



**NEW MEXICO ROOFING CONTRACTORS ASSOCIATION
ROOFER APPRENTICESHIP APPLICATION**

Applicant Information:

Full name:	_____			Date:	_____
	Last	First	M.I.		
Address:	_____			Phone:	_____
	Street address		Apt/Unit #		
	_____			Email:	_____
	City	State	Zip Code		
Date of Birth:	_____	S.S. #:	_____	Current Wage:	\$ _____
Driver's License #:	_____	D.L. Issuing State:	_____	D.L. Expires:	_____
Have you ever applied to or been associated with NMRC?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you legally eligible for employment in the United States of America?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a disability?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever Served in the United States Armed Forces?				Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes, when? _____

Current Roofing Industry Employer

Company Name:	_____	Phone:	_____
Years at Company:	_____	Manager's Name:	_____
Manager's #	_____	Manager E-mail:	_____

Education

High school:	_____	City & State:	_____
From:	To: _____	Did you graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/> Highest Grade Completed: _____
College:	_____	City & State:	_____
From:	To: _____	Degree/Certificate?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Applicant Printed Name:	_____	Employer Printed Name:	_____
Applicant Signature:	_____	Employer Signature:	_____



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ROOFER APPRENTICESHIP

Application Process, EEO in Appr, and Complaint Procedure

1. An interested applicant should request an application by email at Roofing@NMCA.com or download a copy at NMRCA.com. Completed applications shall be emailed to Roofing@NMCA.com.
2. Upon return of completed applications, the applicant's information is added to the application log. An application is complete upon receipt of documentation to verify that minimum acceptance requirements are met; including two I-9 acceptable forms of I.D. (Driver's license and Social Security card are the most common) Proof of High School Graduation, or GED Equivalence, or acceptance at the discretion of the apprenticeship committee. Additionally, **applicants must have a valid driver's license**. Applications are accepted continually throughout the year.
3. Applicants who submit a completed application form will be scheduled for evaluation and will be notified in writing of their acceptance into the program progressing further in their development within the Catholic Charities educational system specific to the Roofer Apprenticeship program. The approved applicant will be offered preparation classes or will begin apprenticeship classes based on the evaluation results. Those who fail to complete the application process will be notified in writing of the disposition of their application.
4. Applicants who are not referred to NMCA during continued employment by a participating employer will be provided with the contact information of NMCA member employers to whom they can apply, providing their acceptance letter as confirmation of eligibility for the NMCA Roofer apprenticeship program. Upon being hired as an apprentice, the hiring employer shall notify the NMCA Apprenticeship Coordinator via email at Roofing@NMCA.com, with an intent to hire letter stating the employer has signed a participation agreement with the NMCA Apprenticeship program and that they are hiring the apprentice and placing them in the apprenticeship program.
5. Applicants who receive a letter of acceptance into the program after meeting the above criteria will be placed into a pool of qualified applicants. Upon request, this pool of applicants will be made available to all employers with a current employer acceptance agreement seeking to employ a new apprentice. Applicants will remain on the list in accordance with 11.2.2.1 1 NMCA.
6. Equal Employment Opportunity in Employment:
The recruitment, selection, employment and training of Apprentices during their Apprenticeship shall be without discrimination based upon race, color, religion, national origin, or sex. The Sponsor will take affirmative action to provide equal opportunity in Apprenticeship and will operate the Apprenticeship Program as required under Title 29, Part 30 of the Code of Federal Regulations, as amended, and 11.2.2 NMCA Equal Employment Opportunity in Apprenticeship State Plan as amended.
7. Complaint procedure:
Any apprentice or applicant for apprenticeship who believes that he/she has been discriminated against on the basis of race, color, religion, national origin, or sex, with regard to apprenticeship; or that the equal opportunity standards with respect to their selection have not been followed, may personally or through an authorized representative, file a complaint with the State Apprenticeship Agency, attention New Mexico Department of Workforce Solutions, State Apprenticeship Director, 401 Broadway Blvd. N.E., Albuquerque, NM 87102 or, at the apprentice applicants election, with the program sponsor. Attention: New Mexico Roofing Contractors Association, Apprenticeship Coordinator, P.O. Box 93785 Albuquerque, NM 87119



For Internal Use Only:

To be completed by Roofing Apprenticeship Coordinator:

1. Applicant Name:
2. Applicants Employer:
3. Name of person interviewing this applicant:
4. Date of interview:
5. Has this applicant been approved for acceptance into the Roofer Apprenticeship program? If yes, date:
6. If not accepted into the program, please provide the reason/notes:
7. Do we have a current copy of the "Employer Acceptance Agreement" for this apprentice? YES / NO

(Once accepted, we must have a current copy of the applicants company Employer Acceptance Agreement on file. This must be provided prior to entry into the DWS system. Employer participation is required.)

On-the-Job Training Previous Credit Hours: YES / NO

If yes, explain what the training was and how many credit hours awarded:

Related Instruction Previous Credit Hours: YES / NO

If yes, explain what the training was and how many credit hours awarded:

Name of person registering applicant into DWS website:

Date registered:

