

**EQUAL EMPLOYMENT OPPORTUNITY  
IN APPRENTICESHIP TRAINING REGULATIONS  
PART 600.12 - COMPLAINT PROCEDURE  
EFFECTIVE AS AMENDED DECEMBER 19, 1986**

**(A) Filing**

- (1) Any apprentice or applicant for apprenticeship who believes that he or she had been discriminated against on the basis of race, color, religion, national origin, age, sex, disability, or marital status with regard to apprenticeship or that the equal opportunity standards with respect to his or her selection have not been followed in the operation of an apprenticeship program may, personally or through an authorized representative, file a complaint with the State Division of Human Rights, or at the apprentice's or applicant's election, with a private review body established pursuant to paragraph (3) of this subdivision. The complaint shall be in writing and shall be signed by the complainant. It must include the name, address and telephone number of the person allegedly discriminated against, the program sponsor involved, and a brief description of the circumstances of the failure to apply the equal opportunity standards provided for in this Part.
- (2) The complaint must be filed not later than one year from the date of the alleged discrimination or specified failure to follow equal opportunity standards; and, in the case of complaints filed directly with review bodies designated by program sponsors to review such complaints, any referral of such complaint by the complainant to the State Division of Human Rights must occur within the time limitation stated above or 30 days from the final decision of such review body, whichever is later. The time may be extended by the State Division of Human Rights for good cause shown.
- (3) Sponsors are encouraged to establish fair, speedy, and effective procedures for a review body to consider complaints of failure to follow the equal opportunity standards. A private review body established by the program sponsor for this purpose should number three or more responsible persons from the community serving in this capacity without compensation. Members of the review body should not be directly associated with the administration of an apprenticeship program. Sponsors may join together in establishing a review body to serve the needs of programs within the community.

**(B) Processing of complaints**

- (1) When the sponsor has designated a review body for reviewing complaints, the State Division of Human Rights, unless the complainant has indicated otherwise or unless the State Division of Human Rights has determined that the review body will not effectively enforce the equal opportunity standards, shall upon receiving a complaint, refer it to the review body.
- (2) The State Division of Human Rights, shall, within 30 days following the referral of a complaint to the review body, obtain reports from the complainant and the review body as to the disposition of the complaint. If the complaint has been satisfactorily adjusted and there is no other indication of failure to apply equal opportunity standards, the case shall be closed and the parties appropriately informed.
- (3) When a complaint has not been resolved by the review body within 90 days or where, despite satisfactory resolution of the particular complaint by the review body, there is evidence that equal opportunity practices of the apprenticeship program are not in accordance with this Part, the Commissioner [New York State Department of Labor] may conduct such compliance review as found necessary, and shall take all necessary steps to resolve the complaint.
- (4) Where no review body exists, the State Division of Human Rights may conduct such compliance review as found necessary in order to determine the facts of the complaint, and obtain such other information relating to compliance with these regulations as the circumstances warrant.
- (5) Sponsors shall provide written notice of the above complaint procedure to all applicants for apprenticeship and all apprentices.

# NOTICE

**The Joint Apprentice Committee of the Educational and Training Fund of Laborers' Local #91 will be accepting applications for appointment into the Apprentice Program for Skilled Construction Craft Laborer's.**

**A Skilled Construction Craft Laborer works in support of other skilled crafts in performing any combination of duties involving highway or building construction, environmental restoration, tunnel and shaft construction and demolition projects. They utilize specialized training and knowledge of craft skills and handling of hazardous materials. Hand and power tools are used throughout their duties including clearing and preparing sites, right-of-ways, and foundations for cementitious and asphaltic products and structures. Frequent transfer between these and related areas require workers with diverse experience and ability to work without close supervision.**

**Noting that Laborers must be competent in a wide variety of skills, both physical and mental, due to the nature of the construction industry, all applicants must meet certain minimum qualifications:**

- **Not less than 18 years of age. Proof of age is required.**
- **Physically able to perform the work of the trade. Signed declaration required.**

