

WBFAA 6-month Program for Certified Technicians

The 6-month program is designed for those individuals that possess a current state of California certification with the Department of Industrial Relations – Electrician Certification Unit to comply with AB 3018 specifically on the issue of having a skilled and trained work force that ALSO has graduated from an apprenticeship program.

You must comply with the following protocol to be considered an active apprentice with the WBFAA in this advanced program. If you do not meet the criteria below, you must either take the entire three-year program or apply later in time.

1. Fill out WBFAA assessment application.
2. Submit Proof of state of California certification blue card.
3. Register with the WBFAA using a DAS -1 form as an apprentice.
4. Prove at least 5,000 hours of previous on the job experience on company letterhead.

Apprentice Program Requirements to successfully complete the WBFAA UATC Program.

1. Apply to Chabot College Online
2. Purchase textbook
3. Attend all live webinars.
4. Complete all online modules.
5. Submit a total of 6,000 OJT hours.

Note that you will be a registered apprentice with Division of Apprenticeship Standards and the United States Department of Labor. As an apprentice you can work unsupervised in last step but cannot supervise another apprentice.

After successful completion of all components the WBFAA UATC apprentice will be complete with certificate after a Board vote.

WBFAA 6-month Program for Certified Technicians

1. Fill out WBFAA assessment application.
2. Submit Proof of state certification blue card.
3. Register with the WBFAA using a DAS -1 form as an apprentice.
4. Prove at least 5,000 hours of previous on the job experience on company letterhead.
5. Purchase textbook, attend all live webinars, complete all online modules, and successfully pass semester 6, submit a total of 6,000 OJT hours.

*Apprentice can work unsupervised in last step but cannot supervise another apprentice. After successful completion of all components the apprentice will be complete with certificate after a Board vote.



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

Phone: (800) 809-0280
Fax: (800) 809-0281

info@wbfaa.net
www.wbfaa.net

RE: Information Regarding the WBFAA UATC Assessment and Placement in Apprenticeship Program

Dear Apprentice Applicant:

Thank you for your interest in becoming an Apprentice through the WBFAA UATC Apprenticeship Training Program.

To become placed at a higher level as an Apprentice in our program you must complete and submit the enclosed Apprentice Application to our office along with documentation that supports your qualification for advancement outlined in the Apprenticeship Application Process.

Once your application is received, we will review the documents. If you are approved for advanced placement testing, information will be sent to you and your employer on the next step in the process.

You can submit this application and background qualification information to the address below or scan and email to admin@wbfaa.net

Sincerely,

WBFAA UATC
800-809-0280
333 Washington Blvd.
#433
Marina Del Rey, CA 90292

Apprenticeship Advanced Placement Application Process

1. All applications must be accompanied by material that supports the request for assessment and placement i.e. letters, certificates, resumes from previous experience.
2. Completed applications, along with additional forms of documentation, may be submitted by email admin@wbfaa.net or by U.S. mail.
4. Applications will be reviewed for the following:
 - All areas completed
 - Signature of applicant
 - All required documents

(Office Use Only)
#

WBFAA UATC APPRENTICE ADVANCED PLACEMENT APPLICATION



Company _____

Last Name _____

First Name _____ M.I. _____

Address _____

City _____ State ____ Zip _____

Phone _____

E-mail _____

Education

1. Are you a High School Graduate or possess a GED Certificate?
 Yes
 No
2. List Highest College Degree earned:
Degree: _____
3. Did you satisfactorily complete and receive credit for Algebra 1 (or some higher math) in high school or in a post high school institution?
 Yes
 No
4. Did you ever participate in any kind of vocational technical training during or after high school?
 Yes
 No
If yes, how long was the program?
_____ months
5. Did you complete the program?
 Yes
 No
6. Did you participate in any kind of school-to-career program while you were in high school?
 Yes
 No
7. If yes, did you complete the program?
 Yes
 No

Background

8. Have you served in the U.S. Military?
 Yes
 No
If yes, please enter dates:
Entry Date: _____
Discharge Date: _____
Which Branch? _____
9. List which military training schools you completed, if any:

