

Apprenticeship Application and Agreement

	1-877-978-7233 www.manitoba.ca/tradecareers					
NAME:	TRADE:					
	Office Use Only:					
APPREN	APPRENTICESHIP REGISTRATION# 100 -					
CRM#:						
Applicat	ion Type: (Please select the appropriate box)					
	New Application Change of Trade Change of Employer High School Apprenticeship Program (HSAP)					
Ш	John Deere Technician Program					
	ASSET (FORD - Automotive Student Service Educational Training)					
	ASEP (GENERAL MOTORS -Automotive Service Educational Program)					
Applicat	ion Checklist:					
	Page 1: Complete name in full including proper trade name. (Please refer to http://manitoba.ca/tradecareers > for the correct trade name)					
	Page 2: The Apprentice must complete the application in full.					
	Page 3: The Employer must complete the application in full. If new Designated Trainer, submit application and Work Experience Form (WEF).					
	Page 3: Both Apprentice and Employer must review the Privacy Notice.					
	Page 4: Apprentice and Employer signatures and date.					
	ER enticeship Application and Agreement is registered once approved by the Executive Director or Delegated Authority. marked with an (*) are mandatory.					

Submit the completed application to: APPRENTICESHIP@GOV.MB.CA

Incomplete applications will not be considered and will be returned.

Apprenticeship Manitoba * 100-111 Lombard Avenue, Winnipeg MB R3B 0T4
Ph: 204-945-3337 OR Toll Free: 1-877-978-7233





Apprenticeship Application

PERSONAL INFORMA	ATION (PLEASE PRIN	T CLEARL	Y)				
☐ Mr. ☐ Ms. ☐	Mrs.				Preferred Language:	☐ English	French
*Legal First Name		*Middle Name	*L£	ast Name		* Date o	f Birth (dd/mm/yyyy)
*Mailing Address		*City/Town			*Province	*Postal	Code
*Primary Phone #		Secondary Pho	ne#		*Email Address		
SELF DECLARATION							
Are you eligible to work in COPTIONAL	anada? 🔲 Yes	□ No	Are you	a Manitoba	Resident?	☐ Yes	□ No
Gender: Male	Female		Visible Minority:	□Yes	□No		
Indigenous Ancestry:	☐ First Nations	□Non-9	Status	□Métis	☐ Inuit		
Do you have a disability?	☐Yes	□ No	(if yes ,	submit a Se	elf-Identification for Clients	s Requiring Accon	nmodations Form)
ALTERNATE CONTA	CT PERSON (applicants	under 18 year	rs of age - required;	other applic	ants - optional)		
Contact Parent or Guardian			Relationship to Appr	entice		Primary	Phone #
Mailing Address		City/Town			Province	Postal (Code
NOTE: Beauty Trades I	KGROUND IS MUST include an educ MUST provide a Verificat Les do not require a trans	ion of Enro				scheduled as	sessment.
Unable to Obtain Transc	cript (MUST check off assessm	ent box)			☐ Assessmen	nt Required (Acces	ss Program Trainee)
Level of Education:	☐ High School ☐	College	University		Last Grade Com	npleted:	
Have you attended an accre	edited trade program (pre-em	ployment)?	☐ Yes	□ No			
If yes, in what trade		dates atter	nded	_to	training institution	1	
Have you attended an apprer	nticeship program that you did	not complete ir	n another jurisdiction?	☐ Yes	☐ No		
			La	st level			
If yes, where	in what tra	de	∞	mpleted	dates atte	nded	to
Do you hold a Certificate of C	Qualification in a Trade(s)?	Yes (if yes,	give details below)				
rade Name		Certificate #			Certificate Date	Issuing Pro	ovince/Territory
HIGH SCHOOL APPR	ENTICESHIP PROGRA	AM (HSAP)	ONLY				
MET#			_ Anticipated Grad	uation Date			
School Name		Schoo	ol Division		School Contact		Email Address





Employer Application

BUSINESS INFORMATION			
*Business Name	*Legal Entity Name	*Employer Contact Name	
*Mailing Address	*City/Town	*Province	*Postal Code
*Primary Phone #	*Email Address		
hereby authorize my Supervising Employee Rep	oresentative	in the Supervision Role of	
to be the signing authority for this Apprenticeship	Application on behalf of my business		
IME CREDIT INFORMATION AND V	VAGES (Time Credit is at the discreti	on of the signing employer for non-co	ompulsory trades)
*Apprentice start date in this trade at this busin	ess	*Apprentice wage ra	te
Fime credit for trade related work experience_		*Journeyperson wag	ge rate
Apprentice wage information is located at r	nanitoba.ca/tradecareers within each o	f the Trade Regulations.	
JOURNEYPERSON <u>OR</u> DESIGNATE ne following information <u>must</u> be included. Liss is apprentice or provide a journeyperson list. Experience form (WEF).	t the trade certified journeyperson or desi	gnated trainer employed at this busines se visit the Apprenticeship Manitoba w	ss who is responsible for supervisi rebsite for the application and wo
Name of Journeyperson	Trade	Cert. of Qualification# Issuing Province/	Territory Date issued (dd/mm/yyyy)
# of Journeypersons	# of Currently Registered Apprentices	Journeyperson Address	
Manitoba Electrical License # (electrical trades only)	Expiry Date (dd/mm/yyyy)	Authorization to Practice # (beauty trades only)
OR			
Name of Designated Trainer	Trade	Date Issued (dd/mm/yyyy)	# of Journeypersons
# of Currently registered Apprentices	Designated Trainer Address		

Privacy Notice

The personal information on the Apprentice and Employer Applications is collected for the purpose of registering the Apprenticeship Agreement between the apprentice and the employer. The collection of the information is authorized by The Freedom of Information and Protection of Privacy Act (FIPPA) as it is related directly to and necessary for the Apprenticeship program. The personal information and any personal health information collected is protected by FIPPA and The Personal Health Information Act (PHIA) respectively and can only be used or disclosed for other purposes if you consent or if authorized by those statutes. If you have any questions about the collection of this information please contact Apprenticeship Manitoba at 204-945-3337 or Toll Free in Manitoba at 1-877-978-7233. Apprenticeship Manitoba will collect and use the personal information on these applications for the following:

- To administer and monitor the apprentice's apprenticeship training and ensure compliance with The Apprenticeship and Certification Act and the regulations under
- To verify information submitted on an application so that an Apprenticeship Agreement can be registered.
- To administer your participation in the Apprenticeship program, including the Interprovincial Standards Red Seal Program administered by the Canadian Council of Directors of Apprenticeship
- To plan, research and evaluate programming.
- To assist in the promotion of Manitoba's apprenticeship and certification program.
- To identify persons for the purpose of an honour or award.
- To identify persons for targeted correspondence by mail, email or fax that relates to their trade(s) and/or their involvement in apprenticeship training (ex: surveys, statistics, and consultations).





THE APPRENTICE AGREES TO:

- Pav tuition
- Use financial assistance received from government sources to pay only for education and living costs directly related to apprenticeship training and return any amount not used for these purposes.
- · Complete hours of practical training, technical training and examinations according to The Apprenticeship and Certification Act.
- · Abide by the Apprenticeship Code of Conduct found in the Apprenticeship Technical Training Registration Guide.
- · Notify the Executive Director, in writing, within 15 days if there are name or address changes or you are no longer an employee.

THE EMPLOYER/RECOGNIZED ASSOCIATION AGREES TO:

- · Assign a certified journeyperson or designated trainer to give the apprentice as much practical training as available.
- Supervise the apprentice and ensure that the apprentice's daily work does not begin earlier or end later than the working hours of a supervising journeyperson or designate trainer.
- · Permit the apprentice to attend required technical training and examinations according to The Apprenticeship and Certification Act.
- Pay the apprentice the wages outlined in the trade regulation; the recognized association in a Pool Agreement with Apprenticeship Manitoba is not responsible to pay the apprentice's wages/benefits.
- · Complete required information in the Report of Hours.
- · Notify the Executive Director, in writing, within 15 days if the apprentice is no longer an employee.

THE APPRENTICE AND EMPLOYER/RECOGNIZED ASSOCIATION AGREE TO:

- · Abide by the provisions of The Apprenticeship and Certification Act and its regulations.
- · Ensure that the hours of practical training and technical training required by the specific trade regulation are completed.
- · Discuss the apprentice's development and progress and complete required information in the Report of Hours.
- · Notify each other and the Executive Director, in writing, within 15 days if either person chooses to cancel this Agreement.

