



An educational consortium operating
the Delta Career Advancement Center

Partners for Progress in Delta, Inc.

**Delta Career Advancement
Center**

PO Box 956, 1696 North Clearwater Avenue
Delta Junction, Alaska 99737
phone: (907) 895-4605 fax: (907) 895-4629

www.partnersforprogressindelata.org

Interior Entry Level Civil Construction
Heavy Equipment Operator and Heavy Equipment Mechanic Academy
June 3 to 20, 2014
7 am to 4 pm

How to Apply

To apply for this training opportunity, please read and carefully fill out the following forms. Be sure to include all required documents and information. After you have filled out and collected all the needed information, the packet should be mailed to:

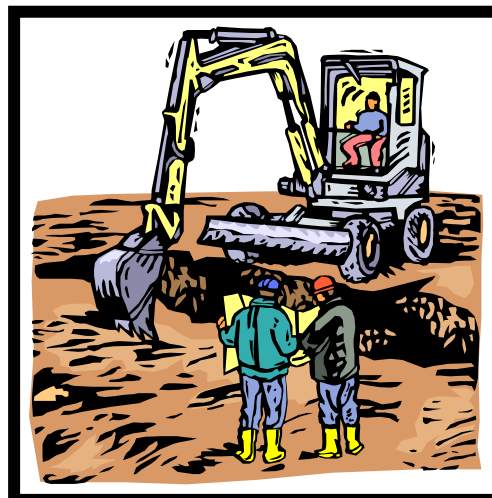
Gary Hall, Academy Administrator
Partners for Progress in Delta, Inc.
Delta Career Advancement Center
PO Box 956
Delta Junction, AK 99737

If you have any questions call **907-895-4605** or **907-895-4844**.

Space is limited to 10 students per Academy.

Application deadline: **May 1, 2014, 1:00 pm**

Interviews will be completed by: **May 20, 2014**





An educational consortium operating
the Delta Career Advancement Center

Partners for Progress in Delta, Inc.

Delta Career Advancement Center

PO Box 956, 1696 North Clearwater Avenue
Delta Junction, Alaska 99737
phone: (907) 895-4605 fax: (907) 895-4629
www.partnersforprogressindelata.org

Interior Entry Level Civil Construction
Heavy Equipment Operator and Heavy Equipment Mechanic Academy
June 3 to 20, 2014
7 am to 4 pm

Briefly describe any construction training and/or experience you have.

Briefly describe your career interests.

I am applying for: (mark one)

- Heavy Equipment Operator Heavy Equipment Mechanic

I do not live in the Delta Junction area and require room and board information/assistance.

- yes no

Have you completed and attached these forms?

- Application Form Personal Information Form

Have you attached copies of these documents?

- Valid Alaska Driver' License High School Diploma or GED

Parental/Guardian Consent for Participation (Necessary if under eighteen years of age)

I _____ the parent/guardian of _____

Printed Name Parent/Guardian

Printed Name Academy Applicant

give my consent for my child to participate in the Academy Training Program, if selected.

Signature

Date



An educational consortium operating
the Delta Career Advancement Center

Partners for Progress in Delta, Inc.

Delta Career Advancement Center

PO Box 956, 1696 North Clearwater Avenue
Delta Junction, Alaska 99737
phone: (907) 895-4605 fax: (907) 895-4629
www.partnersforprogressindelta.org

Personal Information Form

Please print all information neatly.

Name	First	M.I.	Last	
Today's Date		Date of Birth	Social Security Number <i>required</i>	
Mailing Address		City	State	Zip
Residence Address		City	State	Zip
Home Phone Number		Message Phone Number	Emergency Contact Phone Number	
Emergency Contact Name			Relationship	
Emergency Contact Address		City	State	Zip

Please provide the name of at least one employer or community reference. Be sure to provide a current phone number where the individual can be reached during the day.

Name	City	State	Phone Number
------	------	-------	--------------

Please read and sign the following to agree to the terms of this training opportunity:

I commit to being drug and alcohol free throughout the duration of the Academy Training Program. I understand that I must remain drug and alcohol free to apply and successfully complete the training program, if I am selected.

<i>Signature</i>	<i>Date</i>
------------------	-------------

I am physically able to participate in all aspects of the Academy Training Program. I understand it is advised to check with my health care provider before beginning the training program.

<i>Signature</i>	<i>Date</i>
------------------	-------------

Photo Permission: Partners for Progress in Delta would like to use your photo image and a brief biography in promotional materials. Will you permit unrestricted use without any compensation to you? YES NO

Certification/Authorization to Release Information

I certify that the statements made by me on this form are accurate and true to the best of my knowledge. I understand that the Partners for Progress in Delta may provide this information in personally identifiable form to the State of Alaska, the federal government, or private organizations to receive program funding or to provide or obtain services for me. In addition, I authorize the Partners to obtain personally identified information about my employment, education, and driving record from the state government, employers, or other organizations, when needed, to carry out Partners for Progress in Delta program objectives. Understanding this need, I authorize these entities to release and/or verify such information to the Partners for Progress in Delta, at any time, without my further consent.

<i>Printed name</i>	<i>Signature</i>	<i>Date</i>
---------------------	------------------	-------------

