



FEB 09 2023

Central Office

New York State  
Registered Apprenticeship Training Program

Sponsor Information Sheet and Instructions

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

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: Tailor and Cook Utica, LLC dba The Tailor and the Cook
- B. Trade(s): Cook (Chef 3 year)
- C. Type of Apprenticeship Training Program (check one):  
 1.  Individual Non-Joint    2.  Individual Joint    3.  Group Non-Joint\*    4.  Group Joint (JAC/JATC)\*  
 \*For sponsors of group programs only (3 and 4) – See instructions for signatory list submission information.
- D. Name of entity completing this form: Same
- E. Entity completing this form (check one):  
 Individual Employer/Sponsor     Union     JAC/JATC     Association  
 Employer/Signatory company serving on the JAC/JATC, Board of Directors, or other governing body
- F. Mailing address: Street: 94 Genesee Street  
 City/Town: Utica    State: NY    Zip Code: 13502
- G. Email: [REDACTED]    H. Phone: (315) 624-3663    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?.....  Yes     No
- M. Type of Entity (check one and provide attachments as noted in the instructions):  
 Corporation     Partnership     Sole-Proprietor     LLC     LLP     Other
- N. How many years has your organization been in business? 1
- O. Within the past five (5) years, have you done business under a different name?.....  Yes     No  
 If 'Yes', provide attachments as noted in the instructions.
- P. If this is part of a new program application or if your entity is new to an existing program, within the past five (5) years, has your organization, any substantially owned-affiliated entity,\*\* any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any officer, any partner, or any proprietor been a sponsor of, or signatory to, a NYS Registered Apprenticeship Program? .....  Yes     No  
 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     No
- 2. Any indictment or pending indictment for conduct constituting a crime under state or federal law?...  Yes     No
- 3. Any grant of immunity for conduct constituting a crime under state or federal law?.....  Yes     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.

*[Signature]* December 15th, 2022  
 Signature of CEO, Chair, or representative granted legal authority to bind the Entity Date

Print name and title: Timothy Hardiman

Sworn to me this 22<sup>nd</sup> day of December, 2022 *Teresa M. Seymore*  
Signature of Notary Public or Commissioner of Deeds



TERESA M. SEYMORE  
 Notary Public, State of New York  
 Qualified in Oneida Co.  
 No. 01SE6098979  
 Commission Expires: September 22, 2023



FEB 09 2023

Apprentice Training Program Registration Agreement

Revision

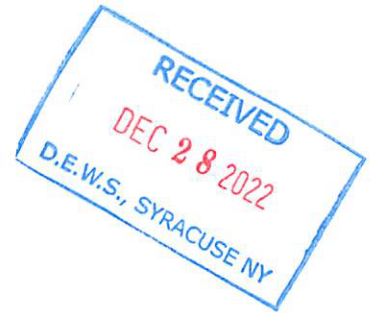
Nature of Change: New Program Application

|                                  |               |
|----------------------------------|---------------|
| Central Office<br>State Use Only |               |
| AT Sponsor No.                   |               |
| ATP Code                         | <b>55-046</b> |
| Effective Date of AT Program     |               |

- 1. Name of Sponsor: Tailor and Cook Utica, LLC dba The Tailor and the Cook
- 2. Mailing Address: 94 Genesee Street Utica NY 13502 Oneida  
(number & street) (city) (state) (zip code) (county)
- 3. Actual Address: Same as Above  
(number & street) (city) (state) (zip code) (county)
- 4. Telephone No.: 315-624-3663 Ext. \_\_\_\_\_ Fax No.: \_\_\_\_\_
- 5. E-mail Address: [REDACTED]
- 6. Trade/Occupation: Cook (Chef 3 years)
- 7. No. Employees: 18 No. Apprentices: 1 No. Journeyworkers: 0 8. Ratio: 1:1,1:1
- 9. DOT Code: 35-2014.00 10. Length of Program: 36 months
- 11. Apprentice Probationary Period: 9 months 12. Work process: Standard  or Revised
- 13. Minimum Journeyworker Rate: \$ 17.00 per hour 14. Effective Date of Wages: 12/1/2022

