

Sheet Metal Workers Local Union 435

Joint Apprenticeship & Training Committee



6535 Trade Center Drive * Jacksonville, Florida 32254 * Phone (904) 693-1070

APPRENTICESHIP APPLICATION INSTRUCTIONS

Application MUST BE Filled out Completely!!!

Applications and ALL Minimum Requirements are to be hand delivered to the following location:

Sheet Metal Workers' Local Union #435
8374 Devoe St.
Jacksonville, Florida 32220

MINIMUM REQUIREMENTS Include:

Must be at a Minimum Age of 18 years old.

Attach a copy of each of the following documents when submitting your application:

- 1) Birth Certificate
- 2) Driver's License
- 3) Social Security Card
- 4) High School Diploma & Transcript or
- 5) GED and GED Scores
- 6) Military DD-214 (if applicable)

APPLICATION DEADLINE MAY 30, 2025. ALL MINIMUM REQUIREMENTS MUST BE SUBMITTED BY MAY 30, 2025!

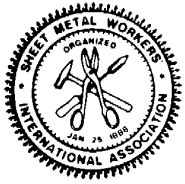
Training Center: (904) 693-1070
Local Union #435: (904) 398-1838

Websites:

<https://www.northfloridasheetmetaljatc.org/> <https://www.northfloridasheetmetal.com/>

Please print and sign the application once you have filled it out completely.

*Drop off location for application is:
Sheet Metal Workers' Local Union Local Union #435
8374 Devoe St. Jacksonville, Florida 32220*



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Application for North Florida Sheet Metal Workers Apprenticeship (APPLICATION MUST BE FILLED OUT COMPLETELY)

1. Name: _____

2. Social Security #: _____

3. Street Address: _____

(City)

(State)

(Zip Code)

4. Phone: _____

5. DOB: _____

6. How long have you lived in this area: _____ Years. _____ Months.

8. Where did you hear about this program? _____

9. Do you have reliable transportation to work and school? _____

If you are a Veteran, please fill in the following information on numbers 10 – 14:

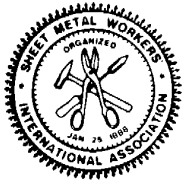
10. Branch of Service: _____

11. Service Rating: _____

12. Length of Service: _____

13. Type of Discharge: _____

14. Schools attended in service: _____



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15. MUST LIST 3 PERSONAL REFERENCES BELOW: (PLEASE DO NOT LIST ANY RELATIVES, THIS MUST BE COMPLETED)

Name: _____

Address: _____

 (City) (State) (Zip Code)

Phone: _____

Name: _____

Address: _____

 (City) (State) (Zip Code)

Phone: _____

Name: _____

Address: _____

 (City) (State) (Zip Code)

Phone: _____

16. WORK EXPERIENCE: (List your 2 previous employers)

Company Name: _____

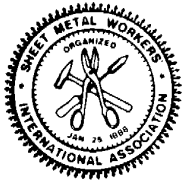
Type of business and work you performed: _____

 (Start Date) (End Date)

Company Name: _____

Type of business and work you performed: _____

 (Start Date) (End Date)



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17. EDUCATION: (Fill in all that applies to you)

High School:

Name: _____

State: _____

Attended: (Start Date) _____ (End Date) _____

Did you graduate? _____ (Year) _____

Trade School:

Name: _____

State: _____

Attended: (Start Date) _____ (End Date) _____

Did you graduate? _____ (Year) _____

College:

Name: _____

State: _____

Attended: (Start Date) _____ (End Date) _____

Did you graduate? _____ (Year) _____

Other:

Name: _____

State: _____

Attended: (Start Date) _____ (End Date) _____

Did you graduate? _____ (Year) _____

GENERAL INFORMATION

18. What subjects interested you most in school? _____

19. Are you prepared to attend school on your own time? _____



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20. Are you willing to attend any meeting the Committee requests? _____

21. Do you realize it is impossible to guarantee full employment? _____

22. Do you realize that pay increases depend on work & school progress? _____

23. Have you ever applied for Apprenticeship? _____ Where? _____
24. Why would you like to serve an Apprenticeship? _____

25. If accepted, are you willing to take a physical? _____

Any false statement made on this application will result in immediate disqualification.

If my application is accepted, I agree to comply with all rules and regulations adopted by the North Florida Sheet Metal Workers' Joint Apprenticeship & Training Committee. To the best of my knowledge, all statements made by me are true and correct.

Signature: _____

Date: