HOME / APPLICATION APPRENTICESHIP AMBASSADOR

CAREER SEEKERS *

APPRENTICESHIP AMBASSADOR

Application for Apprenticeship Ambassador

EMPLOYERS ▼

Thank you for your interest in becoming an Apprenticeship Ambassador. If selected, your company/organization will join a national movement to expand, diversify, modernize, and strengthen Registered Apprenticeships across America.

EDUCATORS *

RESOURCES *

The goal of the Apprenticeship Ambassador Initiative is to create a network of employers, labor organizations, industry associations, sponsors, educators, workforce intermediaries, apprentices, minority-serving organizations, and other stakeholders to serve as champions for their industry or area of expertise.

| Contact Information | |
|---|---|
| Name of Applicant (Individual): | 1 |
| Name of Organization that Applicant represents or | |
| serves: Title: | |
| ricie. | |
| Phone Number: | |
| Email Address: | |
| Address: | |
| | |
| | |
| | |
| Geographic scope where Organization works or | |
| serves: | ☐ National Regional |
| | State |
| | Local |
| If regional, state, or local, please specify the area: | |
| Industry/ies: | Agriculture, Forestry, Fishing, and Hunting |
| | Mining, Quarrying, and Oil and Gas Extraction Utilities Construction |
| | Construction |
| Registered Apprenticeshi | p Program (RAP) |
| Experience | |
| Number of years of RAP experience: | |
| Brief Description of RAP experience: | |
| | |
| | |
| | |
| Please select one or more that apply and the corresp | onding length of experience. Note that a minimum of |
| one year of experience with RAPs is required. | J J |
| RAP sponsor | |
| RAP Related Technical Instruction provider RAP Intermediary | |
| Sponsor of Pre-Apprenticeship program leading | into a RAP program |
| U.S. Department of Labor (DOL) Office of Appren | ticeship contractor |
| DOL Office of Apprenticeship grantee | |
| Previous ApprenticeshipUSA LEADER Previous national Advisory Committee on Apprenticeship member | |
| Other RAP experience (e.g. Workforce profession | |
| RAP Annual Commitment | |
| | |
| Please select one or more Engagement Activities that Ambassador over the next year along with the specif | t you would commit to as an Apprenticeship ic commitment associated with those activities so that |
| the DOL Office of Apprenticeship can recognize you | for your efforts: |
| Promotion: Host meetings and/or present at conferences to increase awareness of Registered Apprenticeship Outreach and Recruitment: Conduct outreach and recruitment efforts aimed at increasing opportunities | |
| | |
| Resources: Develop Registered Apprenticeship re Training: Conduct training sessions on the value | |
| Research/Best Practices: Develop and share research | arch, lessons learned, and best practices to help scale |
| Registered Apprenticeship. Develop Pegistered Apprenticeship Programs: D | evelop programs in high demand industries and/or |
| occupations. | |
| Launch Registered Apprenticeship Initiatives: Launch new, innovative Registered Apprenticeship initiatives. | |
| Apprentices: Increase the number of apprentic | |
| Apprenticeship programs. (Specify number of | new apprentices to be nired and occupations.) |
| Outreach Activities | |
| Optional Menu of Outreach Activities | |
| Core Expectations for Apprenticeship Ambassadors (| Minimum Commitment - 1 Year) |
| (optional) | |
| Willing to participate in National Apprenticeship | week |
| Willing to conduct outreach to businesses and engeographic location | mployers within your industry, supply chain, or |
| Willing to participate in national kick-off event in | |
| Willing to participate in up to 2 regional convenir Willing to share best practices in Registered App | |
| Willing to share best practices in Registered Apprenticeship with DOL Willing to host organizational open houses for prospective apprentices, educational, training or other | |
| stakeholders | |
| Willing to recruit additional Apprenticeship Amb Willing to author blogs, op-eds or appear in video | |
| Willing to allow DOL to display organizational log | o on DOL websites and promotional materials (please |
| sign below) Other - list specifics | |
| | |
| Signature of Authorizing Official Agreeir Ambassador (optional) | ig to Be an Apprenticeship |
| Name | |
| | |
| Title | |
| | |
| | |
| Signature of Authorizing Official Allowin | g DOL to display Company Logo (optional) |
| | |
| Name | |
| Title | |
| Title | |
| | |
| | |
| I agree By submitting this form, you are agreeing to not eng | age in lobbying for apprenticeship legislation or |
| initiatives on behalf of the DOL. Additionally, being a | |
| ndividual or organization to any funding from DOL. | |
| | |

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OMB number: 1225-0059

SUBMIT

Expiration Date: 10/31/23



U.S. DEPARTMENT OF LABOR 200 Constitution Ave NW Washington, DC 20210 Contact Us

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Diversity-Inclusion Resources

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Office of Inspector General

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