



CALIFORNIA AMERICAN FIRE SPRINKLER ASSOCIATION

SEND COMPLETED APPLICATION TO: CAFSA UAC—1408 W Main St. Ripon, Ca 95366

or, email to: info@cafsa.org

Date: _____

Name: _____ Phone: _____

Address: _____ County: _____

Present Employer: _____ How long with: _____

Are you a US Citizen: _____ If not is your alien resident status documented: _____

Have you had any construction experience? If so, please explain: _____

What is your educational background, please circle one of the following?

- | | | |
|----------------------------|--------------------------|------------|
| 1. 6 to 8 years of school | 3. GED Certificate | 5. College |
| 2. 9 to 12 years of school | 4. A High School Diploma | |

What other trades are you currently seeking employment in? _____

When will you be available for work as an apprentice? _____

Please give us your phone number and indicate what time of day is best to contact you: _____

The apprenticeship committee requests that you voluntarily indicate your ethnic group, race and sex in order for us to track our affirmative action success in attracting women and minorities to the fire sprinkler Industry.

Ethnic Group (check one) a) Hispanic or Latino b) Not Hispanic or Latino

Race (circle one or more) a) Am. Indian b) Asian c) Black d) Pacific Islander

e) White Sex a) Male b) Female

Age: _____ Date of Birth: _____

Signature: _____

(please sign to verify your Date of Birth)

Thank you for taking the time to fill out this application. Please send to the address above. The CAFSA Unilateral Training Committee will provide your name to participating contractors in order to alert them to your desire to train as a Fire Sprinkler Apprentice. Filling out this application does not guarantee that a position will be open.