



Program Name Northern Nevada IEC RAPIDS Program # _____

Address 3370 Executive Pointe Way, Ste 42 City Carson City State/Zip NV 89706 Telephone (775) 885-0333

Contact Person Jennifer Estrada Title Executive Director Email Address director@nnvec.org

Type of Program Time-based Competency-based Hybrid EIN # _____ NAICS Code _____

Type of Action: (Check One) A. <input checked="" type="checkbox"/> Wage Increase B. <input type="checkbox"/> Revision of Standards C. <input type="checkbox"/> New Occupation D. <input 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 _____ B. No. of Minorities _____ C. No. JW <u>15</u> D. No. of Employers <u>5</u>	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 type="checkbox"/> 12 <input type="checkbox"/> Other <input type="checkbox"/>
---	---	--	---

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
Electrician 47-2111.00	8000	576		15	\$34.00	5

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

Occupation Name and O*NET CODE	1 ST	2 ND	3 RD	4 TH	5 TH	6 TH	7 TH	8 TH	9 TH	10 TH
	\$ 17.00	\$ 25.50	\$ 26.35	\$ 27.20	\$ 28.05	\$ 28.90	\$ 29.75	\$ 30.60	\$	\$
	50 %	55 %	60 %	65 %	70 %	75 %	80 %	85 %	%	%
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.

3-16-2023

Date



Signature of Sponsor

DO NOT WRITE BELOW THIS LINE

Received By: _____

State Apprenticeship Director

Date