

| NYSDOL Use Or | ly: Sponsor N  | o78092     |                   |  |
|---------------|----------------|------------|-------------------|--|
| ☑ New Program | ☐ Reactivation | ☐ Revision | ☐ Recertification |  |

### New York State Registered Apprenticeship Training Program

NYS Department of Labor Apprentice Training

JUL 0 1 2021

Sponsor Information Sheet and Instructions Form AT 9 is used to collect data regarding sponsors and signatories for the New York State (NYS) Registrated Office

Apprenticeship Training Program. Please read the instructions on pages 3 and 4 before completing this form. Section I TECHNOLOGY AND MANUFACTURING ASSOCIATION A. Sponsor name: Kochester B. Trade(s): Building Maintenance Mechanic . PLANT MAINTENANCE - PLANT MAINTENANCE . P. PELI C. Type of Apprenticeship Training Program (check one): PLACE MANUFACTURING MANUFACTURING 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: Kochesten Technology & Manufacturing 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 City/Town: Kisches La State: M.Y. G. Email: H. Phone: 585 - 721 - 6930 I. Fax: 585 - 427. Federal Employer Identification Number (FEIN): K. NYS Unemployment Insurance Employer Registration (ER) Number: L. Is this entity required to report any employee wages under this FEIN to the NYS Department of Tax and Finance?..... TINO M. Type of Entity (check one and provide attachments as noted in the instructions): ✓ Corporation Partnership Sole-Proprietor N. How many years has your organization been in business? 75 O. Within the past five (5) years, have you done business under a different name? 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 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: Any conviction for a crime under state or federal law?

Yes 2. Any indictment or pending indictment for conduct constituting a crime under state or federal law?... Yes 

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

| 4.                 | Any suspension, bid contract or subcontra   | rejection, or disapproval by a<br>act for lack of responsibility, o  | ny governmental entity of a   | ny proposed   |                            |                   |
|--------------------|---|--|---|---|----------------------------|-------------------|
|                    |   | ate or municipality, or a volunt   |   |   | FTI Voc                    | MNO               |
| 5.                 |   | municipal debarments, includ   |   |   |                            |                   |
| 6.                 | Any pending or open   | n investigation of a possible viction including, but not limited t   | olation, or determination of  | a violation of anv                                      |                            | IIZI NO           |
|                    |   | United States Department of  |   |   |                            | ☑ No              |
| 7.                 |   | ppen Occupational Safety and   |   |   |                            | DNO               |
|                    |   | on that resulted in a final deter  |   |   |                            | Z No              |
| 8.                 | <ul> <li>Any pending or one of the New York State I regulation including</li> </ul> | pen investigation of a possible<br>aw or regulation, any other sta<br>ing, but not limited to, investiga<br>y and Health, or the Division o  | e violation, or determination<br>ate law or regulation, or any<br>ations by the Bureau of Pub | of a violation of<br>municipal law or<br>olic Work, the |                            | IJ No             |
|                    |   | riolation determined to be willfu  |   |   |                            | No                |
| 9.                 | Any investigations, c   | laims, or lawsuits before the L<br>ice of Federal Contract Comp  | JS Equal Employment Oppo  | ortunity Commission                                     |                            | INC INC           |
|                    |   | al or state courts, or local Civi  |   |   | . 🗆 Yes                    | Z No              |
| 10.                |   | lement, consent order, or like   |   |   |                            | LEZI NO           |
|                    |   | action (judicial or regulatory) of   |   |   |                            | IZ No             |
|                    |   | dotton (judicial of regulatory) (  | omer man mose covered   | above   | L res                      | LEINO             |
|                    | After completing  | າg Sections I and II, yoເ  | ı must sign Section II  | l, and have it no                                       | tarized.                   |                   |
| Secti              |   |  |   |   |                            |                   |
|                    |   | igned, recognize that I submit   | . (1. t   |   |                            |                   |
| Depart<br>servin   | tment of Labor to revie<br>g as a member of the .                                   | ew the background of the appl<br>JAC/JATC or other governing<br>or as otherwise deemed appro   | icant, sponsor, union, or sig<br>body at the time of new pro                                  | inatory employers a                                     | nd associa                 | ation(s)<br>ıram  |
| I certi            |   | and an   | opiate by the bopatiment.   |   |                            |                   |
|                    | •   | ment may use its sole discretions made herein  | on to choose the means to   | determine the truth                                     | and accur                  | асу               |
| ,                  | <ul> <li>That intentional</li> </ul>  | submission of false or mislead   | ding information may consti   | tute a Class A misd                                     | emeanor                    |                   |
|                    | imprisonment of   | v (PL § 210.35), and may be p<br>up to one year (PL § 70.15(1)   | )).   | · -   |                            |                   |
| •                  | <ul> <li>That the informa</li> </ul>  | ition submitted in this question   | nnaire and any attachments  | is true, accurate, ar                                   | nd comple                  | te.               |
| applica<br>informa | pating in a Joint Appre<br>ation request or progra<br>ation) concerning the         | that any adverse information inticeship Committee, or other important Signing this document control form to the completing this form the completing the completing this form the completing the completing this form the completing | sponsoring association, manual properties of the program sponsor.                             | ay adversely affect the ase this information            | the sponsor<br>(including) | ar'e              |
| Signati            | ure of CEO, Chair, or i   | representative granted legal a   | uthority to bind the Entity   | / Øs  | ate                        |                   |
| Print na           | ame and title:ため  | sent J. Coque  | Executive   | Director  |                            | ar ar o community |
| Sworn              | to me this: <u>/8</u> da  | By of MARCH ZOZI   | Kent John   | and the agreement of the second                         |                            |                   |
| ,                  | SIVERON OF CALLS OF   | 1  | Signature of Notary Pu  | olic or Commissione                                     | er of Deed                 | S                 |
| 1                  | NYSDOL Official Use Only  | <b>1</b>   |   |   |                            |                   |
| An                 | arosioonin ini  | Received<br>Apprenticeship Unit  | Richard T. Tumer  |   |                            |                   |
| 1                  |   | 1<br>₹   | Notary Public, State of Ne  |   |                            |                   |
| ř<br>f             |   | 1 MAY 7 2021   | qualified in Moerce Co<br>commission expires Mar. (   | unity<br>30. 2026                                       |                            |                   |
|                    |   | 1<br>!<br>!  |   | Department of La  | bor                        |                   |
| t<br>1             | ROCHESTER   | ROCHESTER  |   | pprentice Training                                      |                            |                   |
| 1                  | Field - Receipt Date Stamp  | í<br>{<br>!<br>!   |   | .1111 0 1 2021  |                            |                   |

