

Department of Workforce Development Division of Workforce Solutions  
**Bureau of Apprenticeship Standards**

**Northern WI Heat & Frost JAC  
EMPLOYER APPLICATION**

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

WI UC Ins # \_\_\_\_\_ WI Workers Comp Ins # \_\_\_\_\_ FEIN # \_\_\_\_\_  
Date: \_\_\_\_\_

Name of Firm			Contact/Title	
Street Address or P.O. Box	City	County	State	Zip Code+4
Telephone Number		Fax Number		

Indicate Appropriate Industry Group:  Construction  Industrial  Service  OJT

Product or Service \_\_\_\_\_

Year Business Started \_\_\_\_\_ Trained Apprentices Before?  Yes  No

Trade apprentice will be trained in? \_\_\_\_\_

Are the skilled workers/journey workers in the trade covered by a collective bargaining agreement?  Yes  No

If yes, list union name and number \_\_\_\_\_ Local # \_\_\_\_\_

Are the apprentices covered by this agreement?  Yes  No

Number of skilled workers/journey workers in this trade \_\_\_\_\_

Present skilled/journey workers base skilled wage rate per hour for this trade \$ \_\_\_\_\_ per hour

Applicant Name	Social Security Number	Date Training Will Start
----------------	------------------------	--------------------------

If the applicant has had previous related school or work experience, how much time credit should be granted on the indenture?

Work \_\_\_\_\_ School \_\_\_\_\_

Name of school apprentice will attend \_\_\_\_\_

Please return to: Northern WI Heat & Frost JAC  
3315 N. Ballard Rd., Ste. D  
Appleton, WI 54911

Email to: [kelly@omswi.com](mailto:kelly@omswi.com)

FAX to: (920) 734-6754

**Skilled Workers & Apprentices  
Currently Employed**

Name	Date Employed or Indentured	License Number (if applicable)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

Any misrepresentation contained herein shall be grounds for denial of your request for an apprentice.

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed