



JOINT APPRENTICESHIP & TRAINING COMMITTEE
7193 JONESTOWN ROAD, HARRISBURG, PA. 17112
Telephone (717)652-3294 Fax (717) 541-1033
*Representing Plumbers & Pipefitters Local Union #520 of the United Association of Plumbing & Pipefitting
and the Mechanical Contractors Association of Central Pennsylvania*

Professional Reference Form

Local 520 Apprenticeship Program

Applicant Information

1. **Full Name of Applicant:** _____
2. **Position Applying For:** _____
3. **Date:** _____

Reference Information

1. **Full Name of Reference:** _____
2. **Title/Position:** _____
3. **Organization/Company:** _____
4. **Address:** _____

5. **Phone Number:** _____
6. **Email Address:** _____

Reference Relationship

1. **How long have you known the applicant?**
 Less than 6 months
 6 months to 1 year
 1 to 3 years
 More than 3 years
2. **In what capacity have you worked with or observed the applicant?**

Evaluation

Please rate the applicant on the following qualities using the scale:

1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good, 5 = Excellent

1. **Work Ethic:**

1 2 3 4 5

Comments: _____

2. **Reliability and Punctuality:**

1 2 3 4 5

Comments: _____

3. **Problem-Solving Abilities:**

1 2 3 4 5

Comments: _____

4. **Communication Skills:**

1 2 3 4 5

Comments: _____

5. **Teamwork and Collaboration:**

1 2 3 4 5

Comments: _____

6. **Overall Suitability for the Apprenticeship Program:**

1 2 3 4 5

Comments: _____

Additional Comments

Please provide any additional comments or insights about the applicant that you believe would be relevant for their application to the Local 520 Apprenticeship Program:

- **Why would this person make a good candidate for the apprenticeship program?**

Signature of Reference: _____

Date: _____