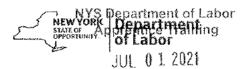
Received Apprenticeship Unit

MAY 2 0 2021



## Apprentice Training Program Registration Agreement

|     | Revision     |            |              |             |                |             |            |           | 1             | St               | ate Use Only                             |
|-----|--------------|------------|--------------|-------------|----------------|-------------|------------|-----------|---------------|------------------|--|
|     | Nature of C  | hange.     | NEW I        | PROC        | SRAN           | 1           |            |           |               |                  |  |
|     | 1101010      | _          | Either       | Turne       | er or C        | oyne c      | an sigr    | 1         |               | AT Sponsor No    |  |
|     |              |            |              |             |                | -,          |            |           |               | ATP Code 47      | 7-570                                    |
|     |              |            |              |             |                |             |            |           |               | of AT Program    |  |
| 1.  |              |            |              |             |                |             |            |           | d Mani        | ufacturing /     | Association                              |
| 2.  | Mailing Addr | ess: 248   | 5 W. Henri   | ietta Rd. S | Ste 152        | Roches      | ter        | Nev       | V York        | 14623            | Monroe                                   |
|     |              | (nu        | ımber & s    | street)     |                | (city)      |            |           | (state)       | (zip code        | e) (county)                              |
| 3.  | Actual Addre | ss: Sa     | me as a      | above       |                |             |            |           |               |                  |  |
|     | =            |            | mber & 9     |             | ell/office (5) | (city)      |            |           | (state)       | (zip code        | .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 .5 . |
| 4.  | Telephone N  | lo.:       | (000) EDE 01 | 00,1110110  | om om oo (o    | -           | Ext        | Fax       | K No.: 100    | 35) 427-2796     |  |
| 5.  | E-mail Addre |            |              |             |                | 21 12       |            |           |               |                  |  |
| 6.  | Trade/Occup  | oation: _N | /lanufa      | acturii     | ng En          | gineeri     | ng Te      | chnicia   | n             |                  |  |
| 7.  | No. Employe  | es: 3      | N            | o. Appre    | entices:       | 1           | No. Jour   | neyworker | s: 1          | 8. Ratio:        | 1:1;1:1                                  |
|     | DOT Code:    |            |              |             | -              |             |            |           |               | ram: 48          |  |
|     |              |            |              |             | 2 mor          |             |            |           |               |                  |  |
| 11. | Apprentice   | Probatio   | nary Peri    | iod:        | 2000           | AT :        | 704        | 12. Work  | process:      | Standard         | or Revised                               |
| 13. | Minimum Jo   | ourneywo   | orker Rat    | e: \$       | ee             | per A I     | 701        | 14. Effec | ctive Date    | of Wages:        | ER 7015                                  |
| 15. | Apprentice   | wade bro   | naression    | for eac     | h nerion       | l – in mont | he (M) or  | houre (H) |               |                  |  |
| 10. |              | 2          | 3            | 4           | 5              | 6           | 7          | 8         | 9             | 10               |  |
|     |              |            |              |             |                |             |            |           |               |                  |  |
|     |              |            |              | 1 D         | М              | М           | М□         | М□        | М             | М□               |  |
|     | н 🗆 н        | П          | □   H        |             | н 🔲            | н           | н          | н         | н             | н□               |  |
|     | *Per AT      | 701        |              |             |                |             |            |           |               |                  |  |
|     |              |            |              |             |                |             |            |           |               |                  |  |
| 16. | The sponso   | or agrees  | s to comp    | ly with t   | he provi       | sions on th | nis side a | nd on the | reverse of    | this agreement   |  |
|     |              | 3          |              | ,           |                | 1 1         |            |           | 0 1           | 1                |  |
| 17. | Kund         | 17         | m            |             |                | 5/18/       | 21 18      | 3. 50     | Cut           | log              | pr 5/18/21                               |
|     | Signature of |            |              | 0.0         |                | Date        |            |           | (             | ion Representati | tive Date                                |
|     | Richard Turn |            | tor of Wo    |             | Develop        | oment       | <u>F</u>   |           |               | Director         | ion Nome                                 |
|     |              | 1 mich     | and and      | THE         |                |             |            |           | r IIIIL INAMI | e, Title, and Un | IOII Name                                |
| 19. |              |            |              |             |                |             |            |           |               |                  |  |
|     |              | Signatur   | e New Yo     | ork State   | Depart         | ment of La  | bor        |           |               | NYS De           | Date partment of Labor                   |
|     |              |            |              |             |                |             |            |           |               | App              | rentice Training                         |
| (11 | /20)         |            |              |             |                |             |            |           |               |                  | JL 0 1 2021                              |



