REQUEST FOR APPRENTICE VERIFICATION

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| To: | Governor’s Office of Workforce Innovation  Nevada State Apprenticeship Council  555 E. Washington Ave., Suite 4900  Las Vegas, NV 89101  (702) 486-8080  **When completed, email to:**  **Andres Feijoo** [**ajfeijoo@gov.nv.gov**](mailto:ajfeijoo@gov.nv.gov) | Requesting  Contractor/Org: |  | | |
| Requested  By: |  | | |
| Phone: |  | | |
| Email  Address: |  | | |
| Date Requested: | |  |

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| **APPRENTICE NAME** | **Rapids**  **ID #** | **CRAFT** | **PROGRAM ADMINISTRATOR**  (for example, Local 12) | **START DATE**  **IN PRGM** | **CURRENT**  **STATUS\*** |
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| **For Apprenticeship Council Use Only** | | | | | | | | | | |
| Craft: |  | Ratio: |  | Apprentice per |  | Journeymen; thereafter |  | Apprentice per |  | Journeymen |
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| Verified by: |  | , Office of Workforce Innovation. | Date: |  |

\*Status Codes: IN= Indentured/Registered into program; CAN= Canceled from program; SU= Suspended from training; COM= Completed Training/Graduated;

REIN= Indentured after cancellation; RI= Reinstated after suspension; NF= Not Found

NOTE: Journeymen wages must be paid for time worked during canceled or suspended time periods or when required ratios are not met.