

NYS DOL Use Only: Sponsor No. 78092
[ ] New Program [ ] Reactivation [ ] Revision [ ] Recertification

New York State
Registered Apprenticeship Training Program

NYS Department of Labor
Apprentice Training

Sponsor Information Sheet and Instructions

JUL 01 2021

Form AT 9 is used to collect data regarding sponsors and signatories for the New York State (NYS) Registered Apprenticeship Training Program. Please read the instructions on pages 3 and 4 before completing this form.

Section I

- A. Sponsor name: ROCHESTER TECHNOLOGY AND MANUFACTURING ASSOCIATION (RTMA)
B. Trade(s): Building Maintenance Mechanic; PLANT MAINTENANCE-ELECTRICIAN; PLANT MAINTENANCE-PIPEFITTER
C. Type of Apprenticeship Training Program (check one): [ ] Individual Non-Joint [ ] Individual Joint [X] Group Non-Joint\* [ ] Group Joint (JAC/JATC)\*
D. Name of entity completing this form: Rochester Technology & Manufacturing Association
E. Entity completing this form (check one): [ ] Individual Employer/Sponsor [ ] Union [ ] JAC/JATC [X] Association
F. Mailing address: Street: 2485 West Henrietta Road
City/Town: Rochester State: N.Y. Zip Code: 14623
G. Email: [REDACTED] H. Phone: 585-721-6980 I. Fax: 585-427-2796
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): [X] Corporation [ ] Partnership [ ] Sole-Proprietor [ ] LLC [ ] LLP [ ] Other
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? [ ] Yes [X] No
P. If this is part of a new program application or if your entity is new to an existing program, within the past five (5) years, has your organization, any substantially owned-affiliated entity, any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any officer, any partner, or any proprietor been a sponsor of, or signatory to, a NYS Registered Apprenticeship Program? [ ] Yes [X] No

Section II

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

Within the past five (5) years, has your organization, any substantially owned-affiliated entity, any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any officer, any partner, or any proprietor been the subject of:

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

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

4. Any suspension, bid rejection, or disapproval by any governmental entity of any proposed contract or subcontract for lack of responsibility, or denial or revocation of pre-qualification for any bid in any state or municipality, or a voluntary exclusion agreement?.....  Yes  No
5. Any federal, state, or municipal debarments, including Workers' Compensation or Public Work?.....  Yes  No
6. Any pending or open investigation of a possible violation, or determination of a violation of any federal law or regulation including, but not limited to, investigations by the National Labor Relations Board (NLRB) or the United States Department of Labor (USDOL) Wage and Hour Division?.....  Yes  No
7. a. Any pending or open Occupational Safety and Health Administration (OSHA) investigation?.....  Yes  No  
 b. Any OSHA citation that resulted in a final determination classified as serious, willful, or repeat?.....  Yes  No
8. a. Any pending or open investigation of a possible violation, or determination of a violation of New York State law or regulation, any other state law or regulation, or any municipal law or regulation including, but not limited to, investigations by the Bureau of Public Work, the Division of Safety and Health, or the Division of Labor Standards?.....  Yes  No  
 b. If 'Yes', was the violation determined to be willful?.....  Yes  No
9. Any investigations, claims, or lawsuits before the US Equal Employment Opportunity Commission (EEOC), USDOL Office of Federal Contract Compliance Program (OFCCP), NYS Division of Human Rights, federal or state courts, or local Civil Rights Commissions?.....  Yes  No
10. Any stipulations, settlement, consent order, or like agreement involving any state, municipal, or federal enforcement action (judicial or regulatory) **other than those covered above**?.....  Yes  No

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

**Section III**

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

I certify:

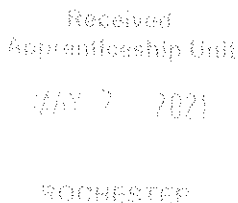
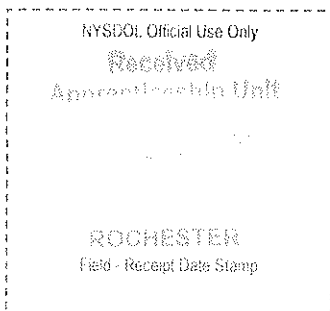
- That the Department may use its sole discretion to choose the means to determine the truth and accuracy of all statements made herein.
- That intentional submission of false or misleading information may constitute a Class A misdemeanor under Penal Law (PL § 210.35), and may be punishable by a fine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

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

Robert J. Coyle 3/18/2021  
 Signature of CEO, Chair, or representative granted legal authority to bind the Entity Date

Print name and title: Robert J. Coyle Executive Director

Sworn to me this: 18 day of MARCH, 2021 Richard T. Turner  
 Signature of Notary Public or Commissioner of Deeds