10. Do you have any electrical experience?
 Yes
 No
11. Have you participated in an apprenticeship of any kind?
 Yes
 No
If yes, in what? _____
12. Do you have a valid Driver's License?
 Yes
 No

Interest and Ability

13. List reason(s) why you are applying for this apprenticeship: _____

14. Are you physically and mentally able to safely perform or learn to safely perform the work of this trade either with or without reasonable accommodations?
 Yes
 No
15. Are you able and willing to attend all related classroom training as required to complete your apprenticeship?
 Yes
 No

Work History

You must complete, and return with this application, a work history summary sheet, Indicating your present and previous employers for proof of on the job training.

Statements of Understanding

Please read the following Statements of Understanding and fill in the box if you agree with the statement.

- I am aware that it is my responsibility to keep this program informed of any change in my address or phone number.
- I am aware I must be able to climb and work from ladders, scaffolds, poles or towers of various heights.
- I am aware that I may be required to crawl and work in confined spaces such as attics, manholes and crawl spaces.
- I have read and understand the basic qualifications for entry into this program.
- I have been given specific instructions as to what is required of me to complete this application and to become qualified for oral interview.
- I understand that I must furnish documentation to provide evidence that I do meet the qualifications required for entry into the pool of eligible candidates for this apprenticeship
- I understand that it is my responsibility to see that all OFFICIAL transcripts and other required documents are provided in a timely manner in order to complete my application.
- I understand that if I fail to submit ALL of the required information within the specific time frame, my application may be considered incomplete.
- I understand that I cannot qualify for interview until I have met the minimum basic qualifications and have provided the necessary transcripts and documents as required
- I hereby acknowledge that I bear the sole responsibility for completing my application following the instructions provided.
- I understand that interviews for qualified applicants will be conducted in the order in which the applications are completed.
- I understand that any intentional false statements or information that I provide on this application form or on other documents shall be cause for denial of oral interview or termination of indenture, should I be selected for the program.
- I understand that an incomplete or unsigned application form will NOT be processed.
- I understand that if selected, I will be required to complete the selection process by qualifying on any examination, including a physical examination or drug testing, if required by the sponsor; either before or after signing an indenture.
- I understand that only this ORIGINAL application will be processed, and that photocopies of the application are NOT acceptable.

I have darkened all the above to indicate my understanding, and state that, to the best of my knowledge, all information

provided on this form is true and accurate. I hereby grant permission to all former employers and references listed to disclose any information concerning my past employment and/or qualifications. I agree that any false statements made by me in this application shall constitute grounds for disqualification of my selection or grounds for my discharge, if false information I discovered after being selected for apprenticeship. I hereby apply for an apprenticeship indenture with this sponsor and agree that if selected, I will abide by all Standards, Rules, and Policies covered by the indenture (Apprenticeship Agreement).

Signed: _____ Date: _____

WBFAA Unilateral Apprenticeship & Training Committee

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

Phone: (800) 809-0280 • Fax: (800) 809-0281

info@wbfaa.net • www.wbfaa.net

WBFAA UATC New Apprentice Paperwork Procedure and Chabot Enrollment

- Please have your newly hired apprentice fill out the DAS-1, Apprentice Handbook affirmation and apply online to Chabot College.
- Scan and email the completed DAS-1 and Handbook Affirmation to info@wbfaa.net and then Mail the original documents to the WBFAA UATC
WBFAA UATC
333 Washington Blvd. #433
Marina Del Rey, CA 90292
- Please have the apprentice apply online to Chabot College using the enclosed instructions for the appropriate term, which is when the apprentice will begin their first semester of online training. If an apprentice applies for the incorrect term, they will have to reapply.
- Any questions on these actions please call 800-809-0280

State of California
Division of Apprenticeship Standards
DAS 1: Apprentice Agreement



All persons entering the WBFAA UATC Fire/Life Safety Technician Apprenticeship and Training Program as an apprentice are required to complete and return a DAS 1 (Apprentice Agreement) to the WBFAA UATC.

The form must be completed and signed by the individual apprentice and their employer.

The Apprenticeship Agreement will be reviewed and, if accepted, forwarded to the Division of Apprenticeship Standards for review and acceptance.

