



# Electrical School-to-Apprenticeship Program

**“Earn while you learn”** by starting the Apprenticeship Maryland Program in High School. The Electrical School to Apprenticeship is a new opportunity made possible by MCPS and IEC Chesapeake. The program includes 450 paid on-the-job training hours, 165 hours of classroom instruction, plus OSHA 10 and CPR certifications. Upon successful completion, students will graduate high school with their diploma and Year 1 of their 4-Year Journeyman Training in electrical construction completed. After completing all four years, apprentices are eligible to obtain a Journeyman’s Electrical License.

## How does it work?

During the school year, students are employed with a local electrical contractor and work mornings from about 6:30 a.m. to lunchtime Monday-Thursday before returning to high school in the afternoon to complete their course requirements for graduation. On Fridays, students attend first-year apprentice classes at IEC Chesapeake in Laurel, Maryland and then return to school in the afternoon.

IEC Chesapeake helps students secure employment with a contractor. Opportunities also exist to work the summer between junior and senior year.

**Prerequisites:** Students must have a valid driver’s license and reliable transportation in order to be accepted into the program.

## What are the program benefits?

### Students will receive:

- Training in a state-of-the-art facility
- Opportunity for full-time employment with benefits
- Entry into apprenticeship training in one of the fastest-growing occupations in residential and commercial construction
- Two national certifications: CPR/Red Cross and OSHA 10
- Opportunities to network with successful electrical contractors hiring in the Baltimore/Washington region
- Job coaching and placement assistance



## Where and When?

### IEC Chesapeake

8751 Freestate Drive, Suite 250  
Laurel, MD 20723

**Starting Date:** July, following your junior year of high school

For additional information, please contact Shawn Krasa,  
Supervisor for Work Based Learning at [Shawn\\_E\\_Krasa@mcpsmd.org](mailto:Shawn_E_Krasa@mcpsmd.org).



Maryland’s Largest School District

**MONTGOMERY COUNTY PUBLIC SCHOOLS**

*Expanding Opportunity and Unleashing Potential*





# SCHOOL-TO-APPRENTICESHIP TRAINING APPLICATION



Name: \_\_\_\_\_ Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_-\_\_\_\_-\_\_\_\_ MCPS Id# \_\_\_\_\_

Address (City, State, ZIP Code): \_\_\_\_\_

Student Cell Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ Student Email: \_\_\_\_\_

Parent/Guardian Cell Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

What MCPS high school do you currently attend? \_\_\_\_\_

Where did you learn about the School-to-Apprenticeship Program? \_\_\_\_\_

Electrical contractor presently working for: *(Leave blank if not currently working for a contractor)*

Company: \_\_\_\_\_ Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ Date of Hire: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address (City, State, ZIP Code): \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_

**Work History:** (from most recent or present)

COMPANY	FROM/TO	TYPE OF WORK	PHONE	WAGES
			____-____-____	
			____-____-____	
			____-____-____	

**All applicants must provide the following documents along with the application. Applications received without all required documents will not be processed (copies only, no originals please).**

Driver's License    Birth Certificate    Social Security Card    OSHA 10 Card    MD Apprenticeship Agreement Electrical  
 Résumé    One letter of personal reference

Should you have or need additional information, please contact Bridget Flaherty at 301-621-9545 ext 108, [bflaherty@iecchesapeake.com](mailto:bflaherty@iecchesapeake.com).  
 I.E.C. Chesapeake Apprenticeship and Training Inc., 8751 Freestate Drive, Suite 250, Laurel, MD 20723 • (301) 621-9545

I certify that the information provided is true and correct to the best of my knowledge, and I understand that any misrepresentation on this application is cause for not being accepted into the program.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Apprenticeship Agreement Form must be signed by parent/guardian if student is under age 18.**

**Disclaimer:** The I.E.C. Chesapeake does not discriminate against race, religion, age, sex, gender, national origin, or veteran status.

**Next Steps:**

- Schedule a meeting with your high school counselor to finalize your graduation plan and ensure you are on track to graduate at the end of the 20\_\_-\_\_ school year. (please check to confirm you have discussed the following topics)
  - Current GPA: \_\_\_\_\_  Credits Earned: \_\_\_\_\_  Credits Needed: \_\_\_\_\_  SSL Hours Earned: \_\_\_\_\_
  - Required Testing: \_\_\_\_\_  Other: \_\_\_\_\_
  - Register for: Apprenticeship Work Based Learning (3 credits), Apprenticeship Related Instruction (1 credit) and the teacher of record is the Internship Coordinator. \_\_\_\_\_

Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

- Meet with the Internship Coordinator at your school to confirm your registration in the Apprenticeship Maryland Program.  
 Internship Coordinator Signature: \_\_\_\_\_
- Register and complete the online OSHA 10-Hour Construction Industry Course Training on the following website, if you haven't done so already; <https://careersafeonline.com/>. (Student/Educational price is \$25)
- Email the completed School to Apprenticeship application, Maryland Electrical Apprenticeship agreement and copies of the required documents to: Shawn Krasa, MCPS Supervisor for Work Based Learning, at [Shawn\\_E\\_Krasa@mcpsmd.org](mailto:Shawn_E_Krasa@mcpsmd.org).





# APPRENTICESHIP AGREEMENT



Department of Labor, Licensing and Regulation  
**Maryland Apprenticeship and Training Council**  
 1100 N. Eutaw Street, Room 606, Baltimore, MD 21201  
 410-767-2246



The sponsor and apprentice whose signatures appear below agree to the terms and conditions set forth in the Apprenticeship Standards currently in effect and registered with the Maryland Apprenticeship and Training Council (MATC).

Further, the sponsor agrees that the apprentice shall be given equal opportunity in all phases of apprenticeship employment and training without discrimination because of political or religious opinion or affiliation, marital status, race, color, creed, national origin, sex, or age, unless sex or age constitutes a bona fide occupational qualification or the physical or mental disability of a qualified individual with a disability in accordance with the Maryland State Plan for Equal Employment Opportunity in Apprenticeship & Training.

The apprentice agrees to be diligent and faithful in learning the occupation in accordance with the terms and conditions set forth in the Apprenticeship Standards registered with the MATC.

This agreement may be terminated by either party without cause during the probationary period by submitting written notification of termination to the MATC. After the probationary period, this Agreement may be terminated for good cause with due notice to the apprentice and a reasonable opportunity for corrective action and with written notice to the apprentice and MATC of the final action taken.

Privacy Act Statement: The information requested herein is used for apprenticeship program statistical purposes and may not be otherwise disclosed without the express permission of the undersigned apprentice. Privacy Act of 1974 (P.L. 93-579)

**Type or Print (Submit four copies (Original +3))**

Name of Sponsor		Name of Apprentice	
Address of Sponsor		Address of Apprentice	
If Sponsor is an Association, Participating Employer's Name		Date of Birth	Social Security Number
Sex	Occupation	Length of Probation (hours)	Veteran Status (check one)
Term of Apprenticeship (hours)	Work Experience Credit (hours)	<input type="checkbox"/> Vietnam Era (8/15/64–6/7/75) <input type="checkbox"/> Other Veteran <input type="checkbox"/> Non Veteran	Race/Ethnic Group (check one)
Related Instruction Per Year (hours)	Related Instruction Credit (hours)	Education Level (check one)	<input type="checkbox"/> White (Not Hispanic) <input type="checkbox"/> Black (Not Hispanic) <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Information Not Available <input type="checkbox"/> Other
Date Apprenticeship Began (MDY)	Projected Completion Date (MDY)	Will Apprentice Be Paid While Attending Class <input type="checkbox"/> Yes <input type="checkbox"/> No	

School-To-Apprenticeship:  Yes  No If Yes, Indicate County \_\_\_\_\_

**Progressive Wage Schedule:** The Journey person Hourly Rate on \_\_\_\_/\_\_\_\_/\_\_\_\_ was \$\_\_\_\_\_ per hour.

1st 1,000 HOURS ____%	5th 1,000 HOURS ____%	9th 1,000 HOURS ____%	13th 1,000 HOURS ____%
2nd 1,000 HOURS ____%	6th 1,000 HOURS ____%	10th 1,000 HOURS ____%	14th 1,000 HOURS ____%
3rd 1,000 HOURS ____%	7th 1,000 HOURS ____%	11th 1,000 HOURS ____%	15th 1,000 HOURS ____%
4th 1,000 HOURS ____%	8th 1,000 HOURS ____%	12th 1,000 HOURS ____%	16th 1,000 HOURS ____%

Signature of Sponsor: \_\_\_\_\_

Signature of Apprentice: \_\_\_\_\_

Signature of Guardian (if apprentice is under 18): \_\_\_\_\_

**REGISTERED WITH THE MARYLAND APPRENTICESHIP AND TRAINING COUNCIL**

Date Registered	Signature and Title of MATC Official	MATC Number
-----------------	--------------------------------------	-------------