



**W B F A A**

**Unilateral Apprenticeship and Training Committee**

333 Washington Blvd #433, Marina del Rey, CA 90292

TEL 800/809-0280 www.wbfaa.net [info@wbfaa.net](mailto:info@wbfaa.net)

**WBFAA UATC FIRE/LIFE SAFETY TECHNICIAN**

**APPRENTICESHIP HANDBOOK AFFIRMATION**

I affirm that I have read the WBFAA UATC Apprenticeship Handbook and agree to abide by the policies outlined for the WBFAA UATC Fire/Life Safety Technician Apprenticeship and Training Program

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PRINT NAME

SIGNATURE

DATE

**ACADEMIC RELEASE FORM**

I, \_\_\_\_\_, authorize the release of all academic records related to my participation in the WBFAA UATC Fire/Life Safety Apprenticeship Program to:

WBFAA Unilateral Apprenticeship and Training Program  
333 Washington Blvd. #433  
Marina del Rey, CA 90292

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PRINT NAME

SIGNATURE

DATE

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CELL/HOME PHONE

WORK/OFFICE PHONE

EMAIL

**ALCOHOL AND CHEMICAL SUBSTANCE ABUSE STATEMENT**

In order to assure that the policy outlined in the Apprenticeship Handbook is fully understood, each apprentice shall sign the following Alcohol and Chemical Substance statement as a condition to his/her registration into the apprenticeship program:

*I Understand that if there is reasonable cause to believe that I am under the influence of alcohol, drugs or other controlled substances at any time during my work hours or in the classroom, I may be requested to report immediately to a physician, medical clinic, laboratory or hospital designated by my employer for alcohol and/or substance abuse testing. If I refuse to report, I may be disciplined, up to and including suspension from the apprenticeship program.*

*If testing is conducted and the report confirms that I was under the influence of alcohol, drugs or other controlled substances, I may be disciplined, up to and including suspension or termination from the program.*

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Print Name

SIGNATURE

DATE

**COMPLETE, SIGN, AND MAIL TO:**

WBFAA UATC  
333 Washington Blvd. #433  
Marina del Rey, CA 90292