



**COLORADO**  
**Office of the State Architect**  
