

VIRGINIA BOARD OF WORKFORCE DEVELOPMENT

ATTACHMENT A

Registration Application – Registered Apprenticeship

PROGRAM SPONSOR INFORMATION Sponsor Name: Sponsor Address:
PRIMARY SPONSOR CONTACT Name: Phone: E-mail:
REGISTERED APPRENTICESHIP PROGRAM INFORMATION Program Name: Date of registration: Occupations included within the Registered Apprenticeship program:
The number of active apprentices in the program.
RELATED APPRENTICESHIP EDUCATION INSTRUCTION Name: Address (if different than the program sponsor's address):
The method and duration of Related Apprenticeship Education Instruction:
The cost of the Related Apprenticeship Education Instruction: