

SKILL • QUALITY • ATTITUDE • PRODUCTIVITY

## **Southwest Carpenters Training Fund**

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Evaluation/Re-Evaluation for Up	ograde Request (Acc	oustical Installer)			
To: Southwest Carpenter and	Affiliated Trades J	ATC			
From: (Company Name):					
Re: Evaluation/Reevaluation for  Advanced Standing E Reevaluation for Upg.	valuation (prior to	indenture)			
Our company has evaluated/reev	aluated the following	g apprentice for up	ograde as follow	s:	
Apprentice/Applic		UBC ID (if available)			
Current Apprentice Level			Requested Level (Upgrade/Advanced Standing)		
Our staff has properly verified prexperience and has found that the	e above stated appre				
Work Processes	Required to Complete	Credit Hours for Work Processes		Verification Comments	
A – Core Skills	800		,		
B – Framing	800				
C – Wall Systems	1000				
D – Ceiling Systems	3,600				
E – Supplemental Skills <b>Totals</b>	7,000				
Totals	7,000				
Printed Name of Contractor Representative			-	Position	
	_				
Signature of Contractor Representative			Date	Phone	
By signing this form, you conj prior work history and/or acqu					
Signature of Ap	nrentice	_		Date	