## **APPRENTICE COMPLETION FORM**

Please fill out both sides of this form, including the Skill Set Completion for Sponsors (see back of form). Once both sides are completed, submit the form to your local Ministry of Training, Colleges and Universities apprenticeship office (find contact information at <a href="http://services.findhelp.ca/eo/tcu/appoff">http://services.findhelp.ca/eo/tcu/appoff</a> or by calling Employment Ontario at (1-800-387-5656).

APPRENTICE INFORMATION			
Name (print)			
Client ID # Issued by Ministry			
Telephone Number(s)			
SPONSOR INFORMATION			
Legal Name			
Address			
Telephone Number(s)			
Sponsor's Signing Authority (print name)			
E-mail Address			
PROGRAM INFORMATION			
Trade Name			
Number of hours required as per Training Agreement (for hours-based trades only)			
Hours completed? (documentation attached)	Yes ( )	No ( )	Not applicable (
Classroom training completed or exempt?	Yes ( )	No ( )	Not applicable()
hereby confirm that the information submit	ted on both	sides of this fo	rm is true and accurat
X	<b>(</b>	onsor's Signing	

## **SKILL SET COMPLETION FOR SPONSORS**

You will find the skill set numbers and titles in the Log Book's Table of Contents. By signing off each skill set in the table below, you are providing final confirmation, as the Apprentice's Sponsor, that the Apprentice has demonstrated competency in all the mandatory skills included in the skill set.

**SIGNING** 

SKILL SET #	SKILL SET TITLE	AUTHORITY SIGNATURE		
MINISTRY OF TRAINING, COLLEGES AND UNIVERSITIES USE ONLY:				
		s ( ) No ( )		
	•	s ( ) No ( )		
	···	s() No()		
Staff Name	Signature	Date		