If accepted by the DAS, a copy of the signed Apprenticeship Agreement will be sent to the apprentice and their employer.

Completing the DAS 1:

- ___ Form must be **1 page, double-sided**
- ___ Apprentice must complete and **sign both sides** of the form
- ___ Employer must sign and add company information
- ___ Page 1, "Agreement" section: Leave blank for WBFAA UATC to complete
- ___ Only **original signed forms** will be accepted (no faxes or e-mails)

Note: DAS 1 forms must be received by the State of California DAS within 30 days of the execution date. Please allow the WBFAA UATC Administrative Office no less than 3 business days prior to the 30-day limit to acknowledge and forward this document to the DAS for approval.

Complete, sign and mail original form to:

WBFAA Unilateral Apprenticeship & Training Committee
333 Washington Blvd. #433 • Marina del Rey, CA 90292
Phone: (800) 809-0280 • Fax: (800) 809-0281
info@wbfaa.net • www.wbfaa.net

D. O.	FILE NUMBER
13	10837

A	B	C	D	E	Official Use
Gender	Ethnic	Dependents	Education	Yrs Employ	STATUS



State of California -- Department of Industrial Relations --DIVISION OF APPRENTICESHIP STANDARDS

APPRENTICE AGREEMENT

APPRENTICE LAST NAME, FIRST NAME MIDDLE			SOCIAL SECURITY NUMBER		
APPRENTICE ADDRESS (NUMBER AND STREET / CITY, STATE & ZIP)			BIRTHDATE (mm/dd/yyyy)		F - VETERAN Yes: <input type="checkbox"/> No: <input type="checkbox"/>
			COUNTY OF RESIDENCE		
OCCUPATION Fire/Life Safety, Voice Data, Video & Electronic Security Technician				O*Net code 49-2098.00	
TERM OF APPRENTICESHIP 6000 Hours Within 3 Years		STRAIGHT TIME Hours per day: 8 Hours per week: 40			

This agreement is between the above named apprentice employed by the below named employer, and

WBFAA UATC

PROGRAM SPONSOR

AGREEMENT: The undersigned parties mutually agree that they will use their best endeavors to secure employment and training for the apprentice. The apprentice agrees to perform satisfactorily all work and learning assignments. The provisions of the Apprenticeship Standards for the above occupation adopted by the program sponsor and approved by the Chief of the Division of Apprenticeship Standards, are hereby made a part of this agreement. An official copy of the standards is on file in the headquarters of the Division of Apprenticeship Standards. This apprentice agreement will continue in effect until the training is completed or otherwise terminated in accordance with the standards.

The apprentice commences participation under these standards on the date of execution of this agreement by the Apprentice. The signatory apprentice is credited with having _____ months toward completion of the term of apprenticeship. The apprentice is expected to complete training on or about _____, 20____, upon satisfactory completion of the total remaining hours of on-the-job training and hours and/or units of related and supplemental instruction.

APPRENTICE: I, the undersigned apprentice, understand and agree that there is a valid and reasonable necessity that those academic records accumulated throughout related and supplemental instruction during my period of apprenticeship be made available to the apprenticeship committee. Further, I agree to release to the apprenticeship committee any other academic records which I feel may enhance my status as an apprentice.

I, the undersigned apprentice, hereby request that the Administrator of Apprenticeship terminate any other apprenticeship agreements in which I am currently registered.

Executed this _____ day of _____, 20____ by _____
DAY MONTH YEAR SIGNATURE OF APPRENTICE

AGREED TO BY THE EMPLOYER

SIGNATURE OF PARENT OR GUARDIAN (IF APPRENTICE IS 16 OR 17)

AGREED TO AND APPROVED BY, FOR THE COMMITTEE

SIGNATURE OF EMPLOYER OR ITS REPRESENTATIVE TITLE

NAME OF EMPLOYER
ADDRESS

SIGNATURE -- SECRETARY / CHAIR / COORDINATOR DATE

ACCEPTED BY DAS

SIGNATURE -- APPRENTICESHIP CONSULTANT DATE

[for unilateral programs only]

This agreement is approved by _____

for the Administrator of Apprenticeship

TO THE APPRENTICE: California Civil Code Sec. 1798.17 requires State agencies which collect personal information to indicate the authority under which the data are requested. If personal information not specifically authorized by law is requested, individuals must be informed that supplying the information is voluntary. It also provides that state agencies may change or modify records at the request of the individual.

