



STATE OF NEVADA
Nevada State Apprenticeship Council
5910 Form

Program Name Nevada Help Desk RAPIDS Program # 0127CB
Address 2620 Regatta Drive, Suite #102 City Las Vegas State/Zip NV 89128 Telephone 702-919-4357
Contact Person Duana Malone Title Executive Director Email Address drmalone@nevadahelpdesk.com
Type of Program ☐ Time-based ☒ Competency-based ☐ Hybrid EIN #83-3755042 NAICS Code 541990

Type of Action: (Check One) A. <input type="checkbox"/> Wage Increase B. <input type="checkbox"/> Revision of Standards C. <input type="checkbox"/> New Occupation D. <input checked="" type="checkbox"/> New Program	Type of Program: (Check One) A. <input type="checkbox"/> Individual Union B. <input type="checkbox"/> Individual Non-Union C. <input type="checkbox"/> Group Union D. <input checked="" type="checkbox"/> Group Non-Union	Journey Workers (JW) A. No. of Females 1 B. No. of Minorities 1 C. No. JW 1 D. No. of Employers 1	Pay Period (Check One) <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi Monthly Pay Increases (Months) 3 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 12 <input type="checkbox"/> Other <input type="checkbox"/>
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TRADE INFORMATION

Occupation Name and O*NET CODE (use separate form for each occupation)	Term (OJT hours)	RTI (Classroom hours)	# Of Journey workers	# Of Apprentices in Training	Journey worker Hourly Rate	Days per Week
Digital Video Editor	2,000	150	1	1	\$25.50	5

HOURLY APPRENTICE WAGES BY PERIOD (Excluding Benefits) Top Line Dollar Amounts, Bottom Line Percentages

Occupation Name and O*NET CODE	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	10TH
Digital Video Editor	\$22.52	\$24.12	\$25.50	\$	\$	\$	\$	\$	\$	\$
	88%	95%	100%	%	%	%	%	%	%	%
Fringe Benefits (\$ or %)										

The Sponsor / Program Coordinator certifies and assures that it will utilize qualified training personnel in the delivery of the related instruction, such as subject matter experts (e.g., journeymen) who are recognized within an industry as having expertise in a specific occupation, and who also have training in teaching techniques and adult learning styles, which may occur before or after the apprenticeship instructor has started to provide the related technical instruction. Further, the Sponsor / Program Coordinator certifies the information above is true and correct.

8/21/21
Date

Signature of Sponsor / Program Coordinator

DO NOT WRITE BELOW THIS LINE

Received By:

State Apprenticeship Director

Date