



NYS DOL Use Only: Sponsor No. \_\_\_\_\_
New Program Reactivation Revision Recertification

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

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

Section I

- A. Sponsor name: VSG Power Inc.
B. Trade(s): Electrician
C. Type of Apprenticeship Training Program (check one):
1. [X] 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: VSG Power Inc.
E. Entity completing this form (check one):
[X] Individual Employer/Sponsor [ ] Union [ ] JAC/JATC [ ] Association
[ ] Employer/Signatory company serving on the JAC/JATC, Board of Directors, or other governing body
F. Mailing address: Street: 73 Euclid Ave
City/Town: Buffalo State: NY Zip Code: 14211
G. Email: [redacted] H. Phone: 716-777-3015 I. Fax:
J. Federal Employer Identification Number (FEIN): [redacted]
K. NYS Unemployment Insurance Employer Registration (ER) Number: [redacted]
L. Is this entity required to report any employee wages under this FEIN to the NYS Department of Tax and Finance? [X] Yes [ ] No
M. Type of Entity (check one and provide attachments as noted in the instructions):
[X] Corporation [ ] Partnership [ ] Sole-Proprietor [ ] LLC [ ] LLP [ ] Other
N. How many years has your organization been in business? 2
O. Within the past five (5) years, have you done business under a different name? [ ] Yes [X] No
If 'Yes', provide attachments as noted in the instructions.
P. If this is part of a new program application or if your entity is new to an existing program, within the past five (5) years, has your organization, any substantially owned-affiliated entity, \*\* any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any officer, any partner, or any proprietor been a sponsor of, or signatory to, a NYS Registered Apprenticeship Program? [ ] Yes [X] No
If 'Yes', provide attachments as noted in the instructions.

Section II

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

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

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

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

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

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

**Section III**

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

I certify:

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

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

Kyle R. Abjewoda 8-12-25  
Signature of CEO, Chair, or representative granted legal authority to bind the Entity Date

Print name and title: Kyle Abjewoda - President

Sworn to me this: 12 day of August  
[Signature]  
Signature of Notary Public or Commissioner of Deeds

NYS DOL Official Use Only  
Field - Receipt Date Stamp

JONATHAN S. DANAT  
NOTARY PUBLIC STATE OF NEW YORK  
ERIE  
LIC. #01DA6229180  
COMM. EXP. 10/04/2026

# WE ARE YOUR DOL



## Apprentice Training Program Registration Agreement

Revision

Nature of Change: New Program Application

| State Use Only               |
|------------------------------|
| AT Sponsor No.               |
| ATP Code<br><u>17-072</u>    |
| Effective Date of AT Program |

1. Name of Sponsor: VSG Power Inc.
2. Mailing Address: 73 Euclid Ave Buffalo NY 14211 Erie  
(number & street) (city) (state) (zip code) (county)
3. Actual Address: 73 Euclid Ave Buffalo NY 14211 Erie  
(number & street) (city) (state) (zip code) (county)
4. Telephone No.: 716-777-3015 Ext. 3 Fax No.: \_\_\_\_\_
5. E-mail Address: [REDACTED]
6. Trade/Occupation: Electrician
7. No. Employees: 10 No. Apprentices: 1 No. Journeyworkers: 3 8. Ratio: 1:3
9. DOT Code: 47-2111.00 10. Length of Program: 60 months
11. Apprentices Probationary Period: 12 months 12. Work process: Standard  or Revised  *plus*
13. Minimum Journeyworker Rate: \$ 42.87 per Hour 14. Effective Date of Wages: \_\_\_\_\_
15. Apprentices wage progression for each period – in months (M) or hours (H)

