



**United Association of  
Journeymen and Apprentices of the  
Plumbing and Pipefitting Industry**

# **Accelerated Welding Program**

**Candidate Application & Assessment Packet  
Version 16: January 2021**



**VETERANS IN PIPING (VIP)  
Fort Campbell, KY**



## UA VIP Welding Program Fort Campbell, Kentucky



United Association of Plumbers and Pipefitters (UA) coordinate the Veterans in Piping (VIP) Program. The VIP program is designed for active duty Veterans, who are able to attend an 18 week welding training program.

Upon successful completion of the 18 week training program, the veteran will be guaranteed a job somewhere in the United States. All efforts will be made by the United Association of Plumbers and Pipefitters (UA) to place the graduate in a location he/she is interested in working and is qualified. However there is no job location preference guarantee.

Upon completion of the training and acceptance into an apprenticeship position, the veteran has access to an apprenticeship program with a progressive wage scale.

- Location: UA Training Center, 6096 Angels Rd., Fort Campbell, KY
- Training: 4 days a week, 10 hours a day (18 weeks)
- Three to four classes per year are projected to be conducted.
- Background checks may be conducted for each student to include drug testing.
- Cost: No cost to Soldiers; No cost to Army
- Only those veterans who desire this career field course should apply. Those veterans with personal issues, family challenges that would prohibit them from attending all classes or are **unwilling to relocate** should not apply.

### REQUIREMENTS FOR APPLICATION:

- Applicants to the training program must be 18 years old or older, with a high school diploma or a General Education Development (GED) certificate.
- Applicants must possess a current driver's license.
- Students must have good eyesight, correctable with glasses (no contacts allowed during welding training). Student may be asked to provide a copy of a recent eye exam (within the last six-months) showing acceptable near distance vision.
- Applicants must have ability to lift 50 pounds and stand for long periods of time
- **ASVAB MM score of 85 or higher and GT score of 85 or higher.**
- **Must have Separation/Retirement date one month either side of the class end date; with expectation of Honorable/General Discharge**
- Must complete Soldier for Life Program transition classes before the start of class and provide a copy of your DD 2648 (NOV 16) (or print out of future appointments)

### POC's for Career Skills Program:

CSP Installation Administrator: 270-798-4974, 270-412-1128 or 270-798-3195 or visit us at 5663 Screaming Eagle Blvd.

**Section I.** Please review and acknowledge the requirements of the program by initialing, and dating the following. Forward a completed application packet and **include Enlisted Records Brief (ERB) with your application.**

	I understand that the Veterans in Piping (VIP) training program is a full-time, 4 days a week, 10 hours a day training program.
	I understand that the VIP training is provided at no cost.
	I understand that I must be recommended by my chain of command, be interviewed and accepted into the program by UA.
	I have a high school diploma or GED certificate.
	I possess a current, valid Driver's License and I understand that during my training program I must maintain a clean driving record and have no criminal convictions.
	I understand that I may <b>MUST</b> notify my chain of command <u>immediately</u> if I am <b>NOT</b> selected to participate in the VIP program.
	If retiring, I understand that extension/early separation is non-applicable. I understand that re-enlisting or extending my service obligation while in the program to stay in the Army beyond 30 days after the course graduation date will be cause for immediate termination from training.
	I understand that I must complete the Soldier for Life requirements prior to the class start date & provide a copy of your DD 2648 (NOV 16) (or print out of future appointments).
	I understand that there are physical requirements of the occupation and that I may be directed to acquire a physician's approval before being accepted into the VIP program.
	I will complete a resume to program standards, and keep it up to date with training certifications obtained.
	I understand that upon successful completion, my job placement may be outside the States of Kentucky/Tennessee.

I have read the above information in Section II and I fully understand the requirements as a participant in this program. I furthermore understand by providing my signature below I am agreeing to participate fully in the program and to keep my instructors and counselors informed of any change that may impact my successful completion of the training program.

