

Governor's Office of Workforce Innovation

Main phone # 702-486-8080

When completed, email to:

NVApprenticeship@gov.nv.gov



DRAFT

REQUEST FOR APPROVAL

EMERGENCY POLICY FOR IN-PERSON INSTRUCTION*

NEVADA REGISTERED APPRENTICESHIP PROGRAMS

Name of Registered Apprenticeship Program submitting request:	
Name & title of person submitting request:	
Contact information (incl. email, phone #):	

** This request form applies to the accompanying SAC emergency policy for in-person instruction ONLY when there is an emergency order declared by the Nevada Governor.*

Requestor's signature: _____ Date signed: _____

Below for OWINN use only

Date received: _____

Approved by: _____ Date signed: _____

State Apprenticeship Director