

4-14-2014

## OJT Registration/Enrollment Form, April 14, 2014

Maine Department of Transportation

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## OJT REGISTRATION/ENROLLMENT FORM

Include job application/resume

Contractor name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_, Maine

Phone No: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Ethnic/Protected Class: \_\_\_\_\_ Sex: \_\_\_ Male \_\_\_ Female

Training Classification: \_\_\_\_\_ Hours: \_\_\_\_\_

\_\_\_ New Hire \_\_\_ Upgrade \_\_\_ Other, describe \_\_\_\_\_

Enclosed copy of: \_\_\_\_\_ Resume or \_\_\_\_\_ Job Application.

Start Date: \_\_\_/\_\_\_/\_\_\_ Start Wage: \$\_\_\_\_\_/hr\_\_\_\_\_% journeyed rate)

Expected

End Date: \_\_\_/\_\_\_/\_\_\_ End Wage: \$\_\_\_\_\_/hr\_\_\_\_\_% journeyed rate)

Site Phone No: \_\_\_\_\_ EEO Officer: \_\_\_\_\_

**No contractor will be given credit until this form is approved by MaineDOT.**

**Notice:** Per Contract Special Provision 660, should the EEO Officer determine the Contractor has not complied with the approved training program, the number of remaining hours for each trainee will be multiplied by the prevailing wage rate for that particular classification. The resulting figure shall be deducted from the Contractor's final payment.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Trainee Signature Date

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Employer Signature Date

**FOR MaineDOT USE ONLY:**

Approved  Denied

\_\_\_\_\_  
MaineDOT Representative Signature Date: \_\_\_\_\_

MaineDOT Representative Signature

(cc: MaineDOT on-site representative Contractor, Trainee, File)

Send to: Women Unlimited  
OJT Administrative Coordinator  
79 Leighton Road, Suite 2A  
Augusta, Maine 04330  
Tel (207) 623-7576 or (800) 281-5259  
Fax (207) 623-7299  
[jlerette@womenunlimited.org](mailto:jlerette@womenunlimited.org)

