## **APPRENTICE REGISTRATION APPLICATION**

(REV 11/19)				
	D INSTRUCTIONS CAR	REFULLY BEFORE CO	OMPLETING THIS FOR	M
<ul> <li>PRINT ALL INFORMATION</li> <li>ALL BLOCKS MUST BE COM</li> </ul>	PLETED OR ENROLLMENT	CAN NOT BE PROCES	SSED	
PRINT NAME Last	First Middle			RATE/RANK (i.e, AT3, Cpl)
COMMAND				DATE OF BIRTH (MMDDYY)
APPRENTICEABLE TRADE (FULL TITLE)				RAPIDS CODE OF TRADE
DOD ID NUMBER (	EDIPI)			
<ul> <li>U.S. Navy</li> <li>U.S. Marine Corps</li> <li>U.S. Coast Guard</li> <li>U.S. Army</li> <li>U.S. Air Force</li> </ul>	EDUCATION GED High School G Associate Deg Bachelor Deg Master Degre Other	ree l	TYPE OF TRADE Time Based Competency Base	ed
		AVE COMPLETED T		
<ul> <li>Requirements that are re</li> <li>I understand that USMAR</li> </ul>	ocess Schedule for the tra equired for this trade. P is a voluntary program a	and I agree to abide b	y program requirements	
Email Address (check which one Military/Government: Home/Personal: 	erred method) Command		Phone Number: (che Work: (commercial) (DSN)	eck which one is primary)
er the authority of Title 5 USC 301, info	PRIV	ACY ACT STATEME		

Under the authority of Title 5 USC 301, information regarding your military or other DOD status is requested on this form in order to process this form. The information will also be used to process related correspondence and to construct and maintain an official and continuing record of Apprenticeship Program participation. The Apprenticeship Participation record will not be divulged, without prior written authorization, to anyone other than those within DOD or the Department of Labor for official use in determining your status within the Apprenticeship Program. Completion of this form is voluntary; however, failure to complete the form will result in an inability to process this form.