

## PRE-APPRENTICESHIP TRAINING APPLICATION FORM

### Contact Information

Full Name						
Address						
City, State, Zip Code						
Cell/Email	Cell:				Email:	
Date of Birth/Gender	DOB:				Gender:	
Ethnicity/Race (Check Box)	White (not of Hispanic origin)	Black	Hispanic	Asian	Other	
Do you have a current IL Driver's License?	YES	NO				

### Education Information

Highest Level of Education	HS	GED	Some College	Assoc Degree	Bachelor Degree	Grad Degree
Have you participated in a HACIA training before?	YES	NO				
Interested in which location?	Chicago	DuPage Co.	Lake Co.			
How did you hear about the program?						
Have you worked in the construction industry?	YES	NO				
Are you able to read and write English?	YES	NO				
	Comment:					

### Employment Information

Are you currently working?	YES	NO
Position/Years on the Job		
Previous job experience		
Why do you want to participate in this program?		
Is there a specific trade you are interested in? Please identify.		

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_