### Please send to your regional DOL office:

## 276 Waring Rd, Rochester NY 14609

### **Apprenticeship Agreement**

| . Apprentices  | hip Agreeme                       | Moffice  | Spon                  | sor No. <u>7809</u>  | 2              | ATP Co   | de <u>47 -</u> | 570                                      |   |  |
|--|-----------------------------------|--|-----------------------|--|----------------|--|----------------|--|---|--|
|  | rentice (Last, Firs               |  |                       |  |                | f Program Spo  |                | · · · · · · · · · · · · · · · · · · ·    | •                                       |  |
| Knap   | P. Geor                           | ae   |                       |  | RTMA R         | ochester Ted   | chnology       | and Manufa                               | acturing                                | յ Assoiatior   |
| Accession and the second secon |                                   |  |                       |  |                | ddress of Prog<br>Vest Henri   | -              | •  | eet)                                    |  |
|  |                                   |  |                       |  | City           | Cour   | nty            |  | State                                   | Zip code   |
|  |                                   |  |                       |  | Roche          | ster Mo  | nroe           | New                                      | York                                    | 14623  |
|  |                                   |  |                       |  |                | dress of Progra  |                | •  | •                                       |  |
|  |                                   |  |                       |  | 124 C          | olumbia S  | Street (7      | Advance                                  | d Ato                                   | mization   |
|  |                                   |  |                       |  | City           | Cour   |                |  | State                                   | Zip code   |
|  |                                   |  |                       |  | Clyde          | Way  |                | New Y                                    |   | 14433  |
|  |                                   |  |                       |  |                | Time-based     facturing   | _              | ipetency-base                            |   | <sub>Hybrid</sub><br>Shniciar  |
|  |                                   |  |                       |  | 00.com         |  |                |  |   |  |
|  |                                   |  |                       |  | 3.Start Da     | te 4. Length o<br>(Months)<br>48   | f program      | 5. DOL Appr<br>Period for Co<br>(Months) | ompletion                               |  |
| 1  | d Supplemental I                  |  |                       |  | 4090CC         | RI Compe   | nsated         | 7. Minimum<br>\$28.00                    | -                                       | -Worker Rate   |
| 8.Credit for or  | evious training o                 | r experience:  | 24 Ma                 | onths  | Points         | TO THE OWNER OF THE OWNER | Sections       | 1  | <b>.</b>                                | <del>*************************************</del>   |
| ☐ Reinstat   | -                                 | ational Education  |                       | ,  | Experience (Em |  | Advance        | red Hom                                  | gtion                                   | Technolog  |
| . Apprentice Wa  | age Progression<br>2              | (Without Benefi<br>3   | ts) for each Per<br>4 | iod. Choose one:   | ☐ Months ☐     | ] Hours []   | Points [       | ] Sections                               |   | 10   |
| 1000   | 1000                              | 1000   | 1000                  | 1000   | 1000           | 1000   | 1000           |  |   | and the state of t |
| \$18.00  | \$19.00                           | \$20.00  | \$21.00               | \$22.00  | \$23.00        | \$24.00  | \$25.00        |  |   | 19 helichen ber ermen mennen men egen 1940.  |
|  | E                                 | The Spons  | or and the Ap         | prentice Agree   | to the Terms   | on Page 2 o  | f this For     | m.                                       |   |  |
|  | -2                                | 111  |                       | 151221   | End            | 11   | giggation as a |  | 51                                      | 5,200  |
| Signature of /   | Apprentice and Par                | ent/Guardian if ag   | e 16- <b>1</b> 7      | Date   | Signature      | of Official Sponso   | or Represent   | ative                                    | D                                       | ale  |
| Registere  | ed by the New Yo                  | ork State Depart   | tment of Labor:       |  |                |  |                |  |   |  |
|  |                                   |  |                       |  |                |  |                |  |   |  |
|  | Signature                         | New York State   | Department of         | Labor  | <u>/</u> D     | ate  |                |  |   |  |
|  | THE DEPARTM                       | ENT OF LABOR   | MUST RECEIVE          | THIS AGREEMENT   | WITHIN 30 CALE | NDAR DAYS OF   | THE REQUE      | STED START                               | DATE.                                   |  |
| . Worksite Tr  | aining Comple                     | etion or Term  | ination               |  |                | ,,,,,,,,,  |                | W7000 0700 0 000 000 000 000 000 000 000 |   | Michael description  |
| heck one: 🔲 C  | Completed Works                   | site Training  | Terminated            |  | Quit 🔲 Lay     | off Prog   | ram Termir     | nation 🔲 T                               | Fransfer                                |  |
| completion or Te   | rmination Date                    |  | - (itxptain i         | n Comments)  | (Lack of t     | Mark)  |                | MANAGAMA MANAGAMA                        | State Use                               | Only   |
| comments   |                                   |  |                       |  |                |  |                | To ATC                                   | Date                                    |  |
|  |                                   |  |                       |  |                |  |                | To DLEA                                  | *************************************** |  |
|  |                                   |  |                       |  |                |  |                | Data Entr                                | у                                       | ************************************   |
| Signature of O   | fficial Sponsor Rep               | resentative  | /<br>Date             | <u></u>  | Print Nan      | 10   |                |  |   |  |
|  | THE DEPARTME                      | NT OF LABOR N  | IUST RECEIVE T        | HIS FORM WITHIN  | 30 CALENDAR D  | AYS OF THE CO  | MPLETION       | TERMINATION                              | DATE.                                   |  |
| . h  |                                   | harman and an analysis of the second and the second |                       | STATE US   | SE ONLY        |  | ,,             |  |   | ***************************************  |
| <ol> <li>Ri Complet</li> <li>Apprentice ha</li> </ol>  | i <b>on</b><br>s satisfied the Ri | l requirements.  | Completion da         | le:  |                |  |                |  | State Use<br>Date                       |  |
| Apprentice ha  | s not satisfied th                | e RI requiremen  | nts.                  | Martine Carlo Carlo Consultante Consultant |                |  |                | To ATC<br>To DLEA                        |   | v 10000000000  |
|  |                                   |  |                       |  |                |  |                | Data Entr                                | у                                       | • ••••••   |
| Signature  | of DLEA Represer                  | native   | Date                  |  | Print Nam      | ne   |                | 1  |   |  |

Apprenticeship Training Program

Sponsor Code 78092

Trade Code 47-570

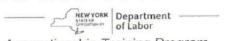
Apprenticeship training riogram

#### Related Instruction Availability NYS Department of Labor Trade: Manufacturing Engineering Technician Apprentice Training Sponsor Name: RTMA, The Rochester Technology & Manufacturing Association JUL 0 1 2021 Sponsor Representative: Richard Turner Sponsor Address: Central Office City: Rochester No. & Street: 2485 West Henrietta Road, Suite 152 Zip Code: 14623-2323 State: New York County: Monroe Sponsor Telephone No.: 585-721-6930 Proposed Number of Apprentices: AT Office Name: New York State Department Of Labor, Apprenticeship Training Office No. & Street: 276 Waring Road State: New York Zip Code: 14609 City: Rochester Date Prepared: 5/11/21 Apprentice Training Representative: Related instruction is available at: Related instruction is not available. School Name: Monroe Community College No. & Street: 2485 West Henrietta Road Zip Code: 14623 State: New York City: Rochester School Representative Contact Information: Name: Dale Pearce Telephone No.: 585-685-6118 Email: School Name: Tooling U (online only) No. & Street: 3615 Superior Avenue East, Building 44, 6th Floor Zip Code: 44114 State: Ohio City: Cleveland School Representative Contact Information: Email: Telephone No.: DLEA Name: No. & Street: Office of Adult & Continuing Education, Rochester City School District, 30 Hart Street, Room 218 Zip Code: 14605 City: Rochester

