under state or federal law?	Yes	V No

4.	Any suspension, bid	ejection, or disapproval by any governmental entity of any pact for lack of responsibility, or denial or revocation of pre-quality.)roposed	
		ale or municipality, or a voluntary exclusion agreement?		Z] No
5.	•	municipal debarments, including Workers' Compensation or		☑ N
6.	Any pending or oper	investigation of a possible violation, or determination of a violation including, but not limited to, investigations by the National	olation of any	
		United States Department of Labor (USDOL) Wage and Ho		Z N
7.		pen Occupational Safety and Health Administration (OSHA)		
	b. Any OSHA citati	on that resulted in a final determination classified as serious,	willful, or repeat? Yes	
8.	New York State	pen investigation of a possible violation, or determination of aw or regulation, any other state law or regulation, or any mo ing, but not limited to, investigations by the Bureau of Public	unicipal law or	
		and Health, or the Division of Labor Standards?		V No
	b. If 'Yes', was the v	olation determined to be willful?	Yes	\square No
9.	(EEOC), USDOL Off	aims, or lawsuits before the US Equal Employment Opportuce of Federal Contract Compliance Program (OFCCP), NYS	Division of	
	Human Rights, feder	al or state courts, or local Civil Rights Commissions?	D Yes	Z No
10.		ement, consent order, or like agreement involving any state,		
	federal enforcement	action (judicial or regulatory) other than those covered abo	ove? Yes	V No
	After completiu	ng Sections I and II, you must sign Section III, a	and have it notovines	•
		ig occuons i and it, you must sign section in, a	nu nave it notanzec	
Secti				
Depart serving	ment of Labor to revie gas a member of the	igned, recognize that I submit this questionnaire to permit the ew the background of the applicant, sponsor, union, or signat JAC/JATC or other governing body at the time of new progra or as otherwise deemed appropriate by the Department.	tory employers and associ	lation(s) gram
Lcerti		or an amorabe deciried appropriate by the Department.		
	· ·	month as well as the second of		
	of all statement			Гасу
,	under Penal La	submission of false or misleading information may constitute v (PL \S 210.35), and may be punishable by a fine of up to \$1 up to one year (PL \S 70.15(1)).	a Class A misdemeanor .000 (PL § 80.05(1)) and/	or
,	That the inform	ation submitted in this questionnaire and any attachments is t	rue, accurate, and comple	ete.
particip applica	ating in a Joint Appre tign request or progr	that any adverse information uncovered regarding any applienticeship Committee, or other sponsoring association, may am. Signing this document constitutes permission to release entity completing this form to the program sponsor.	adversely affect the spons	or's
\sim t	1111	and the state of t	6/4/21	
Signal	re of CEO, Chair, or	representative granted legal authority to bind the Enfity	Date	
	ame and title: Timoth			
	to me this:	ay of JUNG, 2021 TELESA W. Supra) L	шай А Адория (16, 11
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	Signature of Notary Public	or Commissioner of Deed	ds
# : 	NYSDPLONGUIUSO ONLY RECEIVE	D TESTERA AS STORAGE		
] 		Notery Parks, State of New Y	⁄ork	
1	JUN 2-2 2	: NA 6173-1266-276	ne on the trans	
f i	news cook	Commission Express September	22,0023	
1	D.E.W.S., SYRAC		flabor	
] 1 1	Faid - Receipt Date Stamp	Apprentice Trai	ning	
† 1	and the second of	JUL 1 2 202	Age control	
AT 9 (05/16)		г у	g "cra
o 1.				2 of 4

