



**Journeyman Apprentice Training Fund  
Training Reimbursement Application (TRAE)**

(also used for pre-authorizations)

Employer Name	
Course Name	
Vendor/Provider	
Duration (Hours)	
Start and End Date	
Tuition Cost	
Book Cost	

**Technicians Attending Training Course**

(include First and Last Names)

---

---

---

---

*Internal Use Only:*

Date of Application	
Pre-authorized by	
Amount Approved	
Final Approval Date	

To expedite the pre-authorization process please attach a course outline and return this form to:

UA Local 516 JATF  
19560 - 96th Avenue, Surrey, BC, V4N 4C3  
Email: [jatf@ua516.org](mailto:jatf@ua516.org)

Upon completion of training, submit copies of any training certificate(s) and paid receipt(s).  
The reimbursement process will be completed once all documentation is verified by the JATF.