



Office Telephone: 301-724-JATC Ed Crowe, Training Director - Cell: 301-268-9228 wmjatc@atlanticbbn.net

TRADE COMENT

YOUR APPLICATION NO. IS

## **Apprenticeship Application EEOC Supplemental Information Form**

This apprenticeship sponsor is committed to equal opportunity for all applicants. The recruitment, selection, employment and training of apprentices during their apprenticeship, shall be without discrimination because of race, color, religion, national origin, or sex. The applicant must be at least 18 years of age to meet minimum qualifications. The JATC does not, and will not, discriminate against a qualified individual with a disability because of the disability of such individual. We respectfully request that you return this form along with your completed application form for apprenticeship.

## - PLEASE COMPLETE THE FOLLOWING -

The information voluntarily provided below is simply for Equal Employment Opportunity Commission (EEOC) purposes. This information will assist us in our efforts to provide accurate information in compliance with EEOC regulations and requirements.

Social Security Numbe	r:			
Date of Birth:		,,		
	month	day	year	
Sex: Female	Male			
Race: CHECK ONLY ONE	2	Ethr	nic Group: CHECK ONLY ONE	
American Indian of	r Alaskan Native		Hispanic Origin	
Asian or Pacific Islander			Not of Hispanic Origin	
Black				
U White				
How did you become a	ware of this appr	enticeship oppo	rtunity?	
U Word-of-Mouth		utreach Organiz	-	
$\Box$ TV	🗖 R	adio		
Career Day	🗖 N	ewspaper (nam	ne of paper)	
Dested Announcem				
Guidance Counselo				

This form will not become part of your personal file. It will be maintained in a separate file, used only for EEOC reporting purposes.