|  | 1                                     | 2                                     | 3                                     | 4                                     | 5                                     | 6                                     | 7                                     | 8                          | 9                          | 10                         |
|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|----------------------------|----------------------------|----------------------------|
| Months (check):                                      | 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"/> |
| Hours (check):                                       | H <input checked="" type="checkbox"/> | H <input checked="" type="checkbox"/> | H <input checked="" type="checkbox"/> | H <input checked="" type="checkbox"/> | H <input checked="" type="checkbox"/> | H <input checked="" type="checkbox"/> | H <input checked="" type="checkbox"/> | H <input type="checkbox"/> | H <input type="checkbox"/> | H <input type="checkbox"/> |
| No. of Months/Hours:                                 | 1,000                                 | 2,000                                 | 3,500                                 | 5,000                                 | 6,500                                 | 8,200                                 | 8200+                                 |                            |                            |                            |
| Wage rate: or, percentage of the journeyworker rate: | 49%                                   | 56%                                   | 65%                                   | 70%                                   | 75%                                   | 85%                                   | 100%                                  |                            |                            |                            |

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

17. Kyle R Wojewoda 8-12-25  
Signature of Official Sponsor Representative Date

18. \_\_\_\_\_  
Signature of Union Representative Date

Kyle Wojewoda - President  
Print Name and Title

\_\_\_\_\_  
Print Name, Title, and Union Name

19. \_\_\_\_\_  
Signature New York State Department of Labor Date

**WE ARE YOUR DOL**



Sponsor Code \_\_\_\_\_

Trade Code 17-072

**Related Instruction Availability**

Trade: Electrical

Sponsor Name: VSG Power Inc.

Sponsor Representative: Kyle Wojewoda

Sponsor Address:

No. & Street: 73 Euclid Ave City: Buffalo

County: Erie State: NY Zip Code: 14211

Sponsor Telephone No.: 716-755-0315

Proposed Number of Apprentices: 1

**AT Office**

Name: NYSDOL Apprenticeship Office – Buffalo Region

No. & Street: 290 Main Street, Mezzanine

City: Buffalo State: NY Zip Code: 14202

Apprentice Training Representative: \_\_\_\_\_ Date Prepared: \_\_\_\_\_

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

**School**

Name: Alfred State College, at Northland Workforce Training Center

No. & Street: 10 Upper College Dr.

City: Alfred State: NY Zip Code: 14802

School Representative Contact Information:

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

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

**School**

Name: Energize US Edu Inc. if approved as an Apprenticeship RI Provider

No. & Street: 138 Litchfield Rd

City: New Milford State: MA Zip Code: 06776

School Representative Contact Information:

Name: Wilson Betances

Telephone No.: 860-898-1721 Email: 

**DLEA**

Name: Marcia JohnsonBuffalo, New York 14202

No. & Street: 389 Virginia Street

City: Buffalo State: NY Zip Code: 14202

Signature of DL  Date Prepared: 8/6/25



### Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor: VSG Power Inc.

Located at: (Address) 73 Euclid Ave, Buffalo, NY 14211

Is presently accepting applications for Apprenticeship Training Positions: List estimated number of openings: N/A

In the occupation of: (List Trade) Electrician

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: Attending Higher Education for an Associate Degree in the electrical construction field or equivalent

Physical Condition: Be physically able to perform the work required as determined by:  
**Ability to stand, walk, sit, and operate company vehicles as needed. Ability to stoop, kneel, bend, crouch, and regularly lift up to 50 pounds. Comfortable working at heights, including on**

(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: **Must be capable of working outdoors in various weather conditions. Must possess a valid driver's license and reliable transportation to job sites.**

Other:

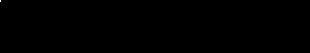
Other:

Application forms may be obtained: From: \_\_\_\_\_ To: \_\_\_\_\_

Name: Kyle Wojewoda

Address: 73 Euclid Ave, Buffalo, NY 14211

Days: Friday Times: \_\_\_\_\_

Phone: 716-777-3015 Email: 

Special Instructions:

