

## Screen Shots for Form 671 Section II – Apprentice Registration

Welcome, SP50 ( Logoff ) | Help | OMB No.1205-0223 Expires: 01-31-2012

**RAPIDS**  
Registered Apprenticeship Partners Information Data System

Home Programs **Apprentices** Certifications

Register Complete Cancel

Search: Apprentices For: Type your text here after selection Go Advanced Search

**Apprentices**

Program: ELECTRIC (MI0090) Go

Occupation: All Occupations..... Go

Filter Reset

List Apprentices that are  Active  Inactive  Pending Registration  Incomplete Registration  Suspended


Rows 1 to 19 of 19

Number	Id	Name	Program Id	Occupation	Date Registered	Preview	Status
1	MI10N0;	, KIETH	MI0090	ELECTRICIAN	02/22/2010		Registered <sup>1</sup>
2	DC11N001062	APPRENTICE NEW	MI0090;	ELECTRICIAN	09/29/2011		Registered

**OMB No. 1205-0223 ETA form 671, Apprentice Registration Section II Expires: 01-31-2012**

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Figure 1. Apprentice Registration Public Burden Statement



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**RAPIDS**  
Registered Apprenticeship Partners Information Data System

Home Programs **Apprentices** Reviews Report Certifications

Register Transfer Complete Cancel Approve

Search: Apprentices For:   [Advanced Search](#)

Select an Occupation

1 Program & Occupation	2 Name & Address	3 Ethnicity, Race, Education	4 RTI Information	5 Confirm & Sign
Programs & Occupation				
Choose Program: * <input type="text" value="AAAAA (MI001113009)"/>				
Choose Occupation: * <input type="text" value="0703-AGRICULTURAL SERVICE WORKER"/>				

\* denotes required fields

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Figure 2. Form 671 Section II Part B (partial) Program & Occupation



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Register Transfer Complete Cancel Approve

Search: Apprentices For: Type your text here after selection Go Advanced Search

1 Program & Occupation	2 Name & Address	3 Ethnicity, Race, Education	4 RTI Information	5 Confirm & Sign
Apprentice Name Information				
Last Name:*				
First Name:*				
Middle Name:				
SSN: <input type="text"/> Not Provided <input type="checkbox"/>				
Suffix: Choose a suffix...				
Address Information				
Address:*				
City:*				
State:*				
Zipcode:*				
Phone:				
E-mail Address:*				
Date of Birth:*				
Gender:*				

\* denotes required fields

Next

Figure 3. Form 671 Section II Part A (partial) Apprentice Name & Address



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- Transfer
- Complete
- Cancel
- Approve


Search:  For:   [Advanced Search](#)

Last Name: ALASTNAME, First Name: AFIRSTNAME ID: MI11N024517

1 Program & Occupation	2 Name & Address	3 Ethnicity, Race, Education	4 RTI Information	5 Confirm & Sign
Ethnicity, Race, Veteran Status, Education				
Ethnic Group (mark one): <input type="radio"/> Hispanic or Latino <input type="radio"/> Not Hispanic or Latino <input checked="" type="radio"/> Not Provided				
Race: <input type="radio"/> Am. Indian or Alaska native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or other Pacific Islander <input type="radio"/> White <input checked="" type="radio"/> Not Provided				
Veteran Status (Mark one): * <input type="radio"/> Non Veteran <input type="radio"/> Veteran				
Education Level (Mark one): <input type="radio"/> 8th grade or less <input type="radio"/> 9th to 12th grade <input type="radio"/> GED <input type="radio"/> High School Graduate or Greater <input type="radio"/> Post Secondary or Technical Training				
Career Linkage				
<input type="checkbox"/> None	<input type="checkbox"/> Adult	<input type="checkbox"/> Youth	<input type="checkbox"/> HUD/STEP-UP	
<input type="checkbox"/> School-to-Registered-Apprenticeship	<input type="checkbox"/> Incumbent Worker	<input type="checkbox"/> Job Corps	<input type="checkbox"/> Dislocated Worker	
<input type="checkbox"/> Military	<input type="checkbox"/> Direct Entry:	<input type="text"/>		

\* denotes required fields

Figure 4. Form 671 Section II Part A (continued) Ethnicity, Race, Education



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Search:  For:   [Advanced Search](#)

Last Name: ALASTNAME, First Name: AFIRSTNAME ID: MI11N024517

<b>1</b> Program & Occupation	<b>2</b> Name & Address	<b>3</b> Ethnicity, Race, Education	<b>4</b> RTI Information	<b>5</b> Confirm & Sign
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Related Training Information

Related Training Instruction Provider:

\* denotes required fields

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Figure 5. Form 671 Section II Part B (continued) RTI Information (first page)



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Search:  For:   [Advanced Search](#)

Last Name: ALASTNAME, First Name: AFIRSTNAME ID: MI11N024517

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Program & Occupation	Name & Address	Ethnicity, Race, Education	RTI Information	Confirm & Sign

Related Training Information

Related Training Instruction Provider: Lansing Community College

Total Length of Instruction: 200 Hours

Are Wages Paid During RTI?: Wages not paid

Hours Instruction Provided? During Work Hours

Term: 4000 Hours

Probationary Period: 200 Hours

Credit for Previous Experience: \*   Hours  Months  Years

Credit for Previous RTI:

Date Apprenticeship Begins: \*   (Ex. MM/DD/YYYY)

Wages

Prior Apprenticeship Wages: \* \$   Hourly  Monthly  Annually

Apprentice's Entry Wages: \* \$   Hourly  Monthly  Annually

Journeyworker's Wages: \* \$   Hourly  Monthly  Annually

Wage Schedule

Period	1	2	3	4	5	6	7	8	9	10
	1000	1000	1000	1000	0	0	0	0	0	0
	50.00%	70.00%	80.00%	90.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

\* denotes required fields

Figure 6. Form 671 Section II Part B (continued) RTI Information/Wages/Wage Schedule (second page)

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Search: Apprentices For: Type your text here after selection [Go](#) [Advanced Search](#)

### Apprentice Registration

Last Name: ALASTNAME
First Name: AFIRSTNAME
ID: M11N024517

1 Program & Occupation
2 Name & Address
3 Ethnicity, Race, Education
4 RTI Information
5 Confirm & Sign

Program & Occupation

AAAAA

Sponsor: 123 THUS STREET  
HOME TOWN, MI 11111

Sponsor Program No: MI001113009

Trade/Occupation: AGRICULTURAL SERVICE WORKER

Occupation Code: 0703

Term: 4000 Hours

Probationary Period: 200 Hours [Update](#)

Name and Address of Sponsor Designee to Receive Complaints(if applicable)

Designee: No Designee Information for this Program

Name Information

Last Name: ALASTNAME

First Name: AFIRSTNAME

Middle Name:

SSN: Not Provided

Apprentice ID: M11N024517

Address Information

Address: 10 MY ST

City: YOUR TOWN

State: MI

Zip Code: 11111

Phone: 111-222-3333

E-mail: JOHN@DOE.COM

Date of Birth: 11/22/1980

Gender: Male [Update](#)

Ethnicity, Race, Veteran Status, Education

Ethnic Group: Non-Hispanic

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Race: White

Veteran Status: Non-Veteran

Education Level: High School or Greater

Career Linkage

None [Update](#)

Related Training Information

Related Training Instruction Provider: Lansing Community College

Total Length of Instruction: 4000 Hours/Year

Are Wages Paid During Instruction? Wages not paid

Hours Instruction Provided: During Work Hours

Term Length: 4000 Hours

Probationary Period: 200 Hours

Credit for Previous Experience: 0 Hours

Credit for Previous RTI:

Term Remaining: 4000 Hours

Date Apprenticeship Begins: 12/20/2011

Wages

Prior Apprenticeship Wages: 0.00 /Hour

Apprentice's Entry Wages: 7.40 /Hour

Journeyworker's Wages: 10.00 /Hour [Update](#)

Wage Schedule

Period	1	2	3	4	5	6	7	8	9	10
	1000	1000	1000	1000	0	0	0	0	0	0
	50.00%	70.00%	80.00%	90.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Current Status Information

Status: Incomplete Registration

Status Last Updated: 12/20/2011

Electronic Signature

Sign this registration by clicking the box below. By signing here you are acknowledging that the information you have entered is accurate to the best of your knowledge.

GLENN BIVINS - MI001

Electronic Signature \*

Click the button below to complete this registration.

Save & Complete Registration Request
Delete
Quit

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Figure 7. Form 671 Section II Part B (continued) Sponsor/ATR Electronic Signature full page

<b>Current Status Information</b>	
<b>Status:</b> Incomplete Registration	
<b>Status Last Updated:</b> 12/20/2011	

<b>Electronic Signature</b>	
Sign this registration by clicking the box below. By signing here you are acknowledging that the information you have entered is accurate to the best of your knowledge.	
GLENN BIVINS - MI001	
<input type="checkbox"/> <b>Electronic Signature *</b>	

*Click the button below to complete this registration.*

Save & Complete Registration Request	Delete	Quit
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Figure 8. Form 671 Section II Part B (continued) Sponsor/ATR Electronic Signature partial page