Questions C and E below are voluntary. All others are authorized by law, as indicated by the reference in each section. If the authorized questions are not answered, the apprentice agreement cannot be accepted.

The Division hopes, through collection of this data, to improve the apprenticeship program both for those presently enrolled and for future apprentices. Thank you.

CALIFORNIA APPRENTICE QUESTIONNAIRE

(USE INK OR BALLPOINT PEN)

A. Gender
 Male Female
(Cal. Code of Regulations, Title 8, Ch. 2, Sec. 215)

B. Ethnic or Race Derivation **(Check only one)**

1 WHITE (Not of Hispanic Origin) -- A person having origins in any of the original peoples of Europe, North Africa or the Middle East.

2 BLACK (Not of Hispanic Origin) -- A person having origins in any of the Black racial groups of Africa.

ASIAN OR PACIFIC ISLANDER -- A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. The area includes, for example, China, Japan, Korea and Samoa.

A	<input type="checkbox"/> Asian	Asian Indian
C	<input type="checkbox"/> Asian	Chinese
D	<input type="checkbox"/> Asian	Cambodian
6	<input type="checkbox"/> Asian	Filipino
E	<input type="checkbox"/> Asian	Hmong
J	<input type="checkbox"/> Asian	Japanese
K	<input type="checkbox"/> Asian	Korean
L	<input type="checkbox"/> Asian	Laotian
M	<input type="checkbox"/> Asian	Malaysian
P	<input type="checkbox"/> Asian	Pakistani
R	<input type="checkbox"/> Asian	Sri Lankan
T	<input type="checkbox"/> Asian	Taiwanese
U	<input type="checkbox"/> Asian	Thai
V	<input type="checkbox"/> Asian	Vietnamese
F	<input type="checkbox"/> Native Hawaiian	Fijian
G	<input type="checkbox"/> Native Hawaiian	Guamanian <input type="checkbox"/>
H	<input type="checkbox"/> Native Hawaiian	Hawaiian <input type="checkbox"/>
S	<input type="checkbox"/> Native Hawaiian	Samoaan <input type="checkbox"/>
W	<input type="checkbox"/> Native Hawaiian	Tongan

4 AMERICAN INDIAN OR ALASKAN NATIVE -- A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

HISPANIC -- A person of Mexican, Puerto Rican, Cuban, South Central American or other Spanish culture or origin, regardless of race.

7

C. Number of Dependents (Do not count yourself)

0 <input type="checkbox"/> None	4 <input type="checkbox"/> Four
1 <input type="checkbox"/> One	5 <input type="checkbox"/> Five
2 <input type="checkbox"/> Two	6 <input type="checkbox"/> Six or More
3 <input type="checkbox"/> Three	

(Voluntary)

D. Highest Year of Education Completed

1 <input type="checkbox"/> 8th Grade or less	6 <input type="checkbox"/> 1 Year of College
2 <input type="checkbox"/> 9th Grade	7 <input type="checkbox"/> 2 Years of College
3 <input type="checkbox"/> 10th Grade	8 <input type="checkbox"/> 3 Years of College
4 <input type="checkbox"/> 11th Grade	9 <input type="checkbox"/> 4 or more Years of College
5 <input type="checkbox"/> 12th Grade (or GED Certificate)	

(Cal. Labor Code, Ch. 4, div. 3, Sec. 3076.3)

E. Number of Years You Have Been Employed Full Time to Date (Except for Military Service)

0 <input type="checkbox"/> None
1 <input type="checkbox"/> Less Than 1 Year
2 <input type="checkbox"/> 1 But Less Than 2 Years
3 <input type="checkbox"/> 2 But Less Than 3 Years
4 <input type="checkbox"/> 3 But Less Than 4 Years
5 <input type="checkbox"/> 4 But Less Than 5 Years
6 <input type="checkbox"/> 5 Years or More

(Voluntary)

F. Have You Served on Active Duty (other than reserve status) in the U. S. Armed Forces?

Yes No

If yes, Please Enter:

Month and Year Entered _____

Month and Year Separated _____

Total Months served on Active Duty _____

Apprentice's Signature _____

(Cal. Labor Code, Ch. 4, div. 3, Sec. 151)

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.

