TRAINING CENTER APPLICATION

Please select which training center location you are applying to: ☐ Baton Rouge Training Center 19251 Highland Road Baton Rouge, LA 70809 225-752-0088

☐ Westlake (Southwest) Training Center 222 Walcot Road Westlake, LA 70669 337-882-0204

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Date Received:

You may register for up to 2 classes, COURSE REGISTRATION depending on availability. Name (First, Middle Initial, Last) Class Requesting Level Street Address Class Requesting Level To enroll in level 1 carpentry, electrical, instrumentation or millwright, the State Zip Code NCCER CORE curriculum is a prerequisite or it must be taken at the same City time as the craft class requested. Cell Phone Number Cell Phone Carrier Name (AT&T, Verizon, etc.) Welding (3 levels offered at both locations). Please select an option below. ☐ Baton Rouge Training Center ☐ Southwest Training Center Off-site Location (please list) _ **Email Address EMPLOYER/SPONSOR INFORMATION** Date of Birth (MM/DD/YYYY) Social Security Number Company Name/Job Site NCCER# Gender Veteran Race (Optional; please check one) Supervisor Signature ☐ Female ☐ Yes ☐ African-American □ No Asian ☐ Male STUDENT SURVEY ☐ Caucasian How did you hear about ABC? Please check the box next to the best Hispanic Other ☐ School Counselor ☐ Employer ☐ Friend/Relative **EMERGENCY CONTACT INFORMATION** ☐ ABC Tour/Build Your Future Event ☐ Training Manager Other (please describe) Relation Name (First, Last) **EDUCATION BACKGROUND** Please select the *highest level of education you have completed*, and write Phone Number the year it was completed. NO PERSONAL CHECKS ACCEPTED. ALL MAJOR CREDIT ☐ High School ___ **CARDS ACCEPTED.** Year Completed Name of High School Payment MUST BE made at the time of application ☐ GED _ submittal. Failure to cancel 10 DAYS prior to start of class Year Completed will result in a \$40.00 refund ONLY. ☐ Vo-Tech (number of years completed) ____ Signature REQUIRED below. ☐ College (number of years completed) ___ STANDARD CRAFT TRAINING PROCESSING RELEASE I hereby authorize ABC to release or make available student training information and related records to NCCER Registry Department for verification purposes and to Sponsor Representatives/Primary Administrator upon request. I hereby release and hold ABC and NCCER harmless from and against any and all claims arising out of the verification process and release of records. HOLD HARMLESS AND INDEMNITY AGREEMENT Persons who enroll in ABC Training Center Courses acknowledge that they are physically fit and able to participate in all courses and activities. In the event of an accident or injury, participants agree to release and hold the Pelican Chapter of Associated Builders and Contractors, Inc. and its employees, agents and board members harmless from and against all claims for injury, loss or damage. TRAINING CENTER RULES Any class schedule is subject to change without notice due to enrollment numbers and requirements. Completion of all or part of training program does not guarantee employment. Students agree to comply with all ABC student policies and rules and are subject to immediate dismissal from the applicable program for failure to comply. Parent/Guardian Signature (Required if student is under 18) Student's Signature (Required) Date

OFFICE USE ONLY

Check No./PO No./Last 4 digits of credit card: ______ Cash Co. Check Money Order Invoice Credit Card

Amount Paid: ____

Semester: _____ ☐ Spring ☐ Summer ☐ Fall

GL Code: 4520-

Staff Initials:

☐ New Student ☐ Returning Student