

Alabama Apprenticeship Tax Credit Application-2024

Mail completed application to:

Alabama Office of Apprenticeship

	1 Technology Court Montgom	nery, Alabama 36116
	Phone: 334.280	0.4414
Date of this ap	plication (mm/dd/yyyy):/	Employer Federal EIN:
Name of Empl	oyer Applying for Tax Credit:	
Sponsor Progr	am Number:	
Employer Mai	ling Address:	
City:	State: Zip:	
Employer Poin	t of Contact:	
Job Title:		
		Cell Phone:
 Ar of An em The crunder The ta The cruregard 	ployer is allowed up to a \$1,250 tax credit for employer may claim an additional \$500 tax 18 for 90 days of the qualified employment uployer can claim a tax credit for up to ten (2 edit can be applied against any income tax of Chapters 16 or 18 of Title 40. x credit is not refundable, non-transferable edit cannot be claimed for an individual apprent of the second content	x credit for apprentices who are under the age t period. 10) apprentices annually. or financial institution excise tax imposed , and cannot be carried forward.
	E FOR THE TAX CREDIT, THE EMPLOYER:	
	add apprentices on or after January 1, 2017	
	apply for the tax credit annually by submitti ation" (this form) to the Alabama Office of A	• • • • • • • • • • • • • • • • • • • •
	activaly participating in a registered appr	•

- Must be actively participating in a registered apprenticeship agreement with the U.S.
 Department of Labor
- Must verify eligibility of each apprentice for which the credit is being claimed.

By signing this application, I attest that the information within is true and accurate to the best of my
knowledge and that I am authorized to act on behalf of the identified employer in such matters.

Employer representative signature:	



Questions for determining eligibility of individual apprentice(s) for whom the employer wishes to claim a tax credit.

Use the questions below to ensure eligibility for <u>each</u> apprentice for whom you wish to claim a tax credit.

- Does the apprentice's record in the RAPIDS database include a copy of the USDOL Program
 Registration and Apprenticeship Agreement (Form 671) for this apprentice?
 - a. Yes (Proceed to #2)
 - b. No (Contact program sponsor to complete documentation and upload before proceeding.)
- 2. As of the date of this application, has the apprentice completed at least 7 months of employment during calendar year 2024 with the employer seeking the tax credit?
 - a. Yes (Apprentice qualifies for tax credit.)
 - b. No (Apprentice does not qualify for tax credit.)



Identify the specific apprentices for whom you are seeking a tax credit.

Apprentice #1 RAPIDS ID Number:		First Name:	
Apprentice #2 RAPIDS ID Number:		First Name:	
Apprentice #3 RAPIDS ID Number:		First Name:	
Apprentice #4 RAPIDS ID Number:		First Name:	
Apprentice #5 RAPIDS ID Number:		First Name:	
Apprentice #6 RAPIDS ID Number:		First Name:	
Apprentice #7 RAPIDS ID Number:		First Name:	
Apprentice #8 RAPIDS ID Number:		First Name:	
Apprentice #9 RAPIDS ID Number:		First Name:	
Apprentice #10 RAPIDS ID Number:		First Name:	