Apprenticeship Application Form

This form contains three parts: the **Apprenticeship Application**, the **Employer Application** and the **Apprenticeship Training Agreement**. Each of these must be filled out completely in order for the apprenticeship application to be processed. Please be accurate with dates, phone numbers, addresses etc. and please print clearly. Incomplete forms or forms that cannot be read will be returned to the applicant.

The **Apprenticeship Application** must be completed by the applicant (apprentice). To receive credit for high school trade courses, the applicant must submit a copy of their high school transcript with the application form. To receive credit for post-secondary courses, the applicant must submit a copy of their graduation certificate with the application form.

The **Employer Application** must be completed by the employer.

The **Apprenticeship Training Agreement** must be signed by the applicant and the employer or employer's representative. These signatures must be witnessed. If the applicant is under 18 years of age, a parent/guardian must also sign the application.

Send completed applications to:

PEI Apprenticeship Section
PO Box 2000
Suite 212, Atlantic Technology Centre
Charlottetown, PEI C1A 7N8

Or

Scan and email to
apprenticeship@gov.pe.ca

Please retain these instructions for your records.

For more information, contact the PEI Apprenticeship Section at 368-4460.

Apprenticeship Application

1. Trade _____

2. Application Type (check one)

☐ Apprenticeship Program

☐ High School Student - Accelerated Secondary Apprenticeship Program (ASAP)

3. Personal information:

_____ Man _____ Woman _____ Gender Not Listed _____ Do not wish to disclose

Legal First Name	Middle Name	Last Name	Date of Birth (DD/MM/YY)

Mailing Address	City	Province	Postal Code

Primary phone #	Cell #	E-mail address

Alternate contact person:
Applicants under 18 years of age **must** include the name of a parent or guardian. Optional for applicants over 18.

Name	Relationship to apprentice	Phone#	Cell #

4. Education information: (Please attach a photocopy of your certificate or transcript for proof of completion.)

High School Name _____ Grade completed _____

Date expected to graduate (for ASAP/high school students) _____

High School Equivalency (GED) obtained? ☐ Yes ☐ No

Did you attend a pre-employment program (college) or block release training program?

☐ Yes ☐ No Trade _____

Dates attended_____to _____ Training Institution_____

Note: To receive credit for previous in-school training, you must supply proof of completion.

If you have documentation that supports any exam accommodations, you must submit this information before attending training.

5. Previous trade employment:

To receive credit for previous employment hours in this trade, you must supply a copy of your Record of Employment or a letter from your employer.

Apprenticeship Application

Consent to Share Personal Information

Personal information on this form is collected under section 31(c) of the *Freedom of Information and Protection of Privacy Act* R.S.P.E.I. 1988, c, F-15.01 as it relates directly to and is necessary for determining your eligibility for the PEI Apprenticeship Program. If you have any questions about this collection of personal information you may contact the Manager of Apprenticeship, PO Box 2000, Charlottetown PE C1A 7N8, (902) 368-4460.

I understand that to administer, monitor and evaluate my apprenticeship training, the PEI Apprenticeship Section may need to collect or provide personal information about me to:

- My current and former employers
- Accredited training providers that provide technical training to me
- Government officials responsible for apprenticeship or trade certification programs in Canadian provinces and territories to verify my status under the PEI Apprenticeship program and to verify my eligibility for any grants or funding.
- Other provincial government education branches, schools, school divisions to verify education credentials
- Employment and Social Development Canada (ESDC) to assist in obtaining financial support
- Other provincial government officials to administer and enforce workplace legislation
- Canadian Council of Directors of Apprenticeship (CCDA) and Employment and Social Development Canada (ESDC) officials to administer the Interprovincial Standards Red Seal Program and/or to confirm my status as a Red Seal program client listed in the Interprovincial Computerized Management System (ICEMS) database
- Alternate contact

Apprentice Signature

- I understand the "Consent to Share Personal Information" and I hereby make application for apprenticeship, and I declare that:
- The information I have provided is true and complete in all respects and that I have not withheld any relevant information. (Note: It is an offence under the *Apprenticeship and Trades Qualification Act* to provide false information.)
- I will notify the PEI Apprenticeship Section office of any subsequent changes in the information contained on this application.
- I will notify the PEI Apprenticeship Section of any change of employer during my apprenticeship.

_____ _____

Signature of Applicant Date

Employer Application

1. **Name of Prospective Apprentice** _____

2. **Trade** _____

3. **Date Employment Started** _____

4. **Business Information**

_____
Business Operating Name

_____ _____ _____ _____
Mailing Address | City/Town | Province | Postal Code

_____ _____
Primary Phone # | Secondary Phone #

_____ _____
Fax# | E-Mail Address

Do you have a journeyperson on staff who holds a Certificate of Qualification (Red Seal)?

☐ Yes ☐ No

If no:

Do you have a tradesperson who has a minimum of7 years of experience in the trade?

☐ Yes ☐ No

5. Signing Authority for Employer

I have the authority as, or on behalf of, the employer to complete this Apprenticeship Application form.

_____ _____
Name | Position with Employer

_____ _____
Signature | Date

Apprenticeship Training Agreement

The Term of apprenticeship commences on the date this agreement is registered with the Manager of Apprenticeship and will terminate upon the cessation of employment, completion of the apprenticeship training period or by mutual consent of both the employer and apprentice. The term of apprenticeship is flexible and a **Completion of Apprenticeship** certificate will be issued to apprentices who complete all portions of their training and achieve a pass mark in the **Certificate of Qualification** examination administered by Apprenticeship Section, Province of Prince Edward Island.

Witnesseth

1. The employer agrees to
   a) accept and train the apprentice in all areas of the trade or occupation so far as the employer's facilities and availability of work permit;
   b) ensure the apprentice is supervised by a journeyperson in the said trade and the ratio of apprentices to journeypersons, as established by the Provincial Apprenticeship Board, for the trade, is not exceeded;
   c) permit the apprentice to attend in-school training classes approved by the Provincial Apprenticeship Board for the trade; and
   d) cooperate with the Apprenticeship Training Officer, appointed by the Minister responsible for the *Apprenticeship and Trades Qualification Act*, in monitoring and recording apprentice's progress, and in scheduling in-school training.

2. The apprentice agrees to
   a) work as an apprentice and be trained in the trade or occupation by the employer;
   b) show caution and respect for the tools and equipment, goods and property of the employer and avoid any damage or waste of them;
   c) show caution and respect for the goods and property of the employer's customers;
   d) cooperate with the Apprenticeship Training Officer, appointed by the Minister responsible for the *Apprenticeship and Trades Qualification Act*, in monitoring and recording apprentice's progress, and in scheduling in-school training; and
   e) register for in-school training in consultation with my employer (according to Apprenticeship Section policy) and attend the required in-school training classes for the trade or occupation.

3. The apprentice's rate of pay shall conform to the current collective agreement, if the employer is a party to the agreement, or to locally accepted rates in the absence of a collective agreement.

4. All parties agree to be subject to and carry out the provisions of the *Apprenticeship and Trades Qualification Act* as they apply to the trade or occupation and this agreement.

5. If this agreement is cancelled, all parties shall be notified.

In Witness thereof the parties hereto have hereunder set their hands the day and year aforesaid.

Witness	Employer Signature	Company Name (print)	Date
Witness	Apprentice Signature	Apprentice Name (print)	Date

Note: Applicants under 18 years of age must have the signature of a parent or guardian.

Witness	Parent/Guardian Signature	Parent/Guardian Name (print)	Date

For Office Use Only	**Trade:**	**Registration Number:**
	Manager of Apprenticeship Signature _____	**Date Registered with Manager of Apprenticeship** _____