



Sacramento Electrical Training Center

***Nomination form for* JOURNEYMAN RECOGNITION AWARD**

Name of Journeyman _____

Employer of Journeyman _____

Comments about this journeyman (optional):

Apprentice nominating this journeyman _____

Your Class Year Group: ___ 1st ___ 2nd ___ 3rd ___ 4th ___ 5th

Signature of Apprentice: _____

Drop off, fax, or mail this nomination slip to the JATC:

Sacramento JATC
c/o Journeymen Award
2836 El Centro Road
Sacramento, CA 95833
Fax 916-646-0170