CONSENT TO DISCLOSE INFORMATION (Business). I have read the PRIVACY NOTICE and I understand that Apprenticeship Manitoba uses information to:

- · Promote Manitoba's apprenticeship and certification program;
- · Identify businesses or employers for the purpose of an honour or award; and
- · Identify businesses or employers for targeted correspondence by mail, email or fax that relates to their trade(s) and/or their involvement in apprenticeship training
- (ex: regarding surveys, statistics, consultations); and periodically obtain full disclosure of all journeypersons in your employ in order to verify their identities against other applications/agreements submitted to Apprenticeship Manitoba by your organization.

CONSENT TO DISCLOSE INFORMATION (Personal) · I have read the PRIVACY NOTICE and I understand that to administer, monitor and evaluate my apprenticeship training, Apprenticeship Manitoba may need to obtain and provide personal information about me to:

- · My sponsoring employer.
- Other provincial government education branches, schools, school divisions, adult learning centres, and Employment and Social Development Canada (ESDC) to assist in obtaining financial support and to verify educational credentials.
- · Manitoba Family Services and Labour to administer and enforce workplace legislation.
- · Manitoba Finance to administer tax credits and other financial incentives.
- Accredited training providers that provide technical training to me.
- Transport Canada for program audit and/or licensing purposes (trades of Aircraft Maintenance Journeyperson and Gas Turbine Repair and Overhaul only).
- Government officials responsible for apprenticeship or trade certification programs in Canadian provinces and territories to verify my status under the Manitoba Apprenticeship program.
- Canadian Council of Directors of Apprenticeship (CCDA) and Human Resources and Skills Development Canada (ERSDC) 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 Examination Management System (ICEMS) database.
- Groups, organizations or associations for general trade-related correspondence, or to be considered for an honour or award.
- Employers and associations related to awards for which I may be eligible, for the purpose of recognition.
- Alternate contact

I understand that under the authority of the Statistics Act (Canada), Apprenticeship Manitoba shares identifying personal information with Statistics Canada to conduct statistical surveys with individuals. Reports and information produced by Statistics Canada from these surveys do not identify any individual or individuals. I also understand that Apprenticeship Manitoba may share non-identifying bulk information with Statistics Canada and other Canadian provinces and territories to maintain national statistics and records. I authorize Apprenticeship Manitoba and these persons and entities to share such personal information about me as may be necessary for these purposes.

REGISTERING THE TERMS OF THIS AGREEMENT

The information I have given in this Agreement is true, complete and accurate. I understand that failure to give truthful, complete and accurate information may result in refusal of this application or cancellation of the Apprenticeship Agreement.

This Agreement is legal when registered with the Executive Director of Apprenticeship Manitoba. The Executive Director may suspend or cancel this Agreement if the apprentice is not receiving adequate training and supervision.

At the discretion of the Executive Director, an apprentice whose Apprenticeship Agreement is cancelled may not be eligible to be re-registered under a new Apprenticeship Agreement if the terms and conditions above are not respected.

I have read and understand the terms and conditions for the AccessManitoba Privacy Notice at: web22.gov.mb.ca/Mbeso/shared/TermsOfUse and authorize Manitoba to collect and use my personal information for these purposes and to disclose it to the AccessManitoba Participating Programs.

The signature below confirms that I have read, understand and agree with the terms of this agreement. All signatures are required.

Apprentice	*Print Name of Apprentice	*Signature of Apprentice	* Date (dd/mm/yyyy)				
Employer	*Print Name of Employer/Employer Representative	*Signature of Employer/Employer Representative	*Date (dd/mm/yyyy)				
Parent/Guardian (if applicant is a minor)	Print Name of Parent/Guardian	Signature of Parent/Guardian	Date (dd/mm/yyyy)				
igh School Apprenticeship Program (HSAP) Only The signature below confirms that the High School student meets the eligibility requirements for the gh School Apprenticeship Program (HSAP)							
School Contact	Print Name of Contact	Signature of Contact	Date (dd/mm/yyyy)				