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

|                                       |                                       |                                       |                            |                            |                            |                            |                            |                            |                            |
|---------------------------------------|---------------------------------------|---------------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 1                                     | 2                                     | 3                                     | 4                          | 5                          | 6                          | 7                          | 8                          | 9                          | 10                         |
| M <input checked="" type="checkbox"/> | M <input checked="" type="checkbox"/> | M <input checked="" type="checkbox"/> | M <input type="checkbox"/> | M <input type="checkbox"/> | M <input type="checkbox"/> | M <input type="checkbox"/> | M <input type="checkbox"/> | M <input type="checkbox"/> | M <input type="checkbox"/> |
| 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"/> |
| 12                                    | 12                                    | 12                                    |                            |                            |                            |                            |                            |                            |                            |
| 15.00                                 | 15.50                                 | 16.00                                 |                            |                            |                            |                            |                            |                            |                            |



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

17. [REDACTED] 12/15/2022 18. \_\_\_\_\_  
Date Signature of Union Representative Date

Timothy Hardman, Owner XX  
Print Name and Title Print Name, Title, and Union Name

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



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

Trade Code 55-046

*NYS Department of Labor  
Apprentice Training*

*FEB 09 2023*

**Related Instruction Availability**

Trade: Cook (Chef 3 year)

Sponsor Name: Tailor and Cook Utica, LLC dba The Tailor and the Cook

Sponsor Representative: Timothy Hardman

*Central Office*

Sponsor Address:

No. & Street: 94 Genesee Street City: Utica

County: Oneida State: NY Zip Code: 13502

Sponsor Telephone No.: 315-62-3663

Proposed Number of Apprentices: 1

**AT Office**

Name: Central Office

No. & Street: 450 S. Salina Street, Room 203

City: Syracuse State: NY Zip Code: 13202

Apprentice Training Representative: [REDACTED] Date Prepared: 12/20/22

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

**School**

Name: Mohawk Valley Community College

No. & Street: 1101 Sherman Drive

City: Utica State: NY Zip Code: 13501

**School Representative Contact Information:**

Name: Jon Velletto

Telephone No.: 315-792-5384 Email: [REDACTED]

**School**

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

No. & Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**School Representative Contact Information:**

