## **Western States Carpenters Training Fund**



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Evaluation/Re-Evaluation for Upg	rade Request (Scaffo	old Erector)		
To: Western States Carpenters and	d Affiliated Trades J	JATC		
From: (Company Name):				
Re: Evaluation/Reevaluation for U	pgrade Request (Ch	eck one)		
Advanced Standing Evaluat Reevaluation for Upgrade ()		e)		
Our company has evaluated/reevalua	ted the following app	rentice for upgrad	de as follows:	
Apprentice/Applicant Name		UBC ID (If available)		
Current Apprentice Level		Requested Level (Upgrade/Advanced Standing)		
Related Work Experience <u>Prior</u> to A  Work Processes	pprenticeship (must b		ills required to be upgraded as requested.  advanced standing):  Verification Comments	
A – Core Skills	Complete 325	riocesses		
B – Scaffold Components	1,300			
C – Scaffold Installation	1,600			
D – Specialty Scaffolds	1,300			
E- Supplemental Skills	675			
Totals	5,200			
Printed Name of Contractor Ro	epresentative		Position	
Signature of Contractor Representative			Date	
By signing this form, you confirm the prior work history and/or acquired sknowledge.			detail with your Contractor and that all and correct to the best of your	
Signature of Apprentice		Date		