Richard T. Turner  
 Notary Public, State of New York  
 OT108203002  
 qualified in Monroe County  
 commission expires Mar. 30, 2026

NYS Department of Labor  
 Apprentice Training

JUL 01 2021



Apprentice Training Program Registration Agreement

Revision

Nature of Change:

New Program

ESTHER TURNER OR COYNE CAN SIGN

State Use Only	
AT Sponsor No.	78092
ATP Code	67-372
Effective Date of AT Program	

- 1. Name of Sponsor: RTMA The Rochester Technology and Manufacturing Association
- 2. Mailing Address: 2485 West Henrietta Road Suite 152 Rochester New York 14623 Monroe  
(number & street) (city) (state) (zip code) (county)
- 3. Actual Address: Same as above  
(number & street) (city) (state) (zip code) (county)
- 4. Telephone No.: (585) 292-3760, (585) 721-6930 Ext. Fax No.: (585) 427-2796
- 5. E-mail Address: [REDACTED]

6. Trade/Occupation: Plant Maintenance - Electrician

7. No. Employees: 3 No. Apprentices: 1 No. Journeyworkers: 3 8. Ratio: 1:1:1

9. DOT Code: 829.261-018 10. Length of Program: 48 months

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

13. Minimum Journeyworker Rate: \$ Per AT-701 14. Effective Date of Wages: 6/1/2021 PER FOLIS

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

1	2	3	4	5	6	7	8	9	10
M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>
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"/>
Per	AT701								

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

17. [Signature] Signature of Official Sponsor Representative

5/18/21 Date

18. [Signature] Signature of Union Representative 5-18-21 Date

RICHARD TURNER, DIRECTOR OF WORKFORCE DEVELOPMENT Print Name and Title

ROBERT COYNE, EXECUTIVE DIRECTOR Print Name, Title, and Union Name

19. Signature New York State Department of Labor

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NYS Department of Labor Apprentice Training

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Apprenticeship Agreement

I. Apprenticeship Agreement

Sponsor No. 78092

ATP Code 67-372

Name of Apprentice (Last, First, M.I.) <u>Kranzler Jacob A</u>	1. Name of Program Sponsor <b>Rochester Technology and Manufacturing Association</b>		
	Physical address of Program Sponsor (no. and street) <b>2485 West Henrietta Road, Suite 152</b>		
	City <b>Rochester</b>	County <b>Monroe</b>	State Zip code <b>New York 14623</b>
	Mailing address of Program Sponsor (no. and street) <b>Eastman Kodak, 343 State Street</b>		
	City <b>Rochester</b>	County <b>Monroe</b>	State Zip code <b>New York 14650</b>
2. Trade: <input checked="" type="checkbox"/> Time-based <input type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid <b>Plant Maintenance - Electrician</b>			
3. Start Date	4. Length of program (Months) <b>48</b>	5. DOL Apprentice Probation Period for Completion Rates (Months) <b>12</b>	
6. Related and Supplemental Instruction (RI) Provider(s) and location(s) <b>MCC, Tooling U, CNC Technical Solutions, Horizon Solutions</b>		7. Minimum Journey-Worker Rate <b>\$ 27.00/ hour</b>	
8. Credit for previous training or experience: <input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input checked="" type="checkbox"/> Previous Experience (Employer name): <u>Pitosi Electric</u>		RI Compensated <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

1	2	3	4	5	6	7	8	9	10
1000	1000	1000	1000	1000	1000	1000	1000		
\$16.00	\$16.50	\$17.00	\$17.75	\$18.75	\$20.00	\$21.50	\$23.50		

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

Signature of Apprentice and Parent/Guardian if age 16-17: [Signature] Date: 1/1  
 Signature of Official Sponsor Representative: [Signature] Date: 1/1

Registered by the New York State Department of Labor:

Signature New York State Department of Labor

Date

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

II. Worksite Training Completion or Termination

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

Completion or Termination Date \_\_\_\_\_

Comments \_\_\_\_\_

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

Signature of Official Sponsor Representative

Date

Print Name

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

III. RI Completion

Apprentice has satisfied the RI requirements. Completion date: \_\_\_\_\_  
 Apprentice has not satisfied the RI requirements.

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

Signature of DLEA Representative

Date

Print Name

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# WE ARE YOUR DOL



Apprenticeship Training Program

Sponsor Code 78092

Trade Code 67-372

## Related Instruction Availability

Trade: Plant Maintenance-Electrician

Sponsor Name: RTMA, The Rochester Technology & Manufacturing Association

Sponsor Representative: Richard Turner

Sponsor Address:

No. & Street: 2485 West Henrietta Road, Suite 152 City: Rochester

County: Monroe State: New York Zip Code: 14623-2323

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

City: Rochester State: New York Zip Code: 14609

Apprentice Training Representative: [REDACTED] Date Prepared: 4/27/21

Related instruction is **not** available.

