



Please complete this application and attach proof of payment (paid invoice, bank statement, receipt, or processed check), and submit to the Alaska DOT&PF Civil Rights Office. To qualify for the **\$1000.00** reimbursement, you must be working on Alaska DOT&PF projects. If you are unsure if you qualify, please contact the OJT Support Services Office at 907-269-0850.

Apprentice Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Gender:  Male  Female

Ethnicity:  Alaska Native  American Indian  African American  Asian/Pacific Islander  Caucasian  Hispanic

Other \_\_\_\_\_

**Project Information**

Project Name/Description: \_\_\_\_\_ Project Number: \_\_\_\_\_

Trade: \_\_\_\_\_ Contractor/Employer: \_\_\_\_\_

- Carpenter  Electrician  Laborer  Operating Engineer  Piledriver
- Other \_\_\_\_\_

**Reimbursement Requested & Proof of Payment**

Check the appropriate box and write a description and accompanying dollar amount for each item. Attach the paid invoice, receipt, bank statement, or processed check as proof of payment.

<b>Training Materials &amp; Transportation – Academic courses or fees, fuel to and from work, etc.</b>	<b>Amount</b>
	_____
<b>Work Clothing &amp; Tools – Items appropriate for the trade in which the apprentice is enrolled</b>	
	_____
<b>Licensed childcare for apprentice’s children during work hours. Please indicate number of children, dates of care, and amount.</b>	
	_____

**Date** **Apprentice’s Signature** **Total Amount of Reimbursement**



Alaska DOT&PF Civil Rights Office OJT Support Services  
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 Revised 11/2020