



P. O. Box 2403 Oldsmar, FL 34677
(727) 209-5745

PLEASE PRINT OR TYPE

Date _____

Applying for:

- Apprenticeship in Residential/Light Commercial Heating & Air Conditioning Servicer (4 Years)
- Apprenticeship in Refrigeration Mechanic (4 Years)

PERSONAL

Name _____

Address: _____

City: _____ State _____ Zip: _____

Home Telephone # _____

The following information is required by the Florida Department of Education and the U.S. Department of Labor data information system (RAPIDS).

Date of Birth: _____

Race (Check One)

Ethnic Group (Check One)

- _____ White
- _____ Black/African American
- _____ American Indian/Alaskan Native
- _____ Asian

- _____ Creole
- _____ Hispanic/Latino
- _____ None of the above

Military Veteran (Check One) _____ Yes _____ No

If yes: Year of Entry _____ Year of Release _____ Branch _____

EDUCATION

High School Diploma? _____ or GED _____

If not a High School Graduate, how many years completed? _____

Last school attended _____

Any previous schooling or subjects related to this trade?

EMPLOYMENT HISTORY

What is your present wage? \$ _____

List present employer first

Employer: _____ Phone#: _____

Address: _____

Supervisor's Name: _____ Position: _____

From: _____ To: _____

Employer: _____ Phone#: _____

Address: _____

Supervisor's Name: _____ Position: _____

From: _____ To: _____

Employer: _____ Phone#: _____

Address: _____

Supervisor's Name: _____ Position: _____

From: _____ To: _____

Signature of Applicant

Date

AN EQUAL OPPORTUNITY PROGRAM

**Application must be accompanied by a photocopy of your drivers license
or birth certificate or DD-214 for proof of age.**

**All areas of this application must be answered in order for the Apprenticeship
Committee to approve the registration.**