Related instruction is available at:

### School

Name: Monroe Community College

No. & Street: 2485 West Henrietta Road

City: Rochester State: New York Zip Code: 14623

School Representative Contact Information:

Name: Dale Pearce

Telephone No.: 585-685-6118 Email: [REDACTED]

### School

Name: Tooling U (online only)

No. & Street: 3615 Superior Avenue East, Building 44, 6th Floor

City: Cleveland State: Ohio Zip Code: 44114

School Representative Contact Information:

Name: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: [REDACTED]

### DLEA

Name: [REDACTED]

No. & Street: Office of Adult & Continuing Education, Rochester City School District, 30 Hart Street, Room 218

City: Rochester State: New York Zip Code: 14605

Signature of DLEA [REDACTED] Date Prepared: 4/29/21

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**WE ARE YOUR DOL**



Sponsor Code 78092  
Trade Code 67-372

**Related Instruction Availability**

Trade: Plant Maintenance-Electrician  
Sponsor Name: RTMA, The Rochester Technology & Manufacturing Association  
Sponsor Representative: Richard Turner  
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No. & Street: 2485 West Henrietta Road, Suite 152 City: Rochester  
County: Monroe State: New York Zip Code: 14623-2323  
Sponsor Telephone No.: 585-721-6930  
Proposed Number of Apprentices: \_\_\_\_\_

NYS Department of Labor  
Apprentice Training

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**AT Office**

Name: New York State Department Of Labor, Apprenticeship Training Office  
No. & Street: 276 Waring Road  
City: Rochester State: New York Zip Code: 14609  
Apprentice Training Representative: [REDACTED] Date Prepared: 4/27/21

Central Office

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

**School**

Name: CNC Technical Solutions, Inc. (Partial) (Pending SED approval for this trade)  
No. & Street: 460 East Center Street  
City: Medina State: New York Zip Code: 14103  
School Representative Contact Information:  
Name: \_\_\_\_\_  
Telephone No.: (585) 798-9889 Email: \_\_\_\_\_

**School**

Name: Horizon Solutions Rochester (Partial) (Pending SED Approval)  
No. & Street: 175 Josons Drive  
City: Rochester State: New York Zip Code: 14623  
School Representative Contact Information:  
Name: \_\_\_\_\_  
Telephone No.: (585) 424-7376 Email: \_\_\_\_\_

**DLEA**

Name: [REDACTED]  
No. & Street: Office of Adult & Continuing Education, Rochester City School District, 30 Hart Street, Room 218  
City: Rochester State: New York Zip Code: 14605  
Signature of DLEA: [REDACTED] Date Prepared: 4/29/21

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of Labor

New York State Department of Labor

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### Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor Code 78092

Trade Code 67-372

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 Plant Maintenance - Electrician

(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:

Other:

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Other:

Central Office

Application Forms May be Obtained From:

Name: RTMA, The Rochester Technology & Manufacturing Association

Address:

2485 West Henrietta Road, Suite 152, Rochester,  
NY 14623

Phone Number: (585) 292 - 3760

Special Instructions:

Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Days: Monday-Friday

Times: 9:00AM-5:00PM

Email Address: \_\_\_\_\_

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

AT 505 (04/16)

See Instructions on Reverse Side



**Selection Standards and Evaluations**

Name of Candidate	Trade Plant Maintenance - Electrician		
Address	City	State	Zip

Only those checked apply.		Maximum Points Allowable	Number of Years Credited	Score	
<b>Educational Achievement</b> <input checked="" type="checkbox"/> 2.5 Points for Each Year of Education Past Grade <u>12</u> or Equivalent as Recognized by Local Educational Authorities <input checked="" type="checkbox"/> 2.5 Points for Each Year of Related Technical Education Past Grade <u>10</u> or Equivalent as Recognized by Local Educational Authorities <input checked="" type="checkbox"/> 2 Points for Each Trade Related Adult or Continuing Education Course Completed <input type="checkbox"/> Other _____	<b>Total</b>	25		Total	<b>Total</b>
<b>Work Experience</b> <input checked="" type="checkbox"/> 2 Points for Each Year of Trade Related Work Experience <input checked="" type="checkbox"/> 2 Points for Each Year of Active Military Experience <input checked="" type="checkbox"/> 1 Points for Each Year of General Work Experience <input type="checkbox"/> Other _____	<b>Total</b>	25		Total	<b>Total</b>
<b>Seniority</b> <input type="checkbox"/> Points for Each Year of Employment With The Sponsoring Firm <input type="checkbox"/> Other _____	<b>Total</b>			Total	<b>Total</b>
<b>Job Aptitude</b> <input type="checkbox"/> SATB (Specific Aptitude Test Battery) # _____ Points for High _____ Medium _____ Low _____ <input type="checkbox"/> Name of Alternative Aptitude Test _____ <input type="checkbox"/> Administered by _____ <input type="checkbox"/> Other _____	<b>Total</b>			Total	<b>Total</b>
<b>Oral Interview: Not to Exceed 40% of Total Score</b> <input checked="" type="checkbox"/> 0-5 Ability to Communicate <input checked="" type="checkbox"/> 0-5 Willingness to Accept Obligation of Apprenticeship <input checked="" type="checkbox"/> 0-5 Ability to Reason and Comprehend <input checked="" type="checkbox"/> 0-5 Interest and Motivation <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____	<b>Total</b>	20		Total	<b>Total</b>

Total Allowable Points → 70 Total Score →

Rank \_\_\_\_\_

Evaluated by \_\_\_\_\_ Date \_\_\_\_\_  
(Name)

Sponsor Name RTMA, The Rochester Technology & Manufacturing Association

Sponsor Address 2485 West Henrietta Road, Suite 152, Rochester, NY 14623

AT 508 (5-16)

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Sponsor Code 78092
Trade Code(s) All trades

Apprentice Training Program Affirmative Action Plan

Form with checkboxes for New Program, Amended, and Renewal.

To be Administered by: RTMA, The Rochester Technology and Manufacturing Association
Sponsor's Name

Address: 2485 West Henrietta Road, Suite 152
Rochester, New York 14623
Zip Code

Plan is Effective From: 1/1/18 Date To: 12/31/22 Date

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

Signature of Sponsor: [Handwritten Signature]
The above signature must be the employer's Chief Executive Officer or the Chair of the Joint Apprenticeship Committee or their authorized representative.
Date: 3/18/2021

Print Name: Bob Coyne

Title: Executive Director

Do not write below this line.

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Apprentice Training

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Approved by: [Signature]
NYS Department of Labor
Central Office
Date

Title:

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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.

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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**B. Equal Opportunity Pledge**

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

The recruitment, selection, employment, and training of apprentices during their apprenticeship, shall be without discrimination because of race, creed, color, religion, national origin, age, sex, disability, veteran status, marital status or arrest record. The sponsor will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required under Title 29 of the Code of Federal Regulations, Part 30, and Title 12 of the Official Compilation of Codes, Rules and Regulations of the State of New York, Part 600; and the Americans with Disabilities Act of 1990.

**C. Affirmative Action Policy Statement /1**

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

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

**D. Sexual Harassment Policy Statement /1**

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

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

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Part II – Labor Force Analysis/Utilization Study

A. The total labor force is 1,204,990 in the following county(counties):

<u>Allegany</u>	<u>Erie</u>	<u>Orleans</u>	<u>Seneca</u>
<u>Cattaraugus</u>	<u>Genesee</u>	<u>Steuben</u>	<u>Wayne</u>
<u>Chautauqua</u>	<u>Livingston</u>	<u>Wyoming</u>	<u>Yates</u>

The labor force includes: /1

**Minorities**

African American	<u>102,654</u>	<u>8.52</u> %
Hispanic	<u>43,130</u>	<u>3.58</u> %
Other Minorities /2	<u>38,551</u>	<u>3.20</u> %
Total Minorities	<u>184,335</u>	<u>15.30</u> %
 <b>Women</b>	 <u>583,904</u>	 <u>48.46</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: 15.30 %  
 Goal for Women: 6.9 %

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

**Part III – Current and Projected Staffing and Annual Goals**

Title of Trade [REDACTED]

**A. Current Staffing in the Above Trade**

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

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

Year	20	18	19	20	21	22	Totals
New Positions	[REDACTED]						
Vacancies from Turnover /2	[REDACTED]						
Total Indentures	[REDACTED]						

**C. Annual Goals**

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

Year	20	18	19	20	21	22	Totals
African American	[REDACTED]						
Hispanic	[REDACTED]						
Other Minority	[REDACTED]						
Women	[REDACTED]						
Total Indentures	[REDACTED]						

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

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

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

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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:**

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

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/](http://www.newyork.us.jobs/)) for a minimum of five full working days before any selections are made.

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

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

C. Methods for Selection of Apprentices

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

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

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

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C. Methods for Selection of Apprentices (continued)

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

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

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

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

4. Alternative selection methods. /2

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

D. Minimum Selection Standards and Evaluation.

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

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

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

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**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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