



U.S. Department of Labor
Employment and Training Administration
Office of Apprenticeship

OMB Approval No. 1205-0512
Expiration Date: XX/XX/XX

Registered Apprenticeship-College Consortium (RACC)
Application for Registered Apprenticeship Sponsor Membership

Registered Apprenticeship Sponsor Members of the RACC may be one of the following. Please check the appropriate category.

National sponsors including all training centers or
 National sponsors with multiple training centers but not all centers

Regional sponsors including all training centers or
 Regional sponsors with multiple training centers but not all centers

(If you are applying for membership for more than one site, please provide the contact information for the site as well as the information for the community college with which it has an articulation agreement.)

Sponsor with a single site.

Point of Contact: Name _____

Title _____

Name of Sponsor _____

Address (street) _____

City _____ State _____ Zip code _____

Website Address _____ Phone _____

For national sponsors,

Do you have a national articulation agreement with a two-year post-secondary institution: yes _____ no _____

With four-year post-secondary institution: yes _____ no _____

Please list each training center and each two- or four-year post-secondary institution. (Additional fields are provided if the national applicant has more than one local training center and if they articulate the apprenticeship completion to a two- or four-year post-secondary institution.)

Point of Contact at Local Training Center _____

Name of Training Center _____

Address of Training Center _____

Street, City, State, Zip _____

Phone Number _____

Website Address (if different from national ebsite) _____

Point of Contact at two- or four-year post-secondary institution

Name of Institution

Address of Institution

Phone

Website Address

How many credits do you articulate to college credit for completing a Registered Apprenticeship certificate?

Do you articulate any credentials or industry certificates towards college credit? Yes _____
No _____

If yes, what credentials or certificates and how much credit:

Name of entity which conducted a third party assessment of your Registered Apprenticeship program to determine the quality, rigor and determination of credit value (American Council on Education, college, etc.)

Name of Third Party Validator

Name

Address (Street)

City _____ State _____ Zip _____

Phone

How many credits do they recommend the Registered Apprenticeship program is worth?

POINTS-OF-CONTACT

RACC Institutional Representative

This policy-level administrator is responsible for implementing and overseeing institution's compliance with the RACC Principles and Criteria:

Name

Address (Street)

City _____ State _____ Zip _____

Phone _____

E-mail _____

(The RACC framework will be on the Pathways to Success homepage.)

AFFIRMATION OF COMPLIANCE WITH RACC PRINCIPLES AND CRITERIA

This application has been reviewed and authorized by the sponsor's president or CEO. The sponsor agrees that its designated subdivisions will comply with the RACC Principles and Criteria.

Electronic Signature of President, CEO, or other senior administrator authorized by President or CEO to make this commitment

Date _____

Name _____

Position _____

Phone _____

E-mail _____

Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employment and Training Administration, Office of Apprenticeship, Room N-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0512).
