



New York State Registered Apprenticeship Training Program
Sponsor Information Sheet and Instructions

NYS Department of Labor
Apprentice Training

JUL 08 2022

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: NYC Department of Environmental Protection

B. Trade(s): WASTEWATER SYSTEMS OPERATION SPECIALIST, WATER SYSTEMS OPERATION SPECIAL

C. Type of Apprenticeship Training Program (check one):
1 [] Individual Non-Joint 2 [x] 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: Same as above

E. Entity completing this form (check one):
[x] 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: 71 Smith Ave
City/Town: Kingston State: NY Zip Code: 12401

G. Email: [redacted] H. Phone: (845) 340-7276 I. Fax: [redacted]

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? 100+

O. Within the past five (5) years, have you done business under a different name? [] Yes [x] 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 [x] 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 [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.

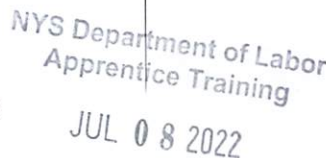
Paul V. Rust Signature of CEO, Chair, or representative granted legal authority to bind the Entity 5/20/22 Date

Print name and title: PAUL V. RUST, DEPUTY COMMISSIONER

Sworn to me this: 20th day of May 2022
Tiffany J Sperl Signature of Notary Public or Commissioner of Deeds



Tiffany J Sperl
 No. O1SP6073644
 Notary Public, State of New York
 Qualified in Ulster County
 My Commission Expires on 4/29/2026





New York State
Registered Apprenticeship Training Program
Sponsor Information Sheet and Instructions

NYS Department of Labor
Apprentice Training

JUL 08 2022

Central Office

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- A. Sponsor name: NYC Environmental Protection
- B. Trade(s): WASTEWATER SYSTEMS OPERATION SPECIALIST, WATER SYSTEMS OPERATION SPECIAL
- 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: District Council 37, AFSCME, AFL-CIO

- 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: 125 Barclay Street
City/Town: New York State: NY Zip Code: 10007

G. Email: [Redacted] Phone: 212-815-1504 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? 78 years

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
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- 2. Any indictment or pending indictment for conduct constituting a crime under state or federal law? Yes No
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 b. Any OSHA citation that resulted in a final determination classified as serious, willful, or repeat? Yes No
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 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
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I certify:

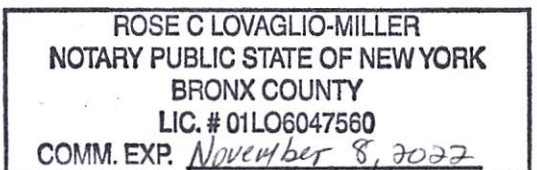
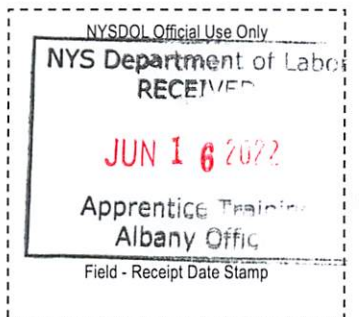
- That the Department may use its sole discretion to choose the means to determine the truth and accuracy of all statements made herein.
- That intentional submission of false or misleading information may constitute a Class A misdemeanor under Penal Law (PL § 210.35), and may be punishable by a fine of up to \$1,000 (PL § 80.05(1)) and/or imprisonment of up to one year (PL § 70.15(1)).
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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 05/03/22

Print name and title: Henry Garrido, Executive Director

Sworn to me this: 3rd day of May, 2022 Rose C. Lovaglio-Miller
 Signature of Notary Public or Commissioner of Deeds





Apprentice Training Program Registration Agreement

Revision

Nature of Change: New Program

State Use Only	
AT Sponsor No.	
ATP Code	56-582
Effective Date of AT Program	

1. Name of Sponsor: NYC Environmental Protection
 2. Mailing Address: 71 Smith Av Kingston NY 12401 Ulster
(number & street) (city) (state) (zip code) (county)
 3. Actual Address: same as above
(number & street) (city) (state) (zip code) (county)
 4. Telephone No.: (845) 340-7700 Ext. 7276 Fax No.: none
 5. E-mail Address: [REDACTED]

