

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

Email: jdburke@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			— Lawara — Island
2. Application Ty	pe (check one)		CANADA
□ Apprenticeship	Program Accelerated (ASAP) (high	l Secondary Apprenticesh gh school students)	
3. Personal infor	mation:		
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 (plea	se include Apartment or PO Box)	City	Province Postal Cod
Primary phone #	Cell #	E-mail address	
Name	ears of age must include the na Relationship to apprentice Drmation: (Please attach a ph	Phone#	Optional for applicants over 18. Cell # transcript for proof of completion.)
			completed
Date expected to g	graduate (for ASAP/high sc	hool students)	
High School Equiva	alency (GED) obtained?	☐ Yes ☐ No	
,	re-employment program (Trade	5 ,	
			n
Note: To receive cre	edit for previous in-school tra	aining, you must supply pr	oof of completion.
5. Previous trade	e employment:		
Business Name	City/Province Start Date	End Date Trade	#of Hours

Note: To receive credit for these hours, you must supply a copy of your Record of Employment or a letter from your employer.

Apprenticeship Application

6. Voluntary Identification - Demographics



Your **voluntary** answers to the below will assist in identifying apprentices within equity-deserving groups for statistical purposes. See below for federal definitions.

Identifying yourself as belonging to an under-represented group may qualify your employer for funding under the Canadian Apprenticeship Service Program (CASP).

1.	Do you identify as a woman?	Yes		_ No		Do not wish t	o disclose
2.	Are you an Indigenous person?	Yes		_ No		Do not wish t	o disclose
3.	Do you identify, by virtue of race	Yes		_ No		Do not wish t	o disclose
	or color to be a visible minority in Canada?						
4.	Do you have a disability?	Yes		_ No		Do not wish t	o disclose
5.	Are you a newcomer to Canada?	Yes		_ No		Do not wish t	o disclose
6.	Do you identify as LGBTQ2+?	Yes		_ No		Do not wish t	o disclose
 2. 	Women Women are participants who self-identify their identity as a man, woman or non-binary person Indigenous: Indigenous individuals are participa	(a person who is	not exclusiv	ely a man	or a womar	n).	
	identify as First Nations (North American Indian Treaty Indians (that is, registered under the Indi Indian band.), Métis and/or Ir	iuk (Inuit), a	nd/or thos	se who repo	rt being Register	red or
3.	Visible minorities						
	Persons who self-identify as being a visible mind than Aboriginal peoples, who are non-Caucasian				es visible mi	norities as "pers	ons, other
4.	Persons with disabilities Persons with disabilities are participants who se Seeing, Hearing, Mobility, Flexibility, Dexterity, The disability must result in a limitation in daily whose disability rarely presents them with some	Pain-related, Lear activities. The pre	ning, Develo	opmental, difficulty a	Mental hea lone is not s	lth-related, and ufficient – indivi	Memory.
5.	Newcomers Newcomers are participants who self-identify as	s having arrived in	n Canada wit	thin the la	st ten vears	and are legally	entitled to
	Trestree in circle participatites with self-facility as	5 VIII 6 IVCU II	. Canada Wii	10	or con yours	arra are regarry	citica to

6. LGBTQ2S+

Persons who self-identify as a member of the LGBTQ2S+ community. The acronym LGBTQ2S+ includes lesbian, gay, bisexual, or another minority sexual identity such as asexual or pansexual, as well as minority gender identity (trans and non-binary identities like genderqueer, gender fluid, pangender or agender).

work in Canada, including permanent residents, Canadian citizens or persons granted refugee status in Canada.

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
- 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 Prosp	ective Apprentic	ce		
2.	Trade				
3.	Date Employm	ent Started			
4.	Business Infor	rmation			
Busin	ess Operating Name	е			
Mailir	ng Address (Please	include PO Box)	City/Town	Province	Postal Code
Prima	ary Phone #	Second	ary Phone #		
Fax#		E-Mail A	Address		
Do y Seal)	ou have a jourr)?	neyperson(s) on	staff who holds	a Certificate of Qualif	ication (Red
□ Y€	es 🗆 No	Name (if applic	able):		
If no Do y		esperson who ha	s a minimum of	7 years experience ir	ı the trade?
□ Ye	es 🗆 No	Name (if applic	able):		
5. S	igning Authorit	y for Employer			
	ve the authority a lication form.	as, or on behalf of	, the employer to	complete this Apprentic	eship
Nam	e	Position	with Employer		
Signa	ature	Date		_	

Apprenticeship Training Agreement

Prince Edward

Toland

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.

	Manager of A	pprenticeship Signature		Date Registered wi Apprenticeship	th Manager of
or Office se Only	111111111111111111111111111111111111111			Registration/Agree Number:	
Witness		Parent/Guardian Signature	Parent/Guardiar	rent/Guardian Name (print) Date	
		18 years of age must have the si		(1 /	
Witness		Apprentice Signature	Apprentice Name (print)		Date
Witness		Employer Signature	Company	Name (print)	Date