AT 8 (4/19)

Signature of DLEA

nticeshipDate Prepared:



Sponsor Code 78092

Trade Code 47-570

Apprenticeship Training Program

## Related Instruction Availability

NYS Department of Labor Apprentice Training

| Trade: Manufacturing Engineering Technician                     |                       |                            | Apprentice Training |
|---|-----------------------|----------------------------|---------------------|
| Sponsor Name: RTMA, The Rochester Technology &                  | Manufacturing Asso    | ciation                    | JUL 0 1 2021        |
| Sponsor Representative: Richard Turner                          |                       |                            |                     |
| Sponsor Address:  |                       |                            | Central Office      |
| No. & Street: 2485 West Henrietta Road, Suite 152               | City:                 | Rochester                  |                     |
| County: Monroe  | State: New York       | Zip Code: 1462             | 23-2323             |
| Sponsor Telephone No.: 585-721-6930                             |                       |                            |                     |
| Proposed Number of Apprentices:                                 |                       |                            |                     |
| AT Office   |                       |                            |                     |
| Name: New York State Department Of Labor, Apprentic             | ceship Training Offic | e                          |                     |
| No. & Street: 276 Waring Road                                   |                       |                            |                     |
| City: Rochester   | State: New York       | Zip Code: 146              | 309                 |
| Apprentice Training Representative:                             |                       | Date Prepared              | 5/11/21             |
| Related instruction is <b>not</b> available.                    | Related instruction   | on <b>is</b> available at: |                     |
| School  | ) Approval)           |                            |                     |
| Name: Finger Lakes Community College (Pending SEI               | D Approvar)           |                            |                     |
| No. & Street: 3325 Marvin Sands Drive                           | Now York              | 111                        | 24                  |
|   | State: New York       | Zip Code: 144              | 24                  |
| School Representative Contact Information:                      |                       |                            |                     |
| Name: Todd Sloane   |                       |                            |                     |
| Telephone No.: 585-785-1836                                     | Email: _              |                            |                     |
| School  |                       |                            |                     |
| Name: OptiPro Systems LLC (Pending SED Approval)                | )                     |                            |                     |
| No. & Street: 6368 Dean Parkway                                 | Nipotes Name          | 115                        | 40                  |
| City: Ontario   | State: New York       | Zip Code: 145              | 19                  |
| School Representative Contact Information: Name: Linda Bechtold |                       |                            |                     |
| Telephone No.: (585) 265-0160                                   | Email:                |                            |                     |
| DLEA  |                       |                            |                     |
| Name:   |                       |                            |                     |
| No. & Street: Office of Adult & Continuing Education, F         | Rochester City Scho   | ool District, 30 Hart Stre | et, Room 218        |
| City: Rochester   | State: New Yes        | kelved Zip Code: 14        | 1605                |
| Signature of DLEA   | Apprent               | Celved Zip Code: 14        | 1/3/21              |
| oignature of paer (   | MAY                   | 2 1 2021                   |                     |
| T 8 (4/19)  |                       |                            |                     |
|   | ROCH                  | ESTER                      |                     |