6. Trade/Occupation: WASTEWATER SYSTEMS OPERATION SPECIALIST

7. No. Employees: 885 No. Apprentices: 0 No. Journeyworkers: 4238 8. Ratio: 1:1:1

9. DOT Code: 56-582 10. Length of Program: 24 months

11. Apprentice Probationary Period: 6 months 12. Work process: Standard or Revised

13. Minimum Journeyworker Rate: \$ 47188 per yr \$23.59 per hr. 14. Effective Date of Wages: 10/26/2019

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 checked="" type="checkbox"/>	M <input checked="" 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 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"/>	H <input type="checkbox"/>
0-12 Mo	13-24 Mo								
15.45	18.50								

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

17. [Signature] 5/20/22 18. [Signature] 5/12/2022
 Signature of Official Sponsor Representative Date Signature of Union Representative Date
PAUL V. BUSH, DEPUTY COMMISSIONER Rose Longiglio-Miller, Assoc. Dir. DC37
 Print Name and Title Print Name, Title, and Union Name

19. _____ Date

Signature New York State Department of Labor

Date

NYS Department of Labor
 Apprentice Training
 JUL 08 2022
 Central Office



Apprenticeship Training Program

Related Instruction Availability

Trade: WASTEWATER SYSTEMS OPERATION SPECIALIST

Sponsor Name: NYC Department of Environmental Protection

Sponsor Representative: Sandra Shaddock

Sponsor Address:

No. & Street: 71 Smith Avenue City: Kingston

County: Ulster State: NY Zip Code: 12401

Sponsor Telephone No.: 845-340-7276

Proposed Number of Apprentices: 2

AT Office

Name: NYS DOL Albany

No. & Street: W. Averell Harriman State Office Campus Building 12, Room 455/459

City: Albany State: NY Zip Code: 12240

Apprentice Training Representative: [REDACTED] Date Prepared: 5/11/22

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

School

Name: SUNY Ulster

No. & Street: 94 St. Mary's Ave

City: Kingston State: NY Zip Code: 12401

School Representative Contact Information:

Name: Barbara Reer Telephone No.: 845-802-7171 Email: [REDACTED]

School

Name: _____

No. & Street: _____

City: _____ State: _____ Zip Code: _____

School Representative Contact Information:

Name: _____ Telephone No.: _____ Email: _____

DLEA

Name: [REDACTED]

No. & Street: [REDACTED]

City: [REDACTED] Zip Code: 12466

Signature: [REDACTED] Date Prepared: 4/12/22

WE ARE YOUR DOL



Sponsor Code _____

Trade Code(s) 516-581

516-582

New York State Department of Labor
Apprentice Training Program Affirmative Action Plan


New Program Amended Renewal

To be Administered by (Sponsor's Name): NYC Department of Environmental Protection

Address: 71 Smith Avenue, Kingston State: NY Zip: 12401

Plan is effective: From: 5/1/2022 To: 4/30/2026

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

Signature of Sponsor:  Date: 5/20/22

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: Paul V. Rush, P.E.

Title: Deputy Commissioner, Bureau of Water Supply

Do not write below this line.



Approved by: _____ Date: _____

NYS Department of Labor

Title: _____

NYS Department of Labor
Apprentice Training

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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.

The mission of the Bureau of Water Supply (BWS) is to reliably deliver a sufficient quantity of high quality drinking water to protect public health and quality of life of the City of New York, a core component of the broader DEP mission to protect public health and the environment by supplying clean drinking water, collecting and treating wastewater, and reducing air, noise, and hazardous materials pollution. BWS employs roughly 1000 people north of NYC to fulfill it's mission. The NYC Watershed is over 2000 square miles, and staff work throughout 9 counties: Westchester, Dutchess, Putnam, Ulster, Sullivan, Orange, Greene, Delaware, and Schoharie counties, to ensure the delivery of over 1.1 billion gallons of high quality drinking water to NYC and surrounding communities.

