

July 22, 2022

Subject: Person In Charge Training

Attn: City or Tribal Administrator

The Alaska Energy Authority (AEA) has an upcoming **Person In Charge Training Class beginning December 5, 2022**. We invite you to submit names of individuals you would like to send to this training session. To be considered for training, candidates must be employed as an operator at the bulk fuel tank farm in your community.

The training session is one week long and will be held on-campus at the Alaska Vocational Technical and Educational Center (AVTEC) in Seward, Alaska. Students who complete and pass the course will receive a certificate.

If you would like, you may submit more than one candidate application for these AVTEC training sessions. Please indicate which individual is the primary and which the alternate candidate is. If space is available, both candidates may be able to attend.

If you are interested in this upcoming class, you will need to complete and submit an application November 28, 2022. As the class is on a first-come, first-served basis, we encourage you to submit your application as soon as possible.

If you have any questions, please contact me at (907) 771-3093 or <a href="mailto:ituomi@akenergyauthority.org">ituomi@akenergyauthority.org</a>. I look forward to hearing from you.

Sincerely,

Justin Tuomi Rural Assistance Manager



#### EMPLOYMENT AGREEMENT

[Insert Name of Bulk Fuel Facility]

This Agreement is entered into on \_\_\_\_\_\_ (date) between (employee name) and

[Bulk Fuel Manager or Other Authority).

By this Agreement, it is agreed that new or continued employment to the above mentioned employee who, at the expense of the Alaska Energy Authority (AEA), successfully completes the Bulk Fuel Operator Training Course. The individual named was recommended to AEA for training by and employment will be

This Agreement in no way limits or constrains the utility from terminating the individual's employment for cause or for occurrences beyond its control.

This Agreement has been agreed to and executed by:

guaranteed at \_ (Name of Bulk Fuel Facility).

For Employee:	For Above Named Utility/Facility:
Signature	Signature/Utility Manager or Authority
Printed Name	Printed Name
Title	Title
Date	Date
	Manager Contact Phone Number



## Participant Contact Sheet

ALL portions of this form MUST be filled out.

First Name	Last Name			
Home Phone	Work or Message Phone			
Fax Number	Region			
Mailing Address	City, State Zip			
Utility/City Manager Name	Contact Number			
Work Address (if applicable)	City, State Zip			



PERSONAL INFORMATION — Please send a photocopy of a government-issued picture I.D.						
				_	_	
Last Name	First Name		M. I	I. Social Security	Social Security Number (required)	
Mailing Address	City	 State		 Date of Birth	□ M □ F Gender	
Mailing Address	City	State	Zip Code	Date of Birth	Gender	
Home Phone	() Cell Phone		E-mail Ad	dress		
TRAINING CHOICE – Please lis	st the training course you a	re applying	for.			
Course Name:	In Charge		Enro	Ilment Date Desired:		
EDUCATIONAL BACKGROUN	ND — Please send a copy o	f High Scho	ool or GED Diploma	, or transcripts.		
High School Diploma? □Yes	□No					
J - 1	Graduation Year			City	State	
GED Diploma? □Yes □No _						
Attended College? □Yes □N				□Yes □No		
/ ttended conege. E163 E14	Years/Credits Earned		idonai Training.		rs Attended	
FINANCIAL INFORMATION -	Financial aid must be secu	red prior to	arrival for training.			
Please indicate how you intend recommended that you apply fo to apply with:		-				
<ul> <li>Pell Grant</li> </ul>	□Yes	□No				
<ul> <li>Scholarships</li> </ul>	□Yes	□No (Civi	c Organizations, Scho	ols, Private Companies)		
Alaska Student Loans	□Yes	□No				
Other Grants	☐Yes □No (State of Alaska Department of Labor and Workforce Development;  Department of Vocational Rehabilitation; Bureau of Indian Affairs)					
<ul> <li>Veteran's Benefits</li> </ul>	□Yes	□No				
<ul> <li>Personal Funds</li> </ul>	Personal Funds					
Please complete the area below IF you already know which agencies will be assisting you financially:						
Alaska Energy Auth	ority		Justin 7		771-3093	
Agency Name and Address			Contact F	Person and Phone Num	ber	
Agency Name and Address			Contact P	Person and Phone Num	ber	
Housing			ALASKA RESID	ENCY – THE APPLICAN	NT	
Please indicate your housing	preference while atte	ending	☐ is domiciled in	n the state of AK.		
training:		☐ is presently serving in the military with the intent of				
☐ Dormitory *MINIMUM AGE IS 18 YEARS OLD FOR ACCEPTANCE INTO THE DORM*		being domiciled in the state of AK upon completion of military duty.				
☐ Family Housing (Family Housing)	ousing is limited)		☐ has graduated from an accredited high school or post-			
☐ Off Campus		secondary institution in the state of AK, or has earned a GED while domiciled in the state of AK.				

BACKGROUND DATA		
Have you ever been convicted of a felony? □Yes □No If yes, submit copies of court judgment records for review by AVTEC's Counseling Department.		
Are you currently incarcerated, on probation or postion or post six months?  If yes, submit copies of court judgment records for review by AVT		
Have you been court ordered to complete an as:		
·	eletion of the treatment program for review by AVTEC's Counseling Department.	
How DID YOU HEAR ABOUT AVTEC?	CITIZENSHIP & ETHNICITY - Voluntary completion by all applicants	
□ Agency Referral □ Alumni Referral □ Direct-Mail Flyer □ Friends/Family	□Nonresident Alien □Race and Ethnicity Unknown □Hispanic of Any Race	
☐ H. S. Counselor/Teacher ☐ Internet ☐ Met AVTEC Rep at Job Fair ☐ Movie Ad ☐ Newspaper Ad ☐ Public Transportation ☐ Radio or TV Ad ☐ Toured AVTEC	ETHNICITY - Voluntary completion by Non-Hispanics only  □ American Indian or Alaska Native □ Asian □ Black or African American □ Native Hawaiian or Other Pacific Islander □ White □ Two or more races	
SPECIAL ACCOMMODATIONS		
Do you require any special accommodations? yes,pleaselist:	□Yes □No If	
EMERGENCY NOTIFICATION		
Name:	Relationship:	
Address:	City: State: Zip:	
Home Phone:Work Ph	one:Cell Phone:	
ADMISSION REQUIREMENTS - Read AVTEC's catalog	og for complete requirements of intended course.	
<ol> <li>A photocopy of your High School/GED transcripts or dip</li> <li>Applicants under the age of 18 must already have earned permission, and AVTEC Administration's approval befor</li> <li>Prior to acceptance, all applicants must successfully comprogram's requirements.</li> </ol>	rer's license, state ID card, tribal ID card) must be submitted.  slema must be submitted. (Official transcript is NOT necessary.)  ed their High School or GED diploma, have parental  e acceptance into any program is granted.  applete a reading and math assessment that meets the chosen  we a diploma, he/she must pass the "Ability to Benefit" test.  dents. (Other costs are the same as for Alaskan residents.)	
SIGNATURE – To the best of my knowledge, the above in	nformation is true and correct	
Applicants who do not pay the \$35 application fee, do not complete their application process, or do not provide accurate and complete information will not be scheduled for training. If an applicant provides false information, his/her acceptance will be canceled. Failure to pay by due dates may result in cancellation from training or dismissal. <a href="https://doi.org/10.1001/journal.org/">THE TRAINING</a> APPLICATION IS VALID FOR ONE YEAR.  BY SUBMITTING THIS APPLICATION, I AGREE THAT I AM SOLELY RESPONSIBLE FOR ANY DEBT I HAVE INCURRED AT AVTEC.		
SIGNATURE		



# Alaska Energy Authority Training Program Statement of Understanding

#### ZERO TOLERANCE & INCOMPLETION POLICY

The Alaska Energy Authority (AEA) has implemented a zero tolerance policy for the use or possession of alcohol and illegal drugs within its training programs. Therefore, individuals actively participating in a training program found to be under the influence or in possession of alcohol or illegal drugs shall be removed immediately from the program. This zero tolerance policy applies to all participants from the time they leave their communities. The employer of a participant, who chooses not to comply with this AEA policy and is removed from or fails to complete the program, is responsible for any and all training costs incurred(up to \$6500). This includes, but is not limited to, bus fare, lodging expenses, tuition and meal costs.

<u> </u>	(name of training participant) certify that I clearly understand and agree to the		
terms and conditions of the a	above stated policy.		
Signature, Training Partic	cipant		
X	Date		
I the terms and conditions of the	(name of supervisor or designee) certify that I clearly understand and agree to he above stated policy.		
I the terms and conditions of the Signature, Supervisor or	he above stated policy.		

### **AVTEC - A**LASKA'S INSTITUTE OF **T**ECHNOLOGY

#### **DORMITORY APPLICATION**

#### **CONDITIONS OF THE CONTRACT AND PAYMENT**

This is a binding agreement between AVTEC and the student signing this contract.

This contract covers the entire academic year for which the student has contracted for training.

- A student may move in up to two days prior to the first date of training, and move out up to two days after graduation/withdrawal/termination. Any time beyond two days must be arranged with the Student Services Coordinator.
- The student resident must pay his/her dormitory bill for the entire term the first day of training. Fall term is the period of time from the start of the student's training program until the Christmas break. Spring term is the period of time from the end of Christmas break until the student's graduation date or summer break, whichever comes first. Failure to make timely payments may terminate the contract.
- If the student chooses to move into the dorms after the term has begun, fees must be paid when the student moves in for charges starting the day they move in until the end of the term.
- Students may move out of the dorms at the end of each term (Christmas and summer) without penalty. The student must notify a dormitory attendant that they do not intend to move back into the dormitory after the break. This notification must be made in writing.
- If a student moves from the dormitory at any time during the contract period, either by choice, eviction, withdrawal, or termination, the student forfeits payments made for the current dormitory term charges. Students who graduate early will be charged up to the date they move out of the dorms. Any payment in excess of charges will be refunded.
- Students who have been awarded sufficient financial aid to cover tuition and room and board payments may delay full payment until financial aid disburses. All payments will be automatically deducted for the remaining balance once the financial aid disburses.
- Students who do not meet requirements for their financial aid disbursement, due to not meeting Satisfactory Academic Progress requirements or any other reason, must make other payment arrangements for what is owed AVTEC.
- Termination of this contract for extenuating circumstances must be addressed in writing to the Student Services Coordinator and/or Deputy Director.

#### **CONDITIONS OF RESIDENCE**

- Dorm rooms are assigned by the AVTEC dorm staff; changes to room assignments must be made by the dorm staff.
- Each resident is responsible for keeping his/her residence clean and for preventing damage beyond reasonable wear to AVTEC property. Damage charges will be billed to the resident when damage occurs, or when the resident checks out. The resident will be responsible for the costs.
- AVTEC will assume no responsibility for the loss or damage of personal property of residents.
- The resident agrees to abide by all rules and regulations as printed in the AVTEC Student Handbook. Specifically alcohol and controlled substances are strictly prohibited from the dormitories, and all AVTEC facilities. Any student who is found in possession and/or under the influence of alcohol and /or controlled substances will receive an eviction notice from the dormitory with no refund of room and board for the term in which the eviction occurs. All other rules and regulations must be read and understood before the signing of this contract.



SUBMIT THIS APPLICATION TO RESERVE A DORM ROOM				
Last Name	First Name		 M.I.	_ Gender: □ Male □ Female
	City	State	Zip Code	E-mail Address
Date of Birth Current Age	- ( Home F	/ Phone Number	( Cell Pho	one Number
AVTEC - A NON-SMOKING FACILI		TRAINING PRO	GRAM	
☐ I am a smoker☐ I am a non-smoker		Start Date:	Gr	aduation Date:
EMERGENCY NOTIFICATION				
	elationship	() _ Home Pho		() Cell Phone
DORM PREFERENCE / ROOMMATE F	REQUEST			
SPECIAL NEEDS / ACCOMMODATIO	NS (Please conta	ct AVTEC Admissions (	Office with docum	nented disability information.)
		SIGNATURE		
I agree to be bound by the terms of th	e Dormitory F	Residence Contrac	t printed on t	he back of this application.
I accept financial responsibility for the only at the end of a school term (at Ch				derstand I can break this contract
I understand that any violation of AVT detailed in AVTEC publications will resobligation.				
MINIMUM AGE IS 18 FOR ACCEPTANCE INTO THE DORMITORY.				
Printed Name of Student	St	udent's Signature		Date



# Alaska Energy Authority Training Program Statement of Understanding

### **REQUIRED SAFETY ITEMS**

Due to safety requirements and in order to participate in the Alaska Energy Authority's training programs at AVTEC, trainees MUST have the following items:

- cotton duck bib overalls (i.e. Carharts);
- boots with oil resistant soles (non-slip) and safety toes (i.e. steel toed); and
- safety glasses

Utility/Entity Name\_\_\_\_

If individuals need to purchase the above mentioned items, they will have the opportunity before they begin their classes. The approximate cost of the needed items is \$310 if purchased at Brown & Hawkin's, Urbach's and True Value in Seward.

	ns and with no means to purchase, they will not be allowed to participate in the als cannot be allowed on training sites without the above mentioned items
Itraining or will purchase them before class	(name of training participant) certify that I will bring these items with me to es begin.
Signature, Training Participant	
X	Date
Iagree to the terms and conditions of the a	(name of supervisor or designee) certify that I clearly understand and love stated policy and will make clear how the employee will pay for the items.
Signature, Supervisor or Designee	
X	Date