**The programs are eighteen weeks in duration, running Monday through Thursday from 7:00am to 5:30pm.**

<i>Welding Class 17</i>		<i>Welding Class 18</i>		<i>Welding Class 19</i>	
Interviews:	TBD	Interviews:	TBD	Interviews:	TBD
Start Date:	11-15-21	Start Date:	04-11-22	Start Date:	08-29-22
Graduation:	03-24-22	Graduation:	08-11-22	Graduation:	12-29-22

**Section II. Applicant Information**

<b>1. Signature</b>	<b>2. Date:</b>	
<b>3. Printed Name (Last, First, MI)</b>		
<b>4. Unit of Assignment: BDE:</b>	<b>BN/SQ:</b>	<b>CO/Troop:</b>
<b>5. Phone number:</b>	<b>6. Civilian Email:</b>	
<b>7. Separation Date:</b>	<b>8. Projected Class #:</b>	
<b>9. Age:</b>		
<b>Notes:</b>		

**Section III.**

**BATTALION COMMANDER AND COMMAND SERGEANT MAJOR PORTION.** Service member is transitioning from Fort Campbell and approved to participate in the Veterans in Piping (VIP) program. We understand that our support of this program allows the service member to participate in an accelerated training program in accordance with the terms of the labor union/apprenticeship organization. We will support the service member’s participation and attendance in this program, if selected, for the entire 18 weeks of the training and understand the Service member’s place of duty (Monday thru Thursday) is the training program site. We can request attendance information at any time from the Education Center as all Soldiers are required to sign in and out of all VIP classes.

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FIRST SERGEANT (RANK/ PRINTED NAME) / SIGNATURE/DATE

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COMPANY COMMANDER (RANK/ PRINTED NAME) / SIGNATURE/DATE

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BATTALION COMMAND SERGEANT MAJOR (RANK/ PRINTED NAME) / SIGNATURE/ DATE

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BATTALION COMMANDER (RANK/ PRINTED NAME) / SIGNATURE/DATE

Career Skills Program  
5663 Screaming Eagle Blvd.  
Fort Campbell, KY 42223  
(270)798-4974

_____	
<i>(Print Soldier's Name)</i>	
_____	_____
<i>(ETS DATE)</i>	<i>TERMINAL LEAVE BEGINS)</i>

**CSP Student Attendance Policy  
VIP Program**

\_\_\_\_\_ I understand the participation in the VIP Career Skills Program is a privilege and my primary place of duty will be at UA Training Center, 6096 Angels Rd., Fort Campbell, KY; Monday-Thursday 0700-1730 for 18 weeks.

\_\_\_\_\_ I understand that the class leader will take attendance within the first 15 minutes of class each day. Anyone not in class will be immediately reported to CSP staff.

\_\_\_\_\_ I understand that I will notify CSP staff or the class leader of upcoming appointments or scheduled missed days (to include any emergency's which will preclude you from attending class).

\_\_\_\_\_ I understand that more than 3 **unexcused** absences will result in my being dropped from the program.

\_\_\_\_\_ I understand that I must provide an appointment slip or doctor's note to the CSP staff within 3 business days of the missed class day. If documentation is not provided the missed class session will result in an unexcused absence. Documentation can be delivered in person or through email.

\_\_\_\_\_ I understand that if I incur 3 unexcused absences that my company 1SG will be notified of the days missed.

\_\_\_\_\_ I understand that appointments should be made outside of classroom room hours to help decrease absences.

I have read the above information and I fully understand the requirements as a participant in this program. I furthermore understand by providing my signature below I am agreeing to participate fully in the program and to keep my instructors and counselors informed of any change that may impact my successful completion of the training.

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\_\_\_\_\_  
Service Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Company 1SG Name (Print)

\_\_\_\_\_  
Company 1SG Signature

\_\_\_\_\_  
Company 1SG Email

\_\_\_\_\_  
Company 1SG Phone