NEWYORK Department of Labor

Sponsor Code 78092
Trade Code 47-570

Apprenticeship Training Program

## Related Instruction Availability

NYS Department of Labor Apprentice Training

| Trade: Manufacturing Engineering Technician          |               |              |  |                |
|--|---------------|--------------|--|----------------|
| Sponsor Name: RTMA, The Rochester Technology         | & Manufactu   | ring Assoc   | ciation  | JUL 0 1 2021   |
| Sponsor Representative: Richard Turner               |               |              |  | Central Office |
| Sponsor Address:                                     |               |              |  | onitial Office |
| No. & Street: 2485 West Henrietta Road, Suite 152    |               | City:        | Rochester  |                |
| County: Monroe                                       | State: _      | New York     | Zip Code: 14623-23   | 323            |
| Sponsor Telephone No.: 585-721-6930                  |               |              |  |                |
| Proposed Number of Apprentices:                      |               |              | _  |                |
| AT Office  |               |              |  |                |
| Name: New York State Department Of Labor, Apprer     | nticeship Tra | ining Office | 9  |                |
| No. & Street: 276 Waring Road                        |               |              | The second secon |                |
| City: Rochester                                      |               |              | Zip Code: 14609  |                |
| Apprentice Training Representative:                  |               |              | Date Prepared: 5/1   | 1/21           |
| Related instruction is not available.                | Related       | instructio   | n is available at:   |                |
| School   |               |              |  |                |
| Name: Onondaga Community College                     |               |              |  |                |
| No. & Street: 4585 West Seneca Turnpike              |               |              |  |                |
| City: Syracuse                                       | State:        | New York     | Zip Code: 13215  |                |
| School Representative Contact Information:           |               |              |  |                |
| Name:  |               |              |  |                |
| Telephone No.:                                       |               | il:          |  |                |
| School   |               |              |  |                |
| Name: Onondaga Community College                     |               |              |  |                |
| No. & Street: 8015 Oswego Road                       |               |              |  |                |
| City: Liverpool                                      | State:        | New York     | Zip Code: 13090  |                |
| School Representative Contact Information:           |               |              |  |                |
| Name:  |               |              |  |                |
| Telephone No.:                                       |               | iil:         |  |                |
| DLEA   |               |              |  |                |
| Name:  |               |              |  |                |
| No. & Street: Office of Adult & Continuing Education | n, Rochester  | City School  | ol District, 30 Hart Street, F   | Room 218       |
| City: Rochester                                      |               | NewWork      | Zip Code: 14605  |                |
| Signature of DLEA                                    |               | prentices    | Date Prepared: 5/  | 3/21           |
| (A) (B) (B) (B) (B)                                  |               | AY 21        | 2021   |                |



Received Apprenticeship Unit MAY 2 0 2021

Sponsor Code 78092 Trade Code 47-570

New York State Department of Labor

## Apprentice Training Recruitment Notification and Minimum Qualifications

RTMA, The Rochester Technology & Manufacturing Association . located at (Sponsor) 2485 West Henrietta Road, Suite 152, Rochester, NY 14623 (Address) is presently accepting applications for an estimated apprentice training positions in (No. of Openings) the occupation of Manufacturing Engineering Technician (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 Diploma (such as TASC or GED). 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 Other: Apprentice Training JUL 0 1 2021 Other: Central Office Application Forms May be Obtained From: Dates: From: To: Name: RTMA, The Rochester Technology & Manufacturing Association Days: Monday-Friday Address: Times: 9:00AM-5:00PM 2485 West Henrietta Road, Suite 152, Rochester, NY 14623 Phone Number: (585\_) 292 - 3760 Email Address: Special Instructions: All Applications Must be (please check) Received Postmarked no Later Than:

See Instructions on Reverse Side

AT 505 (04/16)



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| Sponsor Code  | 78092  |  |
|---------------|--------|--|
| Trade Code(s) | 47-570 |  |

#### **Selection Standards and Evaluations**

| Name                    | or Cario        |   | Trade<br>Manufacturing Eng | ineering Technic               | ian                            |        |           |
|-------------------------|-----------------|---|----------------------------|--------------------------------|--------------------------------|--------|-----------|
| Addre                   | SS              |   | City                       | St                             | tate                           | Zip    |           |
| Only t                  | hose ch         | ecked apply.  |                            | Maximum<br>Points<br>Allowable | Number<br>of Years<br>Credited | Score  |           |
| Eduça                   | tional A<br>2.5 | chievement Points for Each Year of Education Past Grade 12 or   | Total                      | 25                             |                                |        | Total     |
|                         |                 | Equivalent as Recognized by Local Educational Authorities   |                            | 5                              |                                |        |           |
