

Apprenticeship Maryland Student Application

Instructions: Students interested in participating in the Apprenticeship Maryland Program should complete and submit an application packet to their local Youth Apprenticeship Coordinator. A complete application packet must include the following:

1. A completed Apprenticeship Maryland Student Application Form

2. A cover letter, which should address the following:

- Why do you want to be a youth apprentice?
- How do your career interests relate to the apprenticeship program for which you are applying?
- Describe how you think any related high school courses you are currently taking or have taken in the past (Career and Technology Education (CTE) courses, mathematics, English, etc.) will help you succeed in your apprenticeship.
- Why should we consider you to be a participant in the Apprenticeship Maryland program?

3. A resume which includes:

- Career Objective;
- Education (including);
 - Any courses or training you have completed that support your qualifications and interest in the Apprenticeship Maryland program
- Personal Strengths (encouraging others; working as part of a team; being accurate or precise; visualizing colors, shapes, and concepts; fixing, repairing, building and using tools; keeping deadlines, etc.)
- High School Awards and Honors;
- Volunteer and Community Service;
- Extra-curricular activities;
- Employment information (including unpaid internships);
- Additional Skills, Hobbies.

4. Two letters of recommendation: (1 letter of rec/1 teacher rating)

- The letter should be submitted to your Youth Apprenticeship Coordinator under separate cover by the individual providing the recommendation; or
- The letter should be from a person in the community who knows you well and is not related to you (employer, volunteer coordinator, and neighbor).

Submit completed packet to:

Coordinator:	Eric Cook	Email:	cook.eric@ccpsstaff.org
Address:	10855 Central Avenue Ridgely, MD 21600	Telephone:	(410) 479-0100

Caroline County Public Schools does not discriminate on the basis of sex, gender, race, color, national origin, disability, religion, ancestry, age, marital status, genetic information, sexual orientation or any other characteristic protected by law in its programs and activities, and provides equal access to the Boy Scouts and other designated youth groups.

(Title 9 Coordinator: Dr. Derek Simmons)

Teacher Evaluation Form - Youth Apprenticeship Applicants

Student Name:		Grade:		Date:	
Teacher Name:		Subject:			

Youth Apprentice Coordinator's email address: cook.eric@ccpsstaff.org

Student Instructions:

Complete the information at the top of this form. Save the document and email it to a teacher who knows you well.

Teacher Instructions:

The above student is applying to participate in the Maryland Youth Apprenticeship program. Please complete the information below and return electronically. This information will be shared with potential employers. Please seal the envelope and initial over the seal.

Please rate the student on each of the areas listed below. Ratings are 1-5 as follows:

1-Poor 2-Below Average 3-Average 4-Above Average 5-Superior

Quality/Habit/Skill	Rating	Quality/Habit/Skill	Rating
Dependability		Submits work on time	
Responsibility		Uses good judgement	
Ability to work independently		Attitude	
Ability to work with others		Communication	
Ability to learn		Attendance	
Quality of work		Cooperative and polite	

Additional comments:

Overall Employability: Please comment freely. If you were an employer/supervisor would you want this student working for you?

Personal Information – to be completed by Student (Please Print):				
Name:				
	(Last)	(First)	(Middle Initial)	
Home Address:				
City:		State:		Zip:
Student ID#:		High School:		Grade:
Expected Graduation:		Current GPA:		Birth Date:
Primary Phone #:			Cell Phone #	
POSITION APPLIED FOR				
Check below the Youth Apprenticeship Specific Offerings which you are interested:				
				<input type="checkbox"/>
				<input type="checkbox"/>
Do you have reliable transportation to the training site?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Initial next to each requirement to indicate the following materials are included with this application:				
Reference Letters	<input type="checkbox"/>	Resume:	<input type="checkbox"/>	Cover Letter <input type="checkbox"/>
To be eligible for this program, you must meet the attendance requirements of your local school system and be a student in good standing regarding disciplinary actions and grades.				
Student Signature:				Date:
Parent Signature:				Date:
FOR OFFICIAL USE ONLY:				
Date Received:				Received By:
Not Approved:		Reason:		
Pending Approval:			Date:	
Approved:	Date:	YA Coordinator Signature:		
Sent To DLLR:	Diane Peters, Strategic Outreach, 500 N. Calvert St. Baltimore, MD 21202			
EMAIL:	diane.peters@maryland.gov			