- 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*

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.

SEE EEO POLICY

- D. Sexual Harassment Policy Statement*

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.

SEE EEO POLICY

* 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 57,960 in the following county(counties):

Delaware	_____	_____
Green	_____	_____
Schoharie	_____	_____

The labor force includes:*

Minorities

African American	<u>759</u>	<u>1.31</u> %
Hispanic	<u>1944</u>	<u>3.35</u> %
Other Minorities**	<u>1,175</u>	<u>2.03</u> %
Total Minorities	<u>3,878</u>	<u>6.69</u> %
Women	<u>27,379</u>	<u>47.24</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: 6.69 %
 Goal for Women: 6.9 %

* 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.

** Other Minorities: Native Americans; Alaskan Natives; Pacific Islanders; Asians.

Part II – Labor Force Analysis/Utilization Study

A. The total labor force is 716,465 in the following county(counties):

Dutchess	_____	_____
Putnam	_____	_____
Westchester	_____	_____

The labor force includes:*

Minorities

African American	<u>84,930</u>	<u>11.85</u> %
Hispanic	<u>149,200</u>	<u>20.82</u> %
Other Minorities**	<u>50,604</u>	<u>7.06</u> %
Total Minorities	<u>284,734</u>	<u>39.73</u> %

Women	<u>341,840</u>	<u>47.71</u> %
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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: 39.73 %
 Goal for Women: 6.9 %

NYS Department of Labor
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Central Office

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** Other Minorities: Native Americans; Alaskan Natives; Pacific Islanders; Asians.

Part III – Current and Projected Staffing and Annual Goals

Title of Trade Water Sys Oper Or/Uls/Sul

A. Current Staffing in the Above Trade

	African American	Other

B. Projected Number of Apprentice Indentures*

Year	2022	2023	2024	2025	2026	Totals

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:*

--	--	--	--	--	--	--

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.

NYS Department of Labor
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* Where no apprentice indentures are planned for a particular group or year, enter "0".

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

Part III – Current and Projected Staffing and Annual Goals

Title of Trade Water Sys Oper Dut/Put/West

A. Current Staffing in the Above Trade

Total	African American	Hispanic	Other Minority	Women

B. Projected Number of Apprentice Indentures*

Year	20 <u>22</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	Totals

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:*

Year	20 <u>22</u>	<u>23</u>	<u>24</u>	<u>25</u>	<u>26</u>	Totals

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.

NYS Department of Labor
Apprentice Training

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

Part III – Current and Projected Staffing and Annual Goals

Title of Trade Water Sys Oper Del/Grn/Schoh

A. Current Staffing in the Above Trade

	African	Other
[Redacted]		

B. Projected Number of Apprentice Indentures*

Year	20 <u>22</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	Totals
[Redacted]						

C. Annual Goals

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[Redacted]

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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:

Goal 1: Raise awareness about DEP careers

Action: DEP will host an annual Water Workforce for the Future Summit, inviting local government officials from Greene, Sullivan, Ulster, Westchester, Dutchess, Orange & Putnam Counties, local community colleges, and universities in the area, including but not limited to Bard College, SUNY ESF, SUNY New Paltz, and SUNY Delhi, agency partners within DEP and the Water Sector, and various community groups to learn about our organization, and the Apprenticeship program.

Goal 2: Create a network for candidate referrals

Action: Outreach and build relationships with local school districts, career & tech educational providers, community colleges, direct entry providers, local community groups, workforce investment boards, local DOL. To date, we have already begun outreach and have connected with two schools. Kingston High-School is developing a course curriculum that will include some projects to raise awareness to DEP's STEM careers, and will incorporate some of the skills needed to be successful in the Apprenticeship program.