Central Office



New York State Department of Labor

Apprentice Training Program Registration Agreement

Paviaian									
Revision	New Program	m						State Us	e Only
Nature of Change:	- Trogical						AT Sponsor	No.	
							ATP Code	55-	GHLe
							Effective Da of AT Progr		
				1 - 2	-1 -				
	Mothership F			pa		land		the	Cook
Mailing Address:			Jtica		NY		13502		neida
3. Actual Address: Sa	number & street) nme		(city)			(state)	(zip c		(county)
0.4	number & street) 5-624-3663		(city)			(state)	(zip c		(county)
4. Telephone No.: 31	5-024-3003			Ext	Fax	(No.:			
5. E-mail Address:	01-(016)								
Frade/Occupation: _	Cook (Chef)								
7. No. Employees:	! No. Appr	entices:	0	No. Jour	neyworker	3	8. Rat	1:1,	151
9. DOT Code: 3/3	. 361.0	14			0. Leng		36		_ months
11. Apprentice Probati	onary Period:	month	S		2. Work	process	Standard	or R	evised
13. Minimum Journeyv	vorker Rate: \$ 16	6.00	per hou	r	14 Effec	ctive Date	of Wages:	6/3/21	
, , , , , , , , , , , , , , , , , , , ,						onvo Dato	or rragoo		
Apprentice wage p	rogression for ea	ch period	d – in mont	hs (M) or	hours (H)				
1 2	3 4	5	6	7	8	9	10	NYS D	epartment of Lab
MIMI	м П М П	М	МП	М	М	M	М	App	rentice Training
H	н 🗆 🗎 н 🗆	н	н 🗆	н 🗆	н 🗆	н	н		UL 1 2 2021
15.0 15.75									
								C	entral Office
16. The sponsor agree	es to comply with	the prov	isions on the	his side a		reverse o	f this agreem	ent.	
Signature of Official	Sponsor Repres	entative	Date			ture of U	nion Represe	ntative	Date
Tinkothy	Herelline	n(hono						
Print	Name and Title					Print Nar	ne, Title, and	Union Na	ame
19.									
	ıre New York Sta	te Depar	tment of La	abor			RECEIV JUN 22	/ED	Date
AT 10 (4-16)									1
						D.E	.W.S., SYRA	CUSE NY	1

WE ARE YOUR DOL



Related Instruction Availability

Trade: Cook (Chef)		
The Tailor and the Cook		
Sponsor Name:Tim Hardiman Sponsor Representative:		
Sponsor Address: No. & Street: 94 Genesee St	City	Utica
County: Oneida Sponsor Telephone No.: 315-624-3663	State: NY	Zip Code: 13502
Sponsor Telephone No.: 315-624-3663		
AT Office		
Name: NYS Dept of Labor Apprenticeship Training		
No. & Street: 450 S. Salina St Room 203		
City: Syracuse Apprentice Training Representative:	State: NY	Zip Code: 13202
Apprentice Training Representative:		Date Prepared: 6/3/21
Related instruction is not available.	Related instruction	on is available at:
School	words	
Name: Mohawk Valley Community College		
No. & Street:	ka Aurilia dissociarei jaroka esta esta esta esta esta esta esta est	
Name: Mohawk Valley Community College No. & Street: Utica City: Utica	State: NY	Zip Code: 13501
School Representative Contact Information:		
Name:		NYS Department of Lobo
Telephone No.:	Email:	Apprentice Training
School		JUL 12 2021
Name:		
No. & Street:		Central Office
City:		
School Representative Contact Information:		
Name:	200 Herbook St. And Adol All Adole is defined a secure of the consequence of the conseque	
Telephone No.:	Email:	
DLEA		
Name:		
No. & Street: 4937 Spring Road		
City: Verona	State: NY	Zip Code: 13478
Signature of DLEA		Date Prepared: 6/4/21

WE ARE YOUR DOL



Sponsor Code: 55-046

www.labor.ny.gov

Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor: The Tailor and the Cook		
Located at: (Address) 94 Genesee 8	St. Utica NY 13502	Address of the second of the s
Is presently accepting applications for A	Apprenticeship Training Positions: List estimated number of openin	nge: 1
	bk/Chef	
. If you are interested in taking advant eligible to apply.	age of this training opportunity and meet the following qualifi	cations, you are
Minimum Qualifications		
Minimum Age: 18 Minimum	Education: High School Diploma or Equivalent (GED/TASC	>)
Physical Condition: Be physically able to	perform the work required as determined by:	
(Note: Costs for medical examination, if application fees charged to an applicant	required, are at the expense of the sponsor. Additionally, any testi may not result in a profit for the sponsor.)	ing fees and permitted
Other;		
	NYS Department	
Other:	Apprentice Te	of Labor
Others	NYS Department Apprentice Tra JUL 13 202	^{thi} ng
Other:	~ V.C.	7
	Cemral Office	
Application forms may be obtained: Name: The Tailor and the Cook	From: 07/14/2021 To: 08/28/2021	
	40500	
Address: 94 Genesee St. Utica, NY		PROTECTION OF THE PROPERTY OF
Days: Wed-Sat	Times: after 4pm	
Phone: (315) 624-3663	Email:	
Special Instructions:		
All Applications Must be (please check)	☑ Received ☐ Postmarked No Later Than: 08	3/28/2021
AT 505 (05/21)	See Instructions on Reverse Side	Page 1 of 2



