

Appendix E

EMPLOYER ACCEPTANCE AGREEMENT

ADOPTED BY

*Board of Regents,
Nevada System of Higher Education*

**REGISTERED AS PART OF THE NATIONAL APPRENTICESHIP ACT IN ACCORDANCE
WITH THE BASIC STANDARDS OF APPRENTICESHIP ESTABLISHED BY THE US
DEPARTMENT OF LABOR, THE OFFICE OF WORKFORCE INNOVATION, AND THE
NEVADA STATE APPRENTICESHIP COUNCIL**

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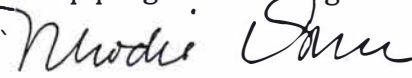
APPENDIX E

EMPLOYER ACCEPTANCE AGREEMENT

The undersigned employer hereby subscribes to the provisions of the Apprenticeship Standards formulated and registered by **Board of Regents, Nevada System of Higher Education** , and agrees to carry out the intent and purpose of said Standards and to abide by the rules and decisions of the Sponsor established under these Apprenticeship Standards. We have been furnished a copy of the Standards and have read and understood them, and request certification to train apprentices under the provisions of these Standards, with all attendant rights and benefits thereof. Nothing in this agreement or the Standards shall construe a right of continued employment by the apprentice, nor shall it be interpreted as being inconsistent with existing or subsequent employer policies contained in the employee company manual or policies provided to the apprentice. The Standards and associated Appendices are also modified for this employer as specified in the employer's modifications listed below.

On-the-job, the apprentice is hereby guaranteed assignment to a skilled and journeyworker/fully-competent worker and is guaranteed that the work assigned to the apprentice will be rotated so as to ensure training in all phases of work and approved ratio will be adhered to. This employer acceptance agreement will remain in effect until cancelled voluntarily or revoked by the Sponsor or Registration Agency. This form must be signed and returned to the Sponsor and the Registration Agency in turn for the apprenticeship program to be registered and becomes effective.

Signed:



Melodie Osborn, Chief Nurse and Quality Officer, Health Services Division

Name/Title

Date:

12/17/2020

Name of Company: Renown Health
Address: 1155 Mill St - Z3
City/State/Zip Code: Reno, NV 89502
Contact: Brittany Brown
Phone Number: 775-982-4689
Email: bbrown@renown.org

Disposition:

Original - Program Sponsor
Copies - Employer and Registration Agency

Reviewed and approved by: Board of Regents, Nevada System of Higher Education.



Date: 1/4/2021

Signature of Sponsor (designee)
Nevada System of Higher Education

**EMPLOYER MODIFICATIONS TO
STANDARDS OF APPRENTICESHIP AND APPENDICES**

Standards of Apprenticeship

SECTION III - AFFIRMATIVE ACTION PLAN

Renown _____ **will** be employing five or more apprentices.

SECTION V - SELECTION OF APPRENTICES

Renown _____ **will** be employing five or more apprentices.

SECTION XIV - RELATED INSTRUCTION

Apprentices **will** be paid for hours spent attending related instruction classes during non-work hours.

Appendix A1 - Work Process Schedule and Related Instruction Outline

4. APPRENTICE WAGE SCHEDULE:

The minimum starting wage scale for an apprentice is \$ 13.00 per hour.
The minimum starting wage scale for a journeyworker/fully-competent worker is \$ 16.73 per hour.

Appendix B - Apprenticeship Agreement

No Changes.

Appendix C - Affirmative Action Plan

Pending.

Appendix D - Qualifications and Selection Procedures

Pending.