# Fall 2023 MCIC Educational Offerings - Enrollment Form

## **ELIGIBILITY**

Attendees must be journeymen, be employed by a contributing contractor to the Mechanical Contracting Industry Council, and be in good standing with their Local Union to participate in this program.

## TWO WAYS TO ENROLL

Select the course(s) you would like to attend by checking the box placed before the class. You must obtain your employer's approval with his signature. Send your completed form by email (pshaughnessy@mcanj.org). Online registration is also available at http://www.mcicnj.org/application/

# **TUITION, FEES, ATTENDANCE & COMPLETION CERTIFICATES**

MCIC will pay all tuition and fees. Accepted applicants are <u>required</u> to attend all scheduled sessions. Should an attendee expect to miss any class, he/she <u>must</u> either call (973-912-0042) or email (pshaughnessy@mcanj.org) the MCIC office <u>before</u> the start of that particular class. Each student meeting the attendance policy will receive a Certificate of Completion.

## **CLASS LOCATION AND TIME**

MCIC office, 211 Mountain Avenue (Side entrance), Springfield, NJ 07081-0390 from **7:00-9:30 p.m.**, unless otherwise specified in the course description.

Select course(s): I meet the eligibility requirements as described above
Basic HVAC & Refrigeration: 8 Sessions, Tuesdays, September 12, 19, 26 - October 3, 17, 24, 31 - November 14 (No class on November 7th)
Plumbing Systems and Project Management: 5 Sessions, Thursdays, September 14, 21, 28 – October 5, 12
Blueprint Reading and Estimating: <u>HYBRID_CLASS</u> - VIRTUAL OR IN PERSON - choose one below 6 Sessions, Wednesdays, September 20, 27 - October 4, 11, 18, 25 - CHOOSE ONE: VIRTUAL IN-PERSON
American Red Cross Standard - First Aid, CPR & AED: 1 Session, Monday, Dec. 4 – 4:00pm-7:30pm
All fields below are REQUIRED. All correspondence, including class confirmation, will be sent via email.
Applicant's Full Name  Applicant's Cell #
Applicant's Email Address
Employer's Name  Employer's Union Affiliation(s)
Employer's Address
Employer's Phone Applicant's Present Position
Approved by (Your Employer's Name and Title)

Email your completed Enrollment Application to <a href="mailto:pshaughnessy@mcanj.org">pshaughnessy@mcanj.org</a> OR sign-up online: <a href="mailto:http://www.mcicnj.org/application/">http://www.mcicnj.org/application/</a>