



Program Name CALV Professional Cook Apprenticeship Program # _____

Address 710 W Lake Mead Blvd City N Las Vegas State/Zip Nevada 89030 Telephone 702-924-2146

Contact Person Ana Puljic Title Executive Director Type of Program: Competency Based NAICS Code 611710

EIN # 88-029-8779 Email Address: apuljic@theculinaryacademy.org

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 checked="" type="checkbox"/> Individual Non-Union C. <input type="checkbox"/> Group Union D. <input type="checkbox"/> Group Non-Union E. <input type="checkbox"/> If Union Bargaining Unit	Journey Workers (JW) A. No. of Females <u>3</u> B. No. of Minorities <u>4</u> C. No. JW <u>10</u> D. No. of Employers <u>1</u>	Pay Period (Circle 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 (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
Professional Cook	2000	144	10	5+	\$18.00	5

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

Occupation	1ST	2ND	3RD	4TH	5TH	6TH	7TH	8TH	9TH	10TH
Professional Cook	\$14.50	\$15.00	\$	\$	\$	\$	\$	\$	\$	\$
	%	%	%	%	%	%	%	%	%	%
Fringe Benefits (\$ or %)	\$0	\$ 6.58								

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., journeyworkers) 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.

3/15/21
Date

Ana Puljic
Signature of Sponsor / Program Coordinator

DO NOT WRITE BELOW THIS LINE

Received By: _____ Date _____
State Apprenticeship Director