

AA Staff Signature:____

Apprenticeship Alabama Tax Credit Renewal Form Alabama Department of Commerce | Apprenticeship Alabama 1 Technology Court, Montgomery, AL 36116 | 334.280.4400 For Second Year and Up Applicants



Date (mm/dd/yyyy):	Federal EIN	Federal EIN:		O*NET Code:		
				RAPIDS Registration #		
Name of Company:		0	Contact Person:			
Mailing Address:						
Physical Address						
				Cell Phone:		
This form will be used in lieu of the App Appendix B (ETA-671) has never been with the Apprenticeship Alabama Tax C Year 2019. The apprentices must be re credit. List your apprentices in the tabl and their Apprenticeship Start Date.	provided for an apprent Credit Intent Form. You gistered in a USDOL A	t ice, please su u are allowed Apprenticeshi	ubmit with this for to claimed up to p Program for th	orm. This form should five (5) apprentices f e year you are reques	be sent for the Tax sting a tax	
Apprentice Name	Apprentice Identification Number (Last line of Form 671)	Apprentice Start Date	Social Security Number (a full SSN will be requested by AA staff)	Is the apprentice currently working? (To be verified by AA staff)	_	
					-	
Send this form to the Sponsor for signerify that the apprentices are curre company and/or sponsor representation credit@aidt.edu. Understand Apprevisit prior to the end of the year. A fixtatus. This information will be part order to effectively administer tax condered.	ntly active in the USI tives, it should be sen enticeship Alabama wifull SSN will be request of an Apprenticeship and the second	DOL apprer t to Appren II administer sted by the	nticeship databa ticeship Alabam r a compliance r AA staff to verit	se. Once the form in a at apprentice- review via the phone fy apprentice emplo	s signed by or a site syment	
The Company By signing this form, your company Registered Apprenticeship Program apprentice through the Apprentices Apprendix B (ETA-671), if required. Company Representative Signature	and your company is hip Alabama Tax Cred	applying fo dit Program	r a \$1000.00 t . By my signatu	ax credit for each quire, I consent to rele	ualifying ease the	
		Phone:				
The Sponsor My signature below verifies that to to our USDOL Registered Apprentice	he best of my knowle				enrolled in	
Sponsor Signature:		Date:				
Information Verified by:						

______ Date:_____