

AGREEMENT TO TRAIN APPRENTICES

District No. _____
DAS File No. _____

NAME OF EMPLOYER				
MAILING ADDRESS	(STREET AND NUMBER)	CITY	ZIP CODE	TELEPHONE NUMBER
ADDRESS OF TRAINING LOCATION (IF DIFFERENT)				
OCCUPATION				DOT No.
NAME OF APPRENTICESHIP COMMITTEE AND STANDARDS				
AREA COVERED BY APPRENTICESHIP STANDARDS				

THE OFFICIAL whose signature follows, agrees in behalf of the above named employer to train apprentices in the designated occupation in accordance with the apprenticeship standards and apprentice agreement and to comply with the provisions thereof.

[SIGNED] By _____

Title _____ Date _____

THE APPRENTICESHIP COMMITTEE accepts and approves the employer as qualified to train apprentices under its standards in the designated occupation.

[SIGNED] By _____

Title _____ Date _____

Approved:
DIVISION OF APPRENTICESHIP STANDARDS

EFFECTIVE DATE OF APPROVAL

[SIGNED] By _____ Date _____
Apprenticeship Consultant

REMARKS:

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF APPRENTICESHIP STANDARDS