| $\checkmark$            | 2.5             | Points for Each Year of Related Technical Education Past Grade 10 or Equivalent as Recognized by Local Educational Authorites |                            | 10                             |                                | H:     |           |
| $\checkmark$            | 2               | Points for Each Trade Related Adult or Continuing Education Course Completed  |                            | 10                             |                                |        |           |
|                         |                 | Other   | -                          |                                | -                              | 10     |           |
|                         |                 |   | 7                          | 25                             |                                |        | 7.11      |
| Work                    | Experie:<br>2   | nce Points for Each Year of Trade Related Work Experience   | Total                      | 25                             | 111111                         |        | Total     |
| V                       | 2               | Points for Each Year of Active Military Experience  |                            | 10                             |                                |        | _         |
| V                       |                 |   |                            | 10                             |                                |        | _         |
| $\overline{\mathbb{N}}$ | 1               | Points for Each Year of General Work Experience   |                            | 5                              |                                |        | _         |
| П                       |                 | Other   |                            |                                |                                |        |           |
| Senior                  | ity             |   | Total                      |                                |                                |        | Total     |
|                         |                 | Points for Each Year of Employment With The Sponsoring Firm   |                            |                                |                                |        |           |
|                         |                 | Other   |                            |                                |                                | 9      |           |
| Job Ap                  | titude          |   | Total                      |                                | .1111111                       |        | Total     |
|                         | iiiaac          | SATB (Specific Aptitude Test Battery) #   | 1000                       |                                |                                |        |           |
|                         |                 | Points for High Medium Low<br>Name of Alternative Aptitude Test   |                            |                                |                                |        | -         |
|                         | _               | Administered by   |                            |                                |                                |        |           |
| Ш                       |                 | Other   |                            |                                | 4111111                        |        | _         |
| Oral In                 | terview<br>0-5  | Not to Exceed 40% of Total Score  | Total                      | 20                             |                                |        | Total     |
| V                       | 7               | Ability to Communicate  |                            | 5                              |                                |        |           |
| $\overline{\mathbf{A}}$ | 0-5             | Willingness to Accept Obligation of Apprenticeship  |                            | 5                              |                                |        |           |
| $\bigvee$               | 0-5             | Ability to Reason and Comprehend  |                            | 5                              |                                |        |           |
| $\overline{A}$          | 0-5             | Interest and Motivation   |                            | 5                              |                                |        | _         |
| H                       |                 | Other   |                            |                                |                                |        | -         |
| Ц                       |                 |   |                            |                                | VIIIII                         |        |           |
|                         |                 | Total   | $\rightarrow$              | 70                             | Total                          |        |           |
|                         |                 | Allowable Points  |                            |                                | Score→                         |        |           |
|                         |                 |   |                            | R                              | ank                            |        |           |
| ee n                    |                 |   |                            |                                |                                |        | _         |
| Evalua                  | ted by _        | (Name)  | D                          | ate                            |                                |        |           |
| Sponso                  | or Name         | RTMA, The Rochester Technology & Manufactur   | ing Associat               | ion                            |                                |        |           |
|                         |                 | ss 2485 West Henrietta Road, Suite 152, Ro  |                            |                                |                                |        |           |
|                         |                 |   |                            |                                |                                | Receiv | ed        |
| AT 50                   | 8 (5-16         | )   | Appropri                   | ment of La                     | bor Ap                         |        | ship Unit |
|                         |                 |   | whhieuth                   | ce Training                    | 3                              |        |           |