New York State Department of Labor

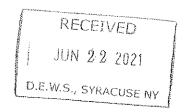
Sponsor Code	
Trade Code(s)	55-046

Selection Standards and Evaluations

Name of Candidate	Trade Cook (Chef)				
Address	City	St	ate	Zip	
Only those checked apply.		Maximum Points Allowable	Number of Years Credited	Score	
Educational Achievement 2 Points for Each Year of Educational Past Grade or	Total	28			Total
2 Points for Each Year of Educational Past Grade or Equivalent as Recognized by Local Educational Authorites		8			
Points for Each Year of Related Techincal Education Past Grade			-		
or Equivalent as Recognized by Local Educational Authorites 1 Points for Each Trade Related Adult or Continuing Education Course		16			
Completed		4			
Other					
	T-1-1	20			
Work Experience 5 Points for Each Year of Trade Related Work Experience	Total	30	711111		Total
Commence of the commence of th		20			
Points for Each Year of Active Military Experience		4			
Points for Each Year of General Work Experience		6			
Other					
Seniority	Total	2			Total
Points for Each Year of Employment With The Sponsoring Firm		2			
Other					
Joh Antitudo	Total	0	MILLER		Takal
Job Aptitude SATB (Specific Aptitude Test Battery) #	Total	0			Total
Points for High Medium Low					
Name of Alternative Aptitude Test Administered by					
Other					
Oral Interview Not to Europel 400/ of Tatal Cours	Total	40	WIIII.		7-1-1
Oral Interview: Not to Exceed 40% of Total Score Ability to Communicate	Total				Total
		10			
		10			
Ability to Reason and Comprehend		10			
Interest and Motivation		10			
Other					
Other					
Total		100	Total	NYST	Onardman & C.
Allowable Points	\rightarrow	100	Score→	An	epartment of Labor prentice Training
		Ra	nk		JUL 1 2 2021
Evaluated by	D				
Evaluated by(Name)	Di	ate		(Central Office
Sponsor Name The Tailor and the Cook					
Sponsor Address 94 Genesee St, Utica, NY 13502					
Sponsor Address Of Contessed Ot, Otica, NY 13502			RECEIVED		
AT EDO /E 16\					
AT 508 (5-16)			IUN 22 20	21	
		D.E.W	I.S., SYRACUS	SENY	



New York State Department of Labor



Non-Discrimination Plan (Short Form)

A. Equal Opportunity Plédge: 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, Parl 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 Frevention 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.

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

	listed on form AT 505, Apprentice Training Recruitment Notification and Minimum Quandards and Evaluations, on file with the Department.	alifications, and form
D. Recruitment: It is ag	jeed that the sponsor will recruit applicants for apprenticeship by (Check One):	
Listing all ap	prentice openings with the NYS Job Bank (<u>www.newyork.us.jobs/</u>) for a minimum of selections are made.	five full working
	pitment to present employees of the sponsor and/or union members of the union spo	nsonng
	deship program. Resulting vacancies will be listed with the NYS Job Bank (www.new)	Program to Contract may be taken may be according a propriate of the
	prentices by methods other than those above. A detailed statement of the recruitment	nt
method mus	be attached and approved by the Commissioner of Labor prior to being used.	
On behalf of the sponsor, I cer	by that it is our intent to fulfill these Equal Opportunity Standards.	
Signature of Sponsor		2.4.21
	The above signature must be the employer's Chief Executive Officer or the Chair of the Joint Apprenticeship Committee or their authorized representative	Date
Timo	thy Hardiman, Owner	
***************************************	Print Name and Title	and the state of t
Approved by		
A-1-	NYS Department of Labor	Date
The Tailor Sponsor Name	and the Cook Sponsor Code No. of Apprentices	

AT 602 (7-16)

Cook (chef), Cook, Baker

JUL 1 2 2021

Apprentice Training

NYS Departminade Code (5) 55-569 (, 55-010, 55-646)