

## FEDERAL ON-THE-JOB TRAINING PROGRAM ENROLLMENT FORM

				Date:		
TRAINEE INFORMATION						
Last Name:	First Name:		MI:	Employee	e ID:	
Address:			•			
City:	State:	Zip Code:	Phone:			
Gender: Ethnicity:	If other, please specify:					
and a supplementation of the supplementation						
New Hire or Upgrade:	If upgrade, previous job classification:				Previous Wage:	
The candidate expressed interest in the OJT Program?						
TRAINING INFORMATION			ASSILL			
Proposed trainee job classification:		Training start wage:		Planned trai	Planned training start date:	
Starting Federal-aid project:	Is the OJT Special Provision included in the contract? □Yes □No					
Resident Engineer:	Division:					
CONTRACTOR INFORMATION						
Contractor:			5201			
Contact Person:		Phone:				
Address:		City, State, Zip:				
E-mail:						
3						
Trainee Signature		Print Name				
Contractor Signature		Print Name				
Civil Rights Signature		Print Name				

Submit this form to ODOT's Civil Rights Division (CRD) by mail to 200 NE 21<sup>st</sup> St, Room 1-C1, Oklahoma City, OK 73105, by fax 405-522-2136, or email to <a href="mailto:mwhittington@odot.org">mwhittington@odot.org</a> A signed copy must also be maintained in the project files. Upon receipt of this form and if appropriate, CRD will furnish an enrollment confirmation letter to the contractor, and the applicable Resident Engineer.

The Oklahoma Department of Transportation (ODOT) ensures that no person or groups of persons shall, on the grounds of race, color, sex, age, national origin, disability/handicap, or income status, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any and all programs, services, or activities administered by ODOT, its recipients, sub-recipients, and contractors.