



New Sponsor Intake Sheet

This sheet asks for some specific information we need to guide you through preparing your standards and registering your program. Unlike the Standards, this document is not for distribution to apprentices.

SPONSOR _____

INDUSTRY CODE (NAICS) _____ (six digit number) [See NAICS Code List](#)

PRODUCTS / SERVICES _____

TYPE OF SPONSOR

Single Employer Multiple Employer Sponsor Single-Employer Joint Group Joint

Do You Have an Apprenticeship Program Registered in Another State? check if YES

Do you want your Program on the RI WIOA Eligible Training Provider List (ETPL)? check if YES

YOUR COMPANY WORKFORCE _____ Number employed in Rhode Island (all occupations)

YOUR COMPANY WORKFORCE IN APPRENTICE OCCUPATION(S)

For each occupation you are apprenticing, please provide the total number of fully-proficient workers (journeyworkers), and the demographics of those workers.

Occupation	Number of Fully-Proficient Employees by Occupation (exclude apprentices, trainees)			
	Total	Women	Minorities	Age 16-24

FEIN (Federal Employer Identification Number) _____

UNION AFFILIATION Are the workers in the apprenticed occupations represented by a union? Yes No

If yes, name of union _____



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