

COMPLETE ALL Items
BLUE or BLACK Ink ONLY

AGREEMENT TO TRAIN APPRENTICES

District No. 03

DAS File No. 05044

Employer ID _____

This is NOT your Employer Federal / Tax ID --
Look up Your California Employer Number at
...<https://businesssearch.sos.ca.gov/>

NAME OF EMPLOYER:				
MAILING ADDRESS (STREET) (APO/RM/AFPO):		CITY:	STATE:	TELEPHONE NUMBER:
ADDRESS OF TRAINING LOCATION (IF DIFFERENT):				
OCCUPATION:				
NAME OF APPRENTICESHIP STANDARDS (NAME AND ADDRESS OF PROJECT):				
California Tooling & Machining Apprenticeship Association (CTMAA)				
Northern California (All Counties)				

Google the street address of the
Community College(s) employee will attend

Enter the Exact Occupation, O*Net Code
(NOT the job title) ... Find it at:
calmachinist.com Apprentice tab,
Enroll dropdown ... O*Net Code List

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 _____

Company Officer



Leave this area blank