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New York State Department of Labor

| Sponsor Code  | 78092      |
|---------------|------------|
| Trade Code(s) | All trades |
|               |            |

# **Apprentice Training Program Affirmative Action Plan**

|  | green segment to the second second                             | New Program Amended Renewal                  |
|--|--|--|
| To be Administered b   | y: RTMA, The Rochester Technology Sponsor's Name               | ogy and Manufacturing Association            |
|  | 2485 West Henrietta Road, Suit                                 | te 152                                       |
|  | Rochester, New York  | 14623  |
| Plan is Effective From   | 1/1/18 To: 12/31/22  | Zip Code                                     |
| On behalf of the at  | pove named sponsor, I certify that it is our in                | tent to fulfill this Affirmative Action Plan |
| Signature of Sponsor:  | The above signature must be the employer's Chief               | 3/18/2021                                    |
| Print Name:  | Chair of the Joint Apprenticeship Committee or their Bob Coyne | authorized representative.                   |
| Title:   | Executive Director   |  |
| J CORRECT AND THE CONTRACT AND THE CONTR | Do not write below t   | this line.                                   |
|  |  |  |
| Approved by:   | NYS Department of Labo   |  |
| Fitle:   | a aspainted of East  | Date   |
|  |  |  |

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### Part I - Equal Opportunity Standards

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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. RTMA, The Rochester Technology and Manufacturing Association, promotes Advanced Manufacturing innovation and growth by partnering with industry, academia and government. RTMA consists of approximately 86 manufacturing businesses and 75 companies from the service sector in the Greater Rochester-Finger Lakes Region. RTMA promotes workforce development through job skills training and scholarships. RTMA also offers its members employee placement and human resources services marketing, and advocacy. RTMA is piloting multiple group, non-joint apprenticeship programs. Recruitment will focus primarily on the following counties: Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Livingston, Monroe, Orleans, Seneca, Steuben, Wayne, Wyoming, and Yates.

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Central Office

#### 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.

<sup>/1</sup> 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 \_1,204,990

\_ in the following county(counties):

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| Allegany    | Erie              | Orleans Seneca |
|-------------|-------------------|----------------|
| Cattaraugus | Genesee           | Steuben Wayne  |
| Chautauqua  | Livingston Monroe | Wyoming Yates  |

The labor force includes: /1

#### Minorities

| Women               | 583,904 | 48.46 | % |
|---------------------|---------|-------|---|
| Total Minorities    | 184,335 | 15.30 | % |
| Other Minorities /2 | 38,551  | 3.20  | % |
| Hispanic            | 43,130  | 3.58  | % |
| African American    | 102,654 | 8.52  | % |
|                     |         |       |   |

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: | 15.30 % |
|----------------------------|---------|
| Goal for Women:            | 6.9 %   |

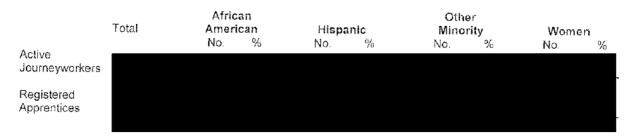
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Data on labor force is supplied by the New York State Department of Labor Research and Statistics Division, Bureau of Labor Market Information, State Office Bldg. Campus, Bldg. #12, Room 402, Albany, NY 12240, telephone: (518) 457-6657. Other Minorities: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

Title of Trade

### A. Current Staffing In the Above Trade

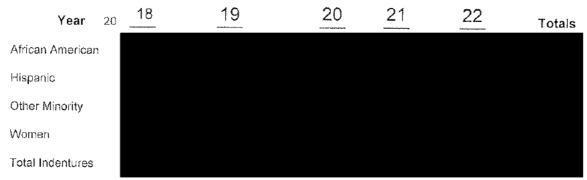


#### B. Projected Number of Apprentice Indentures /1



#### 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.

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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). Central Office

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#### Part IV - Action Plans and Requirements

### A. Outreach and Positive Recruitment Plan

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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 Monroe Community College.

The Sponsor communicates apprenticeship openings with area Workforce Investment Boards.

The Sponsor communicates apprenticeship openings with local veterans organizations.

RTMA provides employee placement services and provides information with two staffing agencies.

The RTMA provides an Employee Placement Service in order to assist its members in acquiring qualified skilled employees. The benefits of the RTMA Employee Placement Service are as follows: searched, interviewed, and pre-qualified resumes.

Job/career fairs are attended to collect resumes for member review.

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

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| B. Recruitment  | ROCHESTER   |
|---|---|
| It is a   | greed that the sponsor will recruit applicants for apprenticeship by (Check One):   |
|   | <ol> <li>Requesting the NYS Department of Labor's approval to conduct an area-wide public<br/>recruitment in accordance with the Department Regulations on Equal Employment<br/>Opportunity in Apprenticeship Training (Part 600).</li> </ol>   |
|   | 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.  |
|   | <ol> <li>Listing all apprentice openings including minimum qualifications and selection standards<br/>with the NYS Job Bank (www.newyork.us.jobs/) for a minimum of five full working days before any<br/>selections are made.</li> </ol>   |
| and Arthorna.   | 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 Sele   | ection of Apprentices   |
| Selection   | of apprentices will be made under one of the following four methods. (Check One):   |
| grant control of the | <ol> <li>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.</li> <li>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.</li> <li>b. The list of candidates will remain valid for a minimum period of two years, or until the list is exhausted.</li> <li>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.</li> </ol> |
|   | NYS Department of Labor Apprentice Training   |
|   | JAN <b>2 9</b> 2018   |
| /1 Asp  | Central Office onsor using this method of recruitment should contact their Apprentice Training Representative for technical   |

assistance.

C. Methods for Selection of Apprentices (continued)

| s for Selection of Apprentices (continued) |                             |   | JAN 18 2018  |
|--|-----------------------------|---|--|
|  | 2.                          | Selection on basis of rank from a candidate list (available for non area-<br>recruitments). Composed of those eligible applicants who meet the min<br>qualifications and complete the selection process.  | wide publicROCHESTER<br>limum  |
|  | £<br>3.                     | When this method is used, the applicants will be evaluated and rank predetermined minimum qualifications and selection standards. The are to be included in all notices regarding apprentice openings.  The list of candidates will remain valid for a minimum period of two rexhausted, unless otherwise specified by the collective bargaining a Selection on a random basis. From a candidate list composed of applicaminimum qualifications and complete the selection process. | ese qualifications and standards months or until the list is agreement. /1                         |
|  | a<br>b<br>c<br>d<br>e<br>f. | The method of random selection shall be subject to approval by the Supervision of the random selection process shall be by an impartia the sponsor, not associated with the administration of the apprentice. The expected time and place of the selection shall be indicated in the The place of the selection shall be open for all applicants and the pu   | I person or persons, selected beship program. e recruitment notice. blic. u list of candidates for |
|  | 4. /                        | Alternative selection methods, /2   |  |
|  | 1                           | f apprentices are to be selected by other methods than in C 1, 2 or 3 ab  | ove, a detailed  |

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.

Commissioner of Labor for review and approval prior to being used.

statement of the selection method to be used must be attached and submitted to the

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<sup>/1</sup> 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)

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E. Notification and Appointment of Candidates for Apprenticeship.

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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:

- 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.
- 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.
- 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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