



# SMACNA-AB EMPLOYER RECOMMENDATION

SMACNA-AB – Scholarship Application 2021

**MEMBER Company Name:**

Company Name			
Main Contact ( <i>person submitting application</i> )			
	<i>First</i>	<i>Last</i>	
Email		Phone	

**APPLICANTS Information:**

Applicants Last Name			
Applicants First Name			
Applicants Email			
Applicants Apprentice ID/Number:	In your opinion, does this individual meet or exceed safety standards?	How many months has this apprentice has worked for you?	In your opinion, is this individual deserving of an SMACNA-AB Scholarship?
Has this employee <b>applied</b> for this scholarship in the past?	If yes, what year?	Has applicant <b>received</b> this scholarship in the past?	If yes, what year?

**NOTE TO THE EMPLOYER OR PERSON AUTHORIZED ON BEHALF OF THE EMPLOYER TO COMPLETE THIS FORM**  
(*Supervisor or supervising certified tradesperson*)

Your assessment of this apprentice is an essential component in the scholarship selection process. It **MUST** be submitted before **May 14, 2021**, for the apprentice to be considered for the SMACNA-AB Members Scholarship.

The SMACNA-AB scholarships are intended to assist our member company employees to achieve their apprenticeship as a sheet metal worker.



# SHEET METAL CONTRACTORS ASSOCIATION OF ALBERTA (SMACNA-AB)

***Your written comments are also critical to the evaluation of this apprentice.***

Why is this apprentice an outstanding candidate for an SMACNA-AB Scholarship? Please include comments on some of the following: punctuality, work relationships attitude, attendance, willingness to learn and/or representation of self, employer and Jobsite. *(feel free to submit separate letter of recommendation)*

Sheet Metal Contractors Association of Alberta  
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Calgary, Alberta T2E 7J2  
403-250-7040  
[wilma@smcaa.ca](mailto:wilma@smcaa.ca)



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