



Cheyenne and Arapaho Tribes Judicial Branch & Reintegration Program



Fiber Optic Technician Training Program Information Sheet

The Cheyenne and Arapaho Tribes Judicial Branch and Reintegration Program is collaborating with OSU IT and offering a Fiber Optic Technician Training Program in Concho, OK.

Applicants are required to complete and have copies of the following Documents:

- Must be 18 yrs or older
- Enrolled in a Federally Recognized Tribes (CDIB or CDIB II) & (State ID) – Must be Color Copy
- Other Minorities (State ID) – Must be Color Copy
 - (Waitlist will be kept for Fiber Optic Technician Training Program)
- High School Diploma/GED
- Vaccination Card
- Must be able to pass a Physical and Drug Test
 - **Random testing throughout training**
- Must be able to obtain CDL upon completion of training
- Verification Funding Form (\$3,100.00 per participant to OSU IT)
 - Must be on Program(s) Letter Head: (Stating Program(s) is paying the Tuition)
 - Completed Payment Agreement Letter from OSU IT
 - Completed Pay in full Letter from OSU IT

Additional Equipment (Applicants Must Have):

- Safety Glasses
- No Cut Gloves
- Hard Hat
- Steel-Toed Boots
- Long Sleeve Shirts

Training Information

The Fiber Optic Technician Training Program cohort will run for two years. Each Cohort will be eight weeks and will have up to 15 students per scheduled cohort session.

Fiber Technician Training Program: The training will be delivered in a traditional, face-to-face, instructor-led format. Training will last for eight weeks with a 4-week paid internship immediately following. Certificates of Achievement will be earned upon completion of the training courses.

This short course training program is designed to train individuals in the Fiber Technician trade.

Covered topics will include:

- Pole climbing; including learning to climb in the power zone
- Jigging or pulling fiber from start to finish
- Introduction to fiber splicing
- Both residential and commercial
- Learning to splice
- Hanging strands and fiber and lashing them together
- Hanging self-support and sagging to proper tension & troubleshooting
- OSHA 10 and CPR certifications are also included.

MATERIALS PROVIDED

- Student climbing gear as required to be used during the duration of the training and other related training supplies. Course materials/supplies
- Pre-Test and Post-Test Exams
- Certificate of Achievement
 - With each cohort, there will be a possibility that a person on the waiting list might enter that current cohort. (Depending on any dropouts during the current cohort session.)

Please Note:

- Training required full attendance.
- Tuition must be paid in full or have an agreement with OSU IT.
- Paying the training tuition is the applicant's responsibility.
- Must have completed application with supporting documents to be considered for Training.
- Will accept completed applications by mail or hand-delivered.
 - Mailing Address: **Cheyenne and Arapaho Tribes Justice Branch
C/O Reintegration Program
P.O. Box 102 / Concho OK 73022**
 - Hand-Delivered: **Cheyenne and Arapaho Tribes Justice Center
100 W. Black Kettle Blvd / Concho OK 73022
Business Hours: M – F, 8:30 am to 4:30 pm
Closed: 12:00 pm to 1:00 pm**

This is felon-friendly and an excellent opportunity for all who want to be part of a growing industry. The Fiber Optics Technician Training will have a 100% job placement.



Judicial Branch
PO Box 102
Concho, OK 73022
405-422-7451

| | |
|---------------------------|-------------|
| Office Use | |
| Date: _____ | Time: _____ |
| JDB Staff: _____ | |
| Applicant Initials: _____ | |

Fiber Optics Technician Training Program

Open: 1/20/2023 – Deadline: 2/13/2023

Please Print

Applicant Information

First Name: _____ Middle Initial: _____ Last Name: _____

SSN: _____ DOB: _____ Gender: () Male () Female

Street Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Secondary Number: _____ Email: _____

U.S. Citizen: () Yes () NO

Client of Reintegration Program: () Yes () No If Yes, Program Name: _____

Are you enrolled in a Federally Recognized Tribe: () Yes () No If yes, which Tribe: _____

If Not Enrolled, do you hold a CDIB II: () Yes () No **Not Enrolled but have a Parent Enrolled**

Ethnicity: () Hispanic or Latino () Not Hispanic or Latino () White () Asian () Other

() American Indian/Alaskan Native () Black or African American () Hawaiian Native or Pacific Islander

Primary Language(s): () English () Other: _____

Do you have a Documented Medical Disability: () Yes () No

Please list your limitations: _____

Do you have Any Prior Lineman Experience: () Yes () No

Do you have a Funding Source to Cover Tuition Costs: () Yes () No

If Yes, Please note what Program(s) or self-pay will cover the Tuition Costs: _____

****Funding source is the responsibility of the applicant. Please see the application eligibility requirements for admission to training. ****

Do you have work boots for the physical test (No soft toe shoes allowed): () Yes () No

Vaccination Status: () Vaccinated () Not Vaccinated

Must be vaccinated and provide proof of vaccination.

Date: _____ Booster Date: _____ Facility: _____

Military Information

Registered with Selective Service (Males Only): () Yes () No

Veteran: () Yes () No

Branch: _____ Start Date: _____ Release Date: _____

Type of Discharge: _____

Spouse of a Veteran: () Yes () No

Educational Background

High School Graduate/GED: () Yes () No Graduation/Completion Date: _____

School Name: _____ City: _____ State: _____

College Graduate: () Yes () No Graduation Date: _____ Currently Enrolled: () Yes () No

() Associate's Degree () Bachelor's Degree () Master's Degree () other _____

College/School Name: _____

Vocational training: () Yes () No Graduation Date: _____ Training Facility: _____

(Active) Certifications: _____

Employment Information

Most Recent Employer: _____ **City:** _____ **Job Title:** _____

Start Date: _____ **End Date:** _____ **Currently Employed:** () Yes () No

Salary/Hr. Wage: _____ **Hours worked per week:** _____

Job duties: _____

By my signature below, I have read and attested that the information provided above is true and correct. I understand that if I purposely falsify any documents or information I have provided, I will jeopardize current and future services/training under the Cheyenne and Arapaho Tribes Judicial Branch and programs.

_____ (INTAL.) I have read and understand the Fiber Optic Technician Training Information Sheet.

I understand that I must provide the Cheyenne and Arapaho Tribes Judicial Branch & Reintegration Program with this signed statement for eligibility and/or continued eligibility.

Signature

Date

State of Oklahoma County of: _____

Subscribed and sworn to before me this _____ day of _____ 20 ____.

Notary Printed Name: _____

Notary Signature: _____

My Commission expires: _____

Notary Public Stamp:



INSTITUTE OF TECHNOLOGY

Workforce & Economic Development

Payment Agreement for Fiber Technician Course Cheyenne and Arapaho Tribes Reintegration Program

Date: _____

Contact Information:

Student Name: _____

Student Mailing Address: _____

Student Phone Number: _____

Course Costs: \$3,100.00

Costs paid by external agencies (if applicable):

Agency Name: _____ Amount: \$ _____

Agency Name: _____ Amount: \$ _____

Total amount due to OSUIT by Student: \$ _____

Payment Arrangements (Select One):

- _____ Student will pay the balance to OSUIT in full within two weeks of the start date (_____)
- _____ Student will make two payments to OSUIT with the first payment due on or before _____ and the second payment due on or before _____.
- _____ Other: _____

Student signature:

OSUIT Representative Signature
