

**CONNECTICUT DEPARTMENT OF TRANSPORTATION**  
**ON-THE-JOB TRAINING – TRAINEE APPROVAL REQUEST**

Form 1415 (Rev. Jan.2007)

Instructions: To be completed by the Contractor and submitted to both the Division of Contract Compliance and the District EEO Coordinator. Include the required attachments.

Prime Contractor: \_\_\_\_\_

Contract No.: \_\_\_\_\_ Date: \_\_\_\_\_

**PROPOSED TRAINEE INFORMATION**

1. Training Candidate: \_\_\_\_\_ Sex:  Male /  Female

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

2. Social Security Number: \_\_\_\_\_

3. Ethnic Background:

American Indian,  Asian,  Black,  Hispanic,  Portuguese,  White,  Other.

4. Training Classification: \_\_\_\_\_ Program Hours: \_\_\_\_\_

5. Employed by  Prime Contractor /  Subcontractor: \_\_\_\_\_

6. Proposed Utilization as:  Trainee /  Apprentice (select one)

If an apprentice, indicate the Apprenticeship Program:

a) Union Local: \_\_\_\_\_

b) Apprentice Coordinator: \_\_\_\_\_

6. Prior Training on ConnDOT Project:  Yes /  No

If yes, list project(s): \_\_\_\_\_

7. If non-minority male, describe efforts made to select a minority or female:

\_\_\_\_\_  
\_\_\_\_\_

Required Attachments:

- Copy of I-9.
- Copy of Drivers License, or other photo ID.
- If apprentice, copy of apprentice participation/registration.
- Clearly indicate the proposed trade and number of hours to be trained.

Information provided by: \_\_\_\_\_ Title: \_\_\_\_\_

Information taken by: \_\_\_\_\_ Date: \_\_\_\_\_

Division of Contract Compliance Approval: \_\_\_\_\_ Date: \_\_\_\_\_