



## Apprentice Training Assignment Request Form

\_\_\_\_\_  
Contractor

\_\_\_\_\_  
Requesting Representative

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Representative Phone Number

# of Apprentice(s): \_\_\_\_\_  Inside  Residential **requested for On-the-Job Training**

Location to Report: \_\_\_\_\_

Address of Jobsite: \_\_\_\_\_

Report Time: \_\_\_\_\_  Central Time  Eastern Time

Supervisor on project \_\_\_\_\_ Phone # \_\_\_\_\_

Workforce currently employed: \_\_\_\_\_ Journey Workers \_\_\_\_\_ Apprentices

**All apprentices have the following cards and licenses:  
Current CCS, OSHA-10, Vanderburgh County**

**Select All Special Needs:**  Long-Sleeve Cotton Shirt  Steel-Toe Boots  Metatarsal Boots  
 ARSC

Other (Specify): \_\_\_\_\_

**Submit Request(s) to:** Roger Clark, Training Director [rclark@evvjatc.org](mailto:rclark@evvjatc.org)  
Drew Widener, Assistant Director [drew@evvjatc.org](mailto:drew@evvjatc.org)  
Bryanna Trautvetter, Administrator [bryanna@evvjatc.org](mailto:bryanna@evvjatc.org)

### JATC OFFICE USE ONLY

Apprentice(s) contacted: \_\_\_\_\_

Training Assignment sent to IBEW Local 16 Union Hall: Date: \_\_\_\_\_ ; Time: \_\_\_\_\_

By:  Roger Clark  Drew Widener  Bryanna Trautvetter