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

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

**DLEA**

Name: Brenda Wolak

No. & Street: 4937 Spring Road

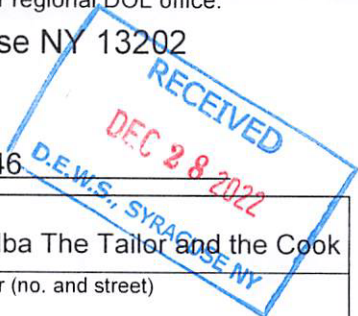
City: Verona State: NY Zip Code: 13478

Signature of DLEA \_\_\_\_\_ Date Prepared: \_\_\_\_\_



Apprenticeship Agreement

FEB 09 2023



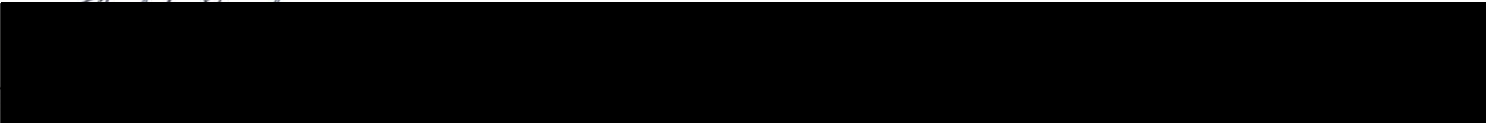
I. Apprenticeship Agreement

Sponsor No. \_\_\_\_\_ ATP Code 55-046

|   |                                      |  |  |   |                   |
|---|--------------------------------------|--|--|---|-------------------|
| Name of Apprentice (Last, First, MI)<br>[Redacted]  | Social Security Number<br>[Redacted] | 1. Name of Program Sponsor<br>Tailor and Cook Utica, LLC dba The Tailor and the Cook |  |   |                   |
|   |                                      | Physical address of Program Sponsor (no. and street)<br>94 Genesee Street            |  |   |                   |
|   |                                      | City<br>Utica  | County<br>Oneida   | State<br>NY   | Zip code<br>13502 |
|   |                                      | Mailing address of Program Sponsor (no. and street)<br>Same as Above                 |  |   |                   |
|   |                                      | City   | County   | State   | Zip code          |
| 2. Trade: <input checked="" type="checkbox"/> Time-based <input type="checkbox"/> Competency-based <input type="checkbox"/> Hybrid<br><b>Cook (Chef 3 years)</b>  |                                      |  |  |   |                   |
| Has the apprentice received any Certificate of Completion from a State or Federal Apprenticeship Program? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," Trade _____ State _____  |                                      | 3. Start Date  | 4. Length of program (Months)<br>36  | 5. DOL Apprentice Probation Period for Completion Rates (Months)<br>9 |                   |
| 6. Related and Supplemental Instruction (RI) Provider(s) and location(s)<br>Mohawk Valley Community College   |                                      |  | RI Compensated<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | 7. Minimum Journey-Worker Rate<br>\$17.00                             |                   |
| 8. Credit for previous training or experience: _____ Months _____ Points _____ Sections<br><input type="checkbox"/> Reinstatement <input type="checkbox"/> Vocational Education <input type="checkbox"/> Transfer <input type="checkbox"/> Previous Experience (Employer name): _____ |                                      |  |  |   |                   |

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 |
|---------|---------|---------|---|---|---|---|---|---|----|
| 1-12    | 13-24   | 25-36   |   |   |   |   |   |   |    |
| \$15.00 | \$15.50 | \$16.00 |   |   |   |   |   |   |    |



Registered by the New York State Department of Labor:

Signature New York State Department of Labor

Date

| State Use Only    |       |
|-------------------|-------|
| Date              | Init. |
| To ATC _____      | _____ |
| To DLEA _____     | _____ |
| Rank Verify _____ | _____ |
| Data Entry _____  | _____ |

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  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.

STATE USE ONLY

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

FEB 09 2023

Central Office



## Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor: Tailor and Cook Utica, LLC dba The Tailor and the Cook

Located at: (Address) 94 Genesee St. Utica NY 13502

Is presently accepting applications for Apprenticeship Training Positions: List estimated number of openings: 1

In the occupation of: (List Trade) Cook (Chef 3 years)

**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 Equivalent (GED/TASC)

Physical Condition: Be physically able to perform the work required as determined by:

Must be able to lift up to 50 pounds regularly.

(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:

Other:

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

Name: The Tailor and the Cook

Address: 94 Genesee St. Utica, NY 13502

Days: Wed-Sat Times: after 4pm

Phone: (315) 624-3663 Email: [REDACTED]

Special Instructions:

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

FEB 09 2023

Central Office

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Department of Labor

[www.labor.ny.gov](http://www.labor.ny.gov)

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

Trade Code(s) 55-046

**Selection Standards and Evaluations**

Name of Candidate: \_\_\_\_\_ Trade: Cook (Chef 3 years)