Goal 3: Visibility

Action: Participate in career fairs for local schools, colleges, and DOL. We have participated in local job fairs in the past, most recently at SUNY Ulster last fall. We will continue to participate in job fairs, as they occur.

Action: Increase presence at local community events as they occur.

Action: Increase Social Media Visibility

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

Helmets to Hardhats
Youthbuild

NYS Department of Labor
Apprentice Training

JUL 08 2022

Central Office

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 (<https://newyork.usnlx.com/>).
- 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.*

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.

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

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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.*

- 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.**

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.

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

** 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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Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor: NYC Department of Environmental Protection

Located at: (Address) 71 Smith Avenue Kingston, NY 12401

Is presently accepting applications for Apprenticeship Training Positions: List estimated number of openings: _____

In the occupation of: (List Trade) Water System Operations Specialist

If you are interested in taking advantage of this training opportunity and meet the following qualifications, you are eligible to apply.

HS Diploma, or GED

Minimum Qualifications

Minimum Age: 18 Minimum Education: _____

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 Drivers License and reliable transportation

Other: _____

Other: _____

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Application forms may be obtained: From: _____ To: _____

Name: Sandra Shaddock, Chief of Employee Services

Address: www1.nyc.gov/jobs

Days: _____ Times: _____

Phone: _____ Email: _____

Special Instructions:

Candidates may apply at anytime, Apprenticeships will launch annually. Search Watershed Apprenticeship for job description and to submit an application.

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



Selection Standards and Evaluations

Name of Candidate: _____ Trade: _____

Address: _____ City: _____ State: _____ Zip: _____

Only those checked apply.		Maximum Points Allowable	Number of Years Credited	Score
Educational Achievement		Total		Total
<input checked="" type="checkbox"/>	<u>1</u> Points for Each Year of Education Past Grade <u>12</u> or Equivalent as Recognized by Local Educational Authorities	20		
<input checked="" type="checkbox"/>	<u>2</u> Points for Each Year of Related Technical Education Past Grade <u>10</u> or Equivalent as Recognized by Local Educational Authorities	4		
<input checked="" type="checkbox"/>	<u>1</u> Points for Each Trade Related Adult or Continuing Education Course Completed	4		
<input checked="" type="checkbox"/>	<u>8</u> Other: <u>points for participation in a pre-apprenticeship or job readiness program</u>	8		
Work Experience		Total		Total
<input checked="" type="checkbox"/>	<u>3</u> Points for Each Year of Trade Related Work Experience	40		
<input checked="" type="checkbox"/>	<u>3</u> Points for Each Year of Active Military Experience	15		
<input checked="" type="checkbox"/>	<u>2</u> Points for Each Year of General Work Experience	15		
<input type="checkbox"/>	Other: _____	10		
Seniority		Total		Total
<input type="checkbox"/>	Points for Each Year of Employment with The Sponsoring Firm			
<input type="checkbox"/>	Other: _____			
Job Aptitude		Total		Total
<input type="checkbox"/>	Name of Aptitude Test: _____			
<input type="checkbox"/>	Administered by _____			
<input type="checkbox"/>	Other: _____			
Oral Interview: Not to Exceed 40% of Total Score		Total		Total
<input checked="" type="checkbox"/>	<u>0-10</u> Ability to Communicate	40		
<input checked="" type="checkbox"/>	<u>0-10</u> Willingness to Accept Obligation of Apprenticeship	10		
<input checked="" type="checkbox"/>	<u>0-10</u> Ability to Reason and Comprehend	10		
<input checked="" type="checkbox"/>	<u>0-10</u> Interest and Motivation	10		
<input type="checkbox"/>	Other: _____			
<input type="checkbox"/>	Other: _____			

Total Allowable Points →

100	Total Score →
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Evaluated by: _____
(Name)

Rank _____
Date: _____

Sponsor Name: _____
Sponsor Address: _____

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