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

## Selection Standards and Evaluations

Name of Candidate: \_\_\_\_\_ Trade: Electrician

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

| Only those checked apply.  |   |                          |                          |                          |       |  |              |    |  |  |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p><b>Educational Achievement</b></p> <p><input type="checkbox"/> <u>1</u> Points for Each Year of Education Past Grade <u>12</u> or Equivalent as Recognized by Local Educational Authorities</p> <p><input type="checkbox"/> <u>3</u> Points for Each Year of Related Technical Education Past Grade <u>12</u> or Equivalent as Recognized by Local Educational Authorities</p> <p><input type="checkbox"/> <u>2</u> Points for Each Trade Related Adult or Continuing Education Course Completed</p> <p><input type="checkbox"/> Other: _____</p> | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 20%;">Maximum Points Allowable</th> <th style="width: 20%;">Number of Years Credited</th> <th style="width: 20%;">Score</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td><b>Total</b></td> <td style="text-align: center;">20</td> <td style="background-color: #cccccc;"></td> <td></td> <td><b>Total</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |                          | Maximum Points Allowable | Number of Years Credited | Score |  | <b>Total</b> | 20 |  |  | <b>Total</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p><b>Work Experience</b></p> <p><input type="checkbox"/> <u>5</u> Points for Each Year of Trade Related Work Experience</p> <p><input type="checkbox"/> <u>5</u> Points for Each Year of Active Military Experience</p> <p><input type="checkbox"/> <u>2</u> Points for Each Year of General Work Experience</p> <p><input type="checkbox"/> Other: _____</p>   | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 20%;">Maximum Points Allowable</th> <th style="width: 20%;">Number of Years Credited</th> <th style="width: 20%;">Score</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td><b>Total</b></td> <td style="text-align: center;">25</td> <td style="background-color: #cccccc;"></td> <td></td> <td><b>Total</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |                          | Maximum Points Allowable | Number of Years Credited | Score |  | <b>Total</b> | 25 |  |  | <b>Total</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p><b>Seniority</b></p> <p><input type="checkbox"/> <u>2</u> Points for Each Year of Employment with The Sponsoring Firm</p> <p><input type="checkbox"/> <u>5</u> Other: <u>2+ Years of Employment at sponsoring firm</u></p>  | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 20%;">Maximum Points Allowable</th> <th style="width: 20%;">Number of Years Credited</th> <th style="width: 20%;">Score</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td><b>Total</b></td> <td style="text-align: center;">5</td> <td style="background-color: #cccccc;"></td> <td></td> <td><b>Total</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>  |                          | Maximum Points Allowable | Number of Years Credited | Score |  | <b>Total</b> | 5  |  |  | <b>Total</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>Total</b>   | 5   |                          |                          | <b>Total</b>             |       |  |              |    |  |  |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p><b>Job Aptitude</b></p> <p><input type="checkbox"/> <u>0</u> Name of Aptitude Test: _____<br/>Administered by _____</p> <p><input type="checkbox"/> <u>5</u> Other: <u>For each internship period at sponsoring firm</u></p>  | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 20%;">Maximum Points Allowable</th> <th style="width: 20%;">Number of Years Credited</th> <th style="width: 20%;">Score</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td><b>Total</b></td> <td style="text-align: center;">10</td> <td style="background-color: #cccccc;"></td> <td></td> <td><b>Total</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>   |                          | Maximum Points Allowable | Number of Years Credited | Score |  | <b>Total</b> | 10 |  |  | <b>Total</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <b>Total</b>   | 10  |                          |                          | <b>Total</b>             |       |  |              |    |  |  |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| <p><b>Oral Interview: Not to Exceed 40% of Total Score</b></p> <p><input type="checkbox"/> <u>10</u> Ability to Communicate</p> <p><input type="checkbox"/> <u>10</u> Willingness to Accept Obligation of Apprenticeship</p> <p><input type="checkbox"/> <u>10</u> Ability to Reason and Comprehend</p> <p><input type="checkbox"/> <u>10</u> Interest and Motivation</p> <p><input type="checkbox"/> Other: _____</p> <p><input type="checkbox"/> Other: _____</p>  | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 20%;">Maximum Points Allowable</th> <th style="width: 20%;">Number of Years Credited</th> <th style="width: 20%;">Score</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td><b>Total</b></td> <td style="text-align: center;">40</td> <td style="background-color: #cccccc;"></td> <td></td> <td><b>Total</b></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> |                          | Maximum Points Allowable | Number of Years Credited | Score |  | <b>Total</b> | 40 |  |  | <b>Total</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Maximum Points Allowable  | Number of Years Credited | Score                    |                          |       |  |              |    |  |  |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Total Allowable Points →

|     |                      |  |
|-----|----------------------|--|
| 100 | <b>Total Score</b> → |  |
|-----|----------------------|--|

Rank \_\_\_\_\_

Evaluated by: Kyle Wojewoda (Name) Date: \_\_\_\_\_

Sponsor Name: VSG Power Inc.