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

| Only those checked apply.                               |  | Maximum Points Allowable | Number of Years Credited | Score        |
|---|--|--------------------------|--------------------------|--------------|
| <b>Educational Achievement</b>                          |  |                          |                          |              |
| <input checked="" type="checkbox"/>                     | <u>2</u> Points for Each Year of Education Past Grade <u>10</u> or Equivalent as Recognized by Local Educational Authorities                   | 28                       |                          |              |
| <input checked="" type="checkbox"/>                     | <u>4</u> Points for Each Year of Related Technical Education Past Grade <u>12</u> or Equivalent as Recognized by Local Educational Authorities | 8                        |                          |              |
| <input checked="" type="checkbox"/>                     | <u>1</u> Points for Each Trade Related Adult or Continuing Education Course Completed  | 16                       |                          |              |
| <input type="checkbox"/>                                | Other: _____   | 4                        |                          |              |
| <b>Total</b>  |  |                          |                          | <b>Total</b> |
| <b>Work Experience</b>                                  |  |                          |                          |              |
| <input checked="" type="checkbox"/>                     | <u>5</u> Points for Each Year of Trade Related Work Experience   | 30                       |                          |              |
| <input checked="" type="checkbox"/>                     | <u>2</u> Points for Each Year of Active Military Experience  | 20                       |                          |              |
| <input checked="" type="checkbox"/>                     | <u>2</u> Points for Each Year of General Work Experience   | 4                        |                          |              |
| <input type="checkbox"/>                                | Other: _____   | 6                        |                          |              |
| <b>Total</b>  |  |                          |                          | <b>Total</b> |
| <b>Seniority</b>  |  |                          |                          |              |
| <input checked="" type="checkbox"/>                     | <u>1</u> Points for Each Year of Employment with The Sponsoring Firm   | 2                        |                          |              |
| <input type="checkbox"/>                                | Other: _____   | 2                        |                          |              |
| <b>Total</b>  |  |                          |                          | <b>Total</b> |
| <b>Job Aptitude</b>                                     |  |                          |                          |              |
| <input type="checkbox"/>                                | Name of Aptitude Test: _____   |                          |                          |              |
| <input type="checkbox"/>                                | Administered by _____  |                          |                          |              |
| <input type="checkbox"/>                                | Other: _____   |                          |                          |              |
| <b>Total</b>  |  |                          |                          | <b>Total</b> |
| <b>Oral Interview: Not to Exceed 40% of Total Score</b> |  |                          |                          |              |
| <input checked="" type="checkbox"/>                     | <u>1-10</u> Ability to Communicate   | 40                       |                          |              |
| <input checked="" type="checkbox"/>                     | <u>1-10</u> Willingness to Accept Obligation of Apprenticeship   | 10                       |                          |              |
| <input checked="" type="checkbox"/>                     | <u>1-10</u> Ability to Reason and Comprehend   | 10                       |                          |              |
| <input checked="" type="checkbox"/>                     | <u>1-10</u> Interest and Motivation  | 10                       |                          |              |
| <input type="checkbox"/>                                | Other: _____   |                          |                          |              |
| <input type="checkbox"/>                                | Other: _____   |                          |                          |              |
| <b>Total</b>  |  |                          |                          | <b>Total</b> |

Total Allowable Points →

|     |               |  |
|-----|---------------|--|
| 100 | Total Score → |  |
|-----|---------------|--|

Rank \_\_\_\_\_

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

Sponsor Name: Tailor and Cook Utica, LLC dba The Tailor and the Cook

Sponsor Address: 94 Genesee Street Utica, NY 13502



NYS Department of Labor  
Apprentice Training

FEB 09 2023

Central Office

# WE ARE YOUR DOL



Department  
of Labor

[www.labor.ny.gov](http://www.labor.ny.gov)

RECEIVED  
DEC 28 2022  
D.E.W.S., SYRACUSE NY

## 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 ([www.newyork.us.jobs/](http://www.newyork.us.jobs/)) 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 ([www.newyork.us.jobs/](http://www.newyork.us.jobs/)).
- 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.

On behalf of the sponsor, \_\_\_\_\_ Opportunity Standards.

Signature of Sponsor: \_\_\_\_\_

Executive Officer or the Chair  
Authorized representative.

12-15-22  
Date

Timothy Hardman

Owner

Print Name and Title

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

Sponsor Name Tailor and Cook Utica, LLC dba Sponsor Code \_\_\_\_\_ No. of Apprentices 1

Trade(s) Cook (Chef 3 year) Trade Code(s) 55-046