For Internal Use Only  Application number:	



# **APPLICATION FOR APPRENTICESHIP PROGRAM**

Please print clearly! Illegible or incomplete applications will not be accepted.

Date:		Last fo	our of SSN:		_		
Desired Apprenticeship Occup	ation (chec	k):	Plumber	Sheet Meta	1		
Name: (Last)		(First)	)		(Middle)		
Address: Street / Apt#				City /	State / Zip		
Phone No.: Home:		Ce	ell:				
Are you over 18 yrs of age:	YES	NO	Do you have	a valid driver	's license?	YES	NO
Are you currently employed?	YES	NO	If yes, may	y we contact y	our employer?	YES	NO
Are you legally eligible for em	ployment ii	n the U.S.	? YES	NO			
Do require a TN Visa or Work	Visa spons	orship?	YES	NO			
EDUCATION							
High School Diploma	YES	NO	GED	YES	NO		
College:			How Many Y	Years:	_ Graduate?	YES	NO
Subject Studied or Maj	or:						
Trade School:			How Many Y	Years:	_ Graduate?	YES	NO
Certification:		Subjec	t Studied or M	lajor:			
Have you taken any of the	following c	ourses? P	lease check al	I that apply:			
☐ General math/alg☐ Plane geometry☐ Advanced algebra	•						
How many years did you, o	or have you	, taken Sh	op/Technical	courses? Plea	se check below	<b>/:</b>	
□ N/A □ 1 year □ 2 years □ 3 years	- 3 - 3	,	1	- 1			

# EMPLOYMENT – List all work experience, starting with the most current. EMPLOYER: ADDRESS: SUPERVISOR OR FOREMAN: \_\_\_\_\_\_ PHONE #: \_\_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_\_ WORK PERFORMED:

DOI LICVIDOR OR I	OILLIVII II 1		I HONE #.	
FROM:	TO:	JOB TITLE:		
WORK PERFORME	D:			
SALARY:	REASON	FOR LEAVING:		
EMPLOYER:				
ADDRESS:				
SUPERVISOR OR FO	REMAN:		PHONE #:	
FROM:	TO:	JOB TITLE:		
WORK PERFORMED	:			
SALARY:	REASON I	FOR LEAVING:		
EMPLOYER:				
ADDRESS:				
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ADDRESS:			D.Y.O.) 17	
WORK PERFORME	D:			
SALARY:	REASON	FOR LEAVING:		

ADDITIONAL WORK INFORMATION OR CERTIFICATES CAN BE INCLUDED AS AN ATTACHMENT

# **SKILLS**

ed that apply. Use the	space provided t	o list additional skills	5.
Service Technician			
Fabrication – sheet met	al		
Fabrication - pipe			
Certified Welder - List	Certifications		
Welding Experience:	SS Alum	Galv (Non-Certified	for HVAC Shop only)
nses etc:			
strative skills:			
eanor or felony? If so list c	onviction dates, cha	rges and current status (i.	e. probation/parole).
cessary to determine el	ligibility for the	Apprenticeship Progr	am. I understand that, i
		Date:	
	Service Technician  Fabrication – sheet met Fabrication - pipe Certified Welder - List Welding Experience:  strative skills:  eanor or felony? If so list concessary to determine elements of the constant of	Service Technician  Fabrication – sheet metal  Fabrication - pipe  Certified Welder - List Certifications  Welding Experience: SS Alum  asses etc:  strative skills:  eanor or felony? If so list conviction dates, charactering, Inc. to make such investigations accessary to determine eligibility for the Aluman seesary to determine eligibility for the Aluman see	Fabrication - sheet metal Fabrication - pipe Certified Welder - List Certifications Welding Experience: SS Alum Galv (Non-Certified anses etc:  strative skills:  eanor or felony? If so list conviction dates, charges and current status (i.e.)  acting, Inc. to make such investigations and inquiries of my accessary to determine eligibility for the Apprenticeship Program in misleading information given in my application or intervier

Please list all skills. Include any special training, licenses and certifications. Be as specific as

Sun Mechanical Contracting, Inc. is an Equal Opportunity Employer.

## **APPLICANT SURVEY**

Sun Mechanical Contracting, Inc. is an Equal Opportunity Employer. We are subject to certain governmental recordkeeping and reporting requirements. In order to comply with these laws, we invite our employment applicants to voluntarily self-identify to certain specified categories. Submission of this information is completely voluntary and refusal to provide it will not subject you to any adverse treatment. Whether or not you respond will not affect our consideration of your application. This information will be kept confidential in accordance with state and federal laws and will only be used in accordance with the provisions of applicable laws, executive orders and regulations. We may be required to summarize such data for government reporting purposes, and, if so, such data will not identify any specific individual.

# Please indicate ethnicity and gender below:

# Hispanic or Latino

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

### American Indian or Alaskan

A person having origins in any of the original peoples of North America or South America (including Central America), and who maintains tribal affiliations or community attachment.

### Asian

A person having origins in any of the original peoples of the Far East, Southeast Asia or the subcontinent of India.

### Native Hawaiian or Pacific Islander

A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands (not Hispanic or Latino).

### Black or African American

A person having origins in any of the Black racial groups of Africa.

### White

A person having origins in any of the original peoples of Europe, North Africa or the Middle East.

### Two or More Races

A person having origins in any combination of two or more of the categories above.

# Gender:

Male Female Prefer not to answer

Please Submit Completed Form via Email to sunjobs@sunmechanical.net or Print and Return Completed Form to Sun's Corporate Office at 3951 E. Columbia St., Tucson, AZ 85714