

Applications must be clearly filled out. Once completed, fax your application to (305) 662-7905 or email to gsalazar@pcamiami.com

PERSONAL INFORMATION					
Last Name	First Name		Middle		
Home Address:					
City, State, Zip:					
Home #	Cell #	T	Work#		
Emergency Contact		Contact #			
Social Security #	Do you have a Flo		orida Driver's License:		
NOTE: In compliance with Title 29			nd the Civil Rights Act of 1954, the		
Committee request the following inf		,	,		
Date of Birth	Age		Email		
Say () Mala () Famala	Any health or physical issues () Yes () No				
Sex () Male () Female National Origin: Asian () Black (Hispanic () American				
Are you a U.S. Citizen? () Yes () No					
Do you have reliable transportation? () Yes () No					
High School Diploma or G.E.D. () Yes () No					
Are you a veteran? () Yes () No					
Military Status: Active Duty () Reserve () Veteran: Gulf () Vietnam() Other ()					
Eligible for veterans educational benefits: () Yes () No					
Are you currently employed: () Yes () No					
Have you ever been convicted of a felony? Prior conviction will not automatically disqualify you from the					
program () Yes () No If yes, please explain:					



EMPLOYMENT INFORMATION				
Telephone #				
Job Title:				
nip () Yes () No Not sure ()				
LOYMENT INFORMATION				
nce related to the Plumbing Industry				



Previous work experience (check all that apply)

Underground DWV rough	Condensation drainage
Sewers	Gas - rough and set natural/LP
Water service	Water heaters - service/install
DWV Sanitary top out	Plumbing fixtures - service /install
Cast iron PVC Storm top out	General service and repair
PVC	Medical gas
Storm top out	10-hour OSHA Safety Certification
Cast Iron	30-hour OSHA Safety Certification
PVC	Mini excavator
Water pipe	Combination backhoe
PVC Water pipe Copper solder/Pro Press	Scissor lift
Plastic - PEx/CPVC	Boom lift
Equipment operator experience and safety	
certifications	Skid steer
hereby swear and affirm that all of the above inform nformation given may result in immediate dismissal f pprenticeship Program.	
Signature	Print Name
Date	