**Minimum Qualifications:**

- 1. Lift, carry twenty-five (25) feet, and re-stack to a height of approximately fifty-four (54) inches, ten (10) ninety-four (94) pound sacks**
  - 2. Load with a shovel one-half (1/2) cubic yard of material into a wheelbarrow, wheel thirty (30) feet and deposit into a container**
  - 3. Work at heights of ten (10) feet or greater**
  - 4. Work in confined spaces**
- **A high school diploma or G.E.D. equivalent. Proof required.**
  - **Reliable transportation to work sites and related instruction.**
  - **Post-acceptance drug tests to be randomly administered.**

**Apprentices will be required to attend related instructional classes (minimum 144 hours/year), without pay, days and/or evenings.**

**APPLICATIONS will be ACCEPTED at 4500 Witmer Industrial Estates Niagara Falls, NY from 8am until 12pm (noon) on the first Tuesday of every month beginning on: Tuesday August 2, 2016 through Tuesday July 11, 2017. All applications must be filled out in person and on the premises.**

Joint Apprenticeship and Training Committee  
Educational and Training Fund  
Laborers' Local #91  
4500 Witmer Industrial Estates  
Niagara Falls, NY 14305  
TEL # 716-297-4722  
FAX # 716-297-3414  
[randy.palladino@laborerslocal91.org](mailto:randy.palladino@laborerslocal91.org)  
[www.laborerslocal91.org](http://www.laborerslocal91.org)

## MINIMUM QUALIFICATIONS

Noting that Laborers must be competent in a wide variety of skills, both physical and mental, due to the nature of the construction industry, all applicants must meet certain minimum qualifications:

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- Physically able to perform the work of the trade. Signed declaration required.

### Minimum Qualifications:

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  - Reliable transportation to work sites and related instruction.
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I have read the above minimum job requirements and I affirm that I am physically able to perform these duties.

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Print Name

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Signature

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Date

# APPLICATION FOR APPRENTICESHIP

Date \_\_\_\_\_

NAME \_\_\_\_\_  
Last First Middle

PRESENT ADDRESS \_\_\_\_\_  
Street City State Zip

PERMANENT ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE NO. \_\_\_\_\_

Are you 18 years of age or older?  Yes  No If not, state your age \_\_\_\_ If not, do you have the required working papers?  Yes  No

Are you a U.S. Citizen?  Yes  No If not, do you have a legal right to work in this country?  Yes  No

## EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY REQUESTED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? \_\_\_\_\_

EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_ WHERE \_\_\_\_\_ WHEN \_\_\_\_\_

EDUCATION	NAME OF SCHOOL	LOCATION OF SCHOOL	NUMBER OF YEARS ATTENDED	SUBJECTS STUDIED OR DEGREE(S) OBTAINED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK \_\_\_\_\_

U.S. MILITARY SERVICE \_\_\_\_\_ RANK \_\_\_\_\_

**REFERENCES:** GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

"WE ARE AN EQUAL OPPORTUNITY EMPLOYMENT COMPANY. WE ARE DEDICATED TO A POLICY OF NON-DISCRIMINATION IN EMPLOYMENT ON ANY BASIS INCLUDING RACE, CREED, COLOR, AGE, SEX, RELIGION, NATIONAL ORIGIN, DISABILITY, MARITAL STATUS, OR ARREST RECORD."

LAST FIRST MIDDLE

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
WORK PERFORMED:				
FROM				
TO				
WORK PERFORMED:				
FROM				
TO				
WORK PERFORMED:				

I HEREBY GIVE AUTHORIZATION TO CHECK THE REFERENCES GIVEN IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR WILL NOT BE INTERPRETED IN MY FAVOR.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

REMARKS: \_\_\_\_\_

HIRED \_\_\_\_\_ FOR DEPT. \_\_\_\_\_ POSITION \_\_\_\_\_ WILL REPORT \_\_\_\_\_ SALARY WAGE \_\_\_\_\_

APPROVED: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
 EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER