

**Manitowoc County Schools**  
**Youth Apprenticeship Application**

**DEADLINE: FEBRUARY 10th, 2017**

Return completed application to your high school's Youth Apprentice Liaison

Student:	School:	Current Year In School:
Mark the box of the program for which you are applying. If you wish to apply to multiple program areas, please indicate your preference by using 1, 2, or 3 etc. Please include an "Applicant Statement" for each program area you wish to apply to.		
<b>Agriculture, Food, and Natural Resources</b>		
<input type="checkbox"/>	Large Animal – Herd Unit	
<input type="checkbox"/>	Small Animal - Veterinary Technician	
<input type="checkbox"/>	Water Resource Management	
<input type="checkbox"/>	Agricultural Mechanic	
<b>Construction</b>		
<input type="checkbox"/>	Carpentry	
<input type="checkbox"/>	HVAC Technician	
<input type="checkbox"/>	Plumbing	
<input type="checkbox"/>	Electrician	
<input type="checkbox"/>	Masonry/Concrete	
<b>Financial Services</b>		
<input type="checkbox"/>	Accounting	
<input type="checkbox"/>	Banking	
<input type="checkbox"/>	Insurance	
<b>Health Services</b>		
<input type="checkbox"/>	Certified Nursing Assistant	
<input type="checkbox"/>	Dental Assistant	
<b>Hospitality, Lodging, and Tourism</b>		
<input type="checkbox"/>	Food and Beverage	
<input type="checkbox"/>	Lodging	
<b>Information Technology</b>		
<input type="checkbox"/>	Info Tech Essentials	
<b>Manufacturing</b>		
<input type="checkbox"/>	Industrial Equipment Maintenance	
<input type="checkbox"/>	Machining	
<input type="checkbox"/>	Welding	
<input type="checkbox"/>	Wood Production	
<input type="checkbox"/>	Production	
<input type="checkbox"/>	Assembly and Packaging	
<input type="checkbox"/>	Industrial Painting	
<b>Science, Technology, Engineering, and Math</b>		
<input type="checkbox"/>	Engineering Drafting	
<b>Sales and Marketing</b>		
<input type="checkbox"/>	Marketing	
<input type="checkbox"/>	Sales and Merchandising	
<b>Transportation, Distribution, and Logistics</b>		
<input type="checkbox"/>	Automotive Technician	
<input type="checkbox"/>	Diesel Technician	

For additional information, contact your school liaison, school counselor, or Kari Mueller at 920-236-0593 or [kmueller@cesa6.org](mailto:kmueller@cesa6.org)

No individual shall be excluded from participation in, denied the benefits of, subjected to discrimination in connection with any youth apprenticeship program on the basis of race, color, religion, sex, national origin, age, handicap, political affiliation or belief, or sexual orientation.

# Manitowoc County Schools Youth Apprenticeship Application

## I. Background Information

Student (First, Middle, Last):		
Address (Street or P.O. Box):		
City, State:	Zip:	Student Telephone: (920) -
Date of Birth:	Email:	
Driver's License Number:	If no driver's license, anticipated date of license achievement:	
High School:	Current Year in School: <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior	
Parent or Guardian:		
Address (if different from above):		
City, State:	Zip:	Telephone: (920) -

## II. Parent Certification & Release – Parent, please initial next to each statement

- Initial \_\_\_\_\_ I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if my student is selected for the Youth Apprenticeship Program, falsified information may be grounds for removal.
- Initial \_\_\_\_\_ I authorize investigation of all statements contained herein and the references listed in this application and all information concerning previous employers, and release all parties from liability for any damage that may result from furnishing those to you.
- Initial \_\_\_\_\_ I understand that a parent or guardian must attend, along with my child, quarterly grading conferences which may be held during the school day.
- Initial \_\_\_\_\_ I authorize the release of transcripts of grades and attendance record.
- Initial \_\_\_\_\_ I authorize the Youth Apprenticeship Coordinator the use of written or oral testimonials and photographs and/or videos with my child's image in Youth Apprenticeship publications and/or news releases.
- Initial \_\_\_\_\_ I understand that I and my child are responsible to pay for the cost of any technical college class and included fees in which a grade of D or F is earned.
- Initial \_\_\_\_\_ I understand that I am responsible for the transportation of the undersigned student to and from the classroom and worksite and for all loss involved in said transportation.
- Initial \_\_\_\_\_ I certify that the student has a valid driver's license and adequate car insurance (if student will be driving).

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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## III. Student Understanding of Youth Apprenticeship Program Commitment

As a Youth Apprentice, I agree to:

- Maintain the academic and attendance requirements required by the Youth Apprenticeship Partnership, my school, and my work site;
- Observe company and school rules and other requirements identified by the employer; and
- Participate in progress reviews scheduled with mentors, school personnel, and parent/guardian.

I understand that the Youth Apprenticeship Program requires a time commitment beyond that of a typical high school student. A youth apprentice must complete 450 total work hours during the year, which usually includes summer work scheduling. This means that a typical youth apprentice averages a minimum of 10 – 15 hours per week at their job during the school year and often more time during the summer or on weekends depending upon the placement. I will be asked to provide my worksite with specific hours and days that I will be available to work. I understand that timely communication with my worksite mentor regarding unplanned changes in my personal schedule is extremely important. I understand that a youth apprenticeship placement may conflict with other obligations or interests and that employers’ decisions about hiring a youth apprentice will be affected by my availability.

Below is a list of the extracurricular activities in which I plan to participate as well as a summarized timeline for each activity. I am providing as much information as I have available and being specific, regarding activities and timelines, as I possibly can at this time.

Sport or Activity	General Timeframe (months)	Expected time of day/hours for practice and/or competition
<i>Example: Football</i>	<i>August through November</i>	<i>Practice every day from 3-7 p.m., game every Friday</i>
<i>Example: Musical</i>	<i>February through April</i>	<i>Rehearsal MWF from 5-9 p.m., Performances on Thursday-Sunday, April 6-9</i>

**Summer vacations/obligations**

*Example: Family vacation June 20-27. Basketball camp July 8-12.*


**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## V. Applicant Statement

- In a word processed statement (one page, double spaced) on a separate sheet of paper, respond to the following:
  - Why are you interested in Youth Apprenticeship?
  - How will a Youth Apprenticeship assist you in achieving your career goal?
  - What qualifications do you have that will make you a successful Youth Apprentice?

Current or Previous Employment	
Employer 1	
Dates of Employment	
Duties/Responsibilities	
Employer 2	
Dates of Employment	
Duties/Responsibilities	

## VI. Verification of GPA and Attendance – to be completed by Youth Apprentice Liaison

*Note: Student absences due to attendance of school-related activities are NOT to be included in these totals (i.e. field trips, conferences, etc.)*

Current Cumulative GPA as of \_\_\_\_/\_\_\_\_/\_\_\_\_ is \_\_\_\_/4.0

Number of days missed during Freshman year: \_\_\_\_\_ excused \_\_\_\_\_ unexcused

Number of days missed during Sophomore year: \_\_\_\_\_ excused \_\_\_\_\_ unexcused

Number of days missed during Junior year: \_\_\_\_\_ excused \_\_\_\_\_ unexcused

Number of unexcused tardies Freshman year: \_\_\_\_\_

Number of unexcused tardies Sophomore year: \_\_\_\_\_

Number of unexcused tardies Junior year: \_\_\_\_\_

Youth Apprentice Liaison Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**YA Liaison: Attach a copy of student's transcript to the application prior to submitting to YA Coordinator.**

## VII. Reference Forms

- 2 Recommendation Forms (completed by teacher, counselor, or principal)
- 1 Employer Reference Form – OPTIONAL (completed by current or former employer)

Print blank forms and deliver to be filled out by hand. Completed Recommendation forms must be delivered to Youth Apprentice Liaison, NOT returned to student.

# Manitowoc County Schools Youth Apprenticeship Application Recommendation Form

Student Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

**DO NOT RETURN THIS FORM TO THE STUDENT!**

Please return to school liaison, \_\_\_\_\_, by \_\_\_\_\_ (date)

No Basis for Judgment		Below Average	Average	Above Average	Excellent (Top 10%)
	Academic Performance/ Quality of Work				
	Responsibility				
	Attitude				
	Effort				
	Honesty				
	Dependability				
	Teamwork/Cooperation				
	Problem Solving				
	Attendance/Punctuality				
Would you hire this student to work for you?			Yes	No	Maybe (explain below)

Please provide specific examples of performance to help potential employers gauge this student's employability.


\_\_\_\_\_  
Signature Date \_\_\_\_\_

\_\_\_\_\_  
Printed Name Position/Subject Taught

- Recommendation form may be filled out by:  
A. Counselor      B. Teacher      C. Principal
- **Health Students must have one science teacher recommendation.**

# Manitowoc County Schools Youth Apprenticeship Application Recommendation Form

Student Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

**DO NOT RETURN THIS FORM TO THE STUDENT!**

Please return to school liaison, \_\_\_\_\_, by \_\_\_\_\_ (date)

No Basis for Judgment		Below Average	Average	Above Average	Excellent (Top 10%)
	Academic Performance/ Quality of Work				
	Responsibility				
	Attitude				
	Effort				
	Honesty				
	Dependability				
	Teamwork/Cooperation				
	Problem Solving				
	Attendance/Punctuality				
Would you hire this student to work for you?			Yes	No	Maybe (explain below)

Please provide specific examples of performance to help potential employers gauge this student's employability.


\_\_\_\_\_  
Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Position/Subject Taught

- Recommendation form may be filled out by:  
     B. Counselor      B. Teacher      C. Principal
- **Health Students must have one science teacher recommendation.**

# Manitowoc County Schools Youth Apprenticeship Application Employer Reference Form

(Please return to applicant or Youth Apprenticeship Liaison by February 9th)

The Employer Reference Form is to be completed by a current or former employer. This is an OPTIONAL form and will not be counted against a candidate if he/she has never been employed.

Student Name \_\_\_\_\_ Date \_\_\_\_\_

**1** Unsatisfactory Performance      **2** Average Performance      **3** Above Average Performance

<b>SKILLS</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>Comments</b>
Ability to Follow Instructions				
Accuracy in Work				
Time Efficiency				
Quality of Work				
Knowledge of Job				
<b>ATTITUDES</b>				
Ability to Work with Others				
Initiative/Works Without Supervision				
Accepts Responsibility				
Accepts Constructive Criticism				
Follows Established Protocols				
Observes Safety Rules				
<b>PERSONALITY</b>				
Grooming				
Rapport with Others				
Self-confidence				
Takes Pride in Work				
Dependability				
<b>ATTENDANCE</b>				
Worked Assigned Hours				
Punctuality				

Please provide additional comments regarding this student's qualifications for employment as a youth apprentice.


\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Printed Name

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

\_\_\_\_\_  
Relationship to Applicant

\_\_\_\_\_  
Dates of Contact