Sponsor Address: 73 Euclid Ave, Buffalo, NY 14211

# WE ARE YOUR DOL



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## Non-Discrimination Plan (Short Form)

- A. **Equal Opportunity Pledge:** Our company recognizes that all persons shall have equal opportunity in employment and apprenticeship training, and agrees to adhere to the following:

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

- B. **Sexual Harassment Prevention Policy:** Our policy is that sexual harassment is **prohibited**. This policy applies to internal activity towards employees, interaction between employees and actions and treatment directed towards employees, from any person or persons at the worksite, whether or not they are employees of this organization.

Equal Employment Opportunity Commission (EEOC) guidelines provide that verbal or physical conduct of a sexual nature may constitute sexual harassment when:

- Submission to such contact is made either explicitly or implicitly a term or condition of an individual's employment;
- Submission to, or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; and/or
- Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

When an employee has a complaint of sexual harassment, the complaint should be brought promptly to the attention of his/her immediate supervisor, or to the next level of supervision. These persons have the authority and responsibility to resolve the complaint. If the complaint is not satisfactorily resolved, the employee has the right to contact the NYS Division of Human Rights and the Federal Equal Employment Opportunity Commission. The complaint will be investigated; if substantiated, prompt action will be taken to stop the harassment immediately and prevent recurrence.

If an employee is an **apprentice**, the program's apprenticeship administrator and the NYS Apprenticeship Director **must** be notified of the complaint.

- C. **Minimum Qualifications and Selection Standards:** 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 form AT 508, Selection Standards and Evaluations, on file with the Department.

D. **Recruitment:** It is agreed that the sponsor will recruit applicants for apprenticeship by (Check One):

- Listing all apprentice openings with the NYS Job Bank (<https://newyork.usnlx.com>) for a minimum of five full working days before selections are made.
- Limiting recruitment to present employees of the sponsor and/or union members of the union sponsoring the apprenticeship program. Resulting vacancies will be listed with the NYS Job Bank (<https://newyork.usnlx.com>).
- Recruiting apprentices by methods other than those above. A detailed statement of the recruitment method must be attached and approved by the Commissioner of Labor prior to being used.

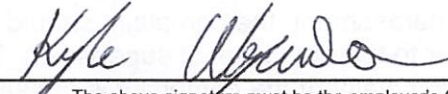
E. **Outreach and Positive Recruitment Plan (if applicable):** Detail all the specific activities the sponsor will undertake to expand the opportunities for minority and female participation in the apprenticeship program. (Attach additional sheets if necessary.) The extent of outreach and recruitment 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:**

VSG Power recruits through Alfred State's Electrical Construction & Maintenance program as our primary Related Instruction partner and pipeline. We notify program directors and career services of apprentice openings prior to each semester. We prioritize in-person presentations, early engagement with students, and direct application opportunities. We will continue to collaborate with Alfred State to ensure outreach includes students from underrepresented groups and to provide support materials related to apprenticeship careers.

**Direct Entry Provider(s):** (See <https://dol.ny.gov/direct-entry>)

On behalf of the sponsor, I certify that it is our intent to fulfill these Equal Opportunity Standards.

Signature of Sponsor:  8-12-25  
The above signature must be the employer's Chief Executive Officer, the Chair of the Joint Apprenticeship Committee or their authorized representative. Date

Name: Kyle Abjewoda Title: President

Approved by: \_\_\_\_\_  
New York State Department of Labor Date

Sponsor Name: VSG Power Inc.

Sponsor Code: \_\_\_\_\_ Number of Apprentices: 1

Trade(s): Electrician

Trade Code(s): 47-2111