

# Apprentice Class Change Request

To request a class change please complete this form. You may mail, fax or email it to: WECA, 9719 Lincoln Village Drive, #303, Sacramento, CA 95827; fax: 916-452-7011; email: [jbunnell@goweca.com](mailto:jbunnell@goweca.com). Your request will be reviewed, and a decision will be made to approve or deny within 7 days. Please attach any information needed to support your request.

Apprentice Name		Apprentice ID #	
Program (check one)	<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential	<input type="checkbox"/> VDV
Class Year (check one)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
Contractor Name and Phone Number			
Current Class Dates and Location	/ /20 to / /20		Sacramento San Diego
Form Completed By:		Phone #:	
Reason for Request			
<input type="checkbox"/> Preplanned Event/Contractor Hardship <span style="margin-left: 200px;"><input type="checkbox"/> Documentation Attached</span>			
<b>Explain:</b>			
<input type="checkbox"/> Childbirth/Child Adoption <span style="margin-left: 200px;"><input type="checkbox"/> Documentation Attached</span>			
<b>Explain:</b>			
<input type="checkbox"/> Severe Illness/Death <span style="margin-left: 200px;"><input type="checkbox"/> Documentation Attached</span>			
<b>Explain:</b>			
For WECA Use Only			
Date SIA Received Class Change Request	/ /20		
Next Available Class Dates	1st Semester		2nd Semester
	/ /20 to / /20	/ /20 to / /20	
Who Is Requesting the Class Change? (check one)	<input type="checkbox"/> Apprentice	<input type="checkbox"/> Contractor	
Documentation Attached (check one)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
SIA Recommendation (check one)	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny	Reason:
TPM Decision (check one)	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny	Reason:
Notification calls made to:	<input type="checkbox"/> Contractor	<input type="checkbox"/> Apprentice	
Signature		Date	