



TOOLS

Youth/Pre-Apprenticeship Application

References

List the names of high school teachers we may contact for references:

a. _____

b. _____

c. _____

Transportation

What means of transportation will you use to get to and from your youth/pre-apprenticeship?

Personal vehicle Parent driving Parent's vehicle

Other (explain) _____

Parent/Guardian Information

Parent/Guardian Name: _____

Address (if different from student): _____

City: _____ State: _____ ZIP: _____

Phone: () _____ Email: _____

What is the best time to contact you at home? Day **or** Evening; Time: _____

I approve of the above transportation plan that will enable my son/daughter to participate in the internship program.

Parent/Guardian Signature: _____ Date: _____