

AGREEMENT TO TRAIN APPRENTICES

District No. 03

DAS File No. 05044

NAME OF EMPLOYER			
MAILING ADDRESS (STREET AND NUMBER)	CITY	ZIP CODE	TELEPHONE NUMBER
ADDRESS OF TRAINING LOCATION (IF DIFFERENT)			
OCCUPATION(S)			DOT No.
NAME OF APPRENTICESHIP COMMITTEE AND STANDARDS California North Bay Chapter of the National Tooling and Maching Association, Inc			
AREA COVERED BY APPRENTICESHIP STANDARDS or NAME AND ADDRESS OF PROJECT Unilateral Apprenticeship Committee			

THE OFFICIAL, whose signature follows, agrees on 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

Printed name

Title Date

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

[SIGNED] By

Printed name **Daniel Sunia**

Apprentice Program

Title **Coordinator** Date

Effective until:

- Revoked**
- End of Project** (Enter project name and address in Area Covered above)
- Date**
Date
- Other**
Specify

Accepted:
DIVISION OF APPRENTICESHIP STANDARDS

EFFECTIVE DATE

[SIGNED] By
Apprenticeship Consultant Date

REMARKS: