

**NEW MEXICO PUBLIC EDUCATION DEPARTMENT
APPRENTICESHIP ASSISTANCE ACT**

MID-YEAR SURVEY

Name of Program: _____ OA or SAC Number: _____
 Contact Person: _____ Phone: _____ Fiscal Year _____

Check here if you are **NOT** requesting a change:

The MID-YEAR Survey is conducted in the winter of every year for the Apprenticeship Assistance Act in order to use all resources efficiently and provide additional funding for all programs, as available.

SECTION I – APPRENTICE DECREASE

- DIRECTIONS:** To request a **DECREASE** complete the following:
 Column A: Insert the number of apprentices for which you are currently approved.
 Column B: Insert the number of apprentices that you would like to **DECREASE**.
 Column C: Insert the number of training hours approved by OA or SAC for the trade.
 Column D: Multiply column B and column C.
 Column E: Insert the approved hourly rate.
 Column F: Multiply columns D and E. This is your total **DECREASE** request.

A	B	C	D	E	F
Current Number of Apprentices	Number of Apprentices that you would like to DECREASE	Approved Training Hours Per Apprentice	Total Hours # of Apprentices (B) times # of Hours (C)	Hourly Rate	TOTAL DECREASE REQUESTED
					\$