

## APPRENTICESHIP UPDATE MEMORANDUM



Date:	MATC#:
Maryland Department of Labor Division of Workforce Development and Adult Le Maryland Apprenticeship and Training Program 100 S. Charles Street, Tower 1, Suite 2000 Baltimore, MD 21201	earning
Reference: Apprenticeship Cancellation/Ex	tension
To Whom It May Concern:	
This is to notify the Council that the status of the f	following apprentice has changed:
Name:	Social Security Number:
Your records should be adjusted to reflect the following update:	
Apprentice's term has been extended to.  New	v Completion Date
Apprentice should be canceled as of	ctive Date
This action has been taken for the reason noted below:	
1. Apprentice voluntarily resigned.	
2. Apprentice failed to make satisfactory progre	ss in related instruction.
3. Apprentice failed to make satisfactory progress on the job.	
4. Other reason(s); state briefly:	
Signature	Title

Division of Workforce Development and Adult Learning Maryland Apprenticeship and Training Program 100 S. Charles Street, Tower 1, Suite 2000 Baltimore, MD 21201 410-767-2246