

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



STUDENT NAME

Name (First, Middle Initial, Last)

EMPLOYER/SPONSOR INFORMATION

Company Name/Job Site

Supervisor Signature

STUDENT CONTACT INFORMATION

Street Address

City State Zip Code

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Cell Phone Number *Cell Phone Carrier Name (AT&T, Verizon, etc.)*

Email Address

Date of Birth (MM/DD/YYYY) *Social Security Number*

LA Secure ID NCCER#

Gender Female Male

Veteran Yes No

Race (Optional; please check one)
 African-American
 Asian
 Caucasian
 Hispanic
 Other _____

EMERGENCY CONTACT INFORMATION

Name (First, Last) Relation

()
Phone Number

**NO PERSONAL CHECKS ACCEPTED. NO CASH ACCEPTED.
ALL MAJOR CREDIT CARDS AND MONEY ORDERS ACCEPTED.**

Payment MUST BE made at the time of application submittal. Failure to cancel 10 DAYS prior to start of class will result in a \$40.00 refund ONLY.

Signature REQUIRED below.

COURSE REGISTRATION

You may register for up to 2 classes, depending on availability.

Class Requesting Level

Class Requesting Level

To enroll in level 1 carpentry, electrical, instrumentation or millwright, the NCCER CORE curriculum is a prerequisite or it must be taken at the same time as the craft class requested.

Welding (3 levels offered at both locations). Please select an option below.

Baton Rouge Training Center Southwest Training Center

Off-site Location (please list) _____

STUDENT SURVEY

How did you hear about ABC? Please check the box next to the best choice.

School Counselor Employer Friend/Relative

ABC Tour/Build Your Future Event Training Manager

Other (please describe) _____

EDUCATION BACKGROUND

Please select the highest level of education you have completed, and write the year it was completed.

High School _____
Year Completed Name of High School

GED _____
Year Completed

Vo-Tech (number of years completed) _____

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.

Student's Signature (Required) Date Parent/Guardian Signature (Required if student is under 18) Date

OFFICE USE ONLY

Date Received: _____ Amount Paid: _____ GL Code: 4520-_____ Staff Initials: _____

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

Semester: _____ Spring Summer Fall New Student Returning Student