PRINT NAME	SIGNATURE	DATE
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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 Committee
333 Washington Blvd. #433
Marina del Rey, CA 90292

PRINT NAME	SIGNATURE	DATE
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CELL/HOME PHONE	WORK/OFFICE PHONE	E-MAIL
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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.

PRINT NAME	SIGNATURE	DATE
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COMPLETE, SIGN AND MAIL TO:

WBFAA Unilateral Apprenticeship & Training Committee
333 Washington Blvd. #433 • Marina del Rey, CA 90292
Phone: (800) 809-0280 • Fax: (800) 809-0281
info@wbfaa.net • www.wbfaa.net



Chabot College Online Application Instructions

Each apprentice participating in the WBFAA Apprenticeship Program is required to enroll with Chabot-Las Positas Community College District, the affiliated education agency which provides oversight for all apprentice classes offered by the WBFAA UATC.

The following is a brief guideline which is designed to assist you in this **TWO-PART** process. You will have to first create an OpenCCC account and then use that account to apply to Chabot. All sections must be completed. Most are self-explanatory except the first screen, for which we have provided appropriate responses to the three questions asked there. The whole process takes 15/20 minutes. Please do not hesitate to contact the WBFAA at 800-809-0280 if you have any questions or require assistance.

1. Click this link to get started: <https://www.opencccapply.net/gateway/apply?cccMisCode=482>
2. This will direct you to the page below where you will have to create an OpenCCC account: Click “Create an Account” circled in yellow:

CALIFORNIA COMMUNITY COLLEGES
CHANCELLOR'S OFFICE

Application to College

Before applying to college you must first have an OpenCCC account.

The OpenCCC single sign-in account allows you to access the online services of the California Community Colleges.

OpenCCC is a service of the California Community Colleges Chancellors Office. The information in your account is kept private and secure.

[Create an Account](#) or [Sign In](#)

Note: OpenCCC is a new systemwide account.
Accounts from our previous application system are not available.
Please create an account if you have not already done so.

3. After creating your OpenCCC account repeat steps 1-3. When you get to step 4, click “Sign In”

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Note: OpenCCC is a new systemwide account.
Accounts from our previous application system are not available.
Please create an account if you have not already done so.

Read all information and use the button at the very bottom of the page entitled:

“Begin Application for Chabot College”

The first screen you’ll see after beginning your application will ask you three questions. They are listed below along with the recommended responses.

On the 1st Screen

The term you are applying for is **the term you will begin your semester 1 classes: Fall 202x or Spring 202x**

Intended Major or Program of Study: 9015 ESYS: Industrial Electronic Technology

Educational goal: Earn a career technical certificate without a transfer

The next 8 screens, represented below, are all self-explanatory. Most of them can be filled in quickly and easily. The 4th screen may take two or three minutes because you need to use the electronic list, provided there, to look up your high school code.

The 2nd screen, enter: Name, SS#, DOB, etc.

The 3rd screen, enter: Mailing address, home address, email, etc.

The 4th screen enter: Educational background.

The 5th screen enter: Citizenship and military status.

The 6th screen enter: Residency questions.

The 7th screen enter: Language, financial, needs and interests.

The 8th screen enter: Consent to share information.

The 9th screen enter: Pace, Athletics, Nursing, Dental hygiene.

After you complete the application Chabot will send you a confirmation email. YOU NEED TO FORWARD THAT EMAIL TO INFO@WBFAA.NET OR ADMIN@WBFAA.NET TO INFORM THE WBFAA THAT YOU HAVE COMPLETED THE PROCESS. **Note: The WBFAA UATC will enroll you in your classes. You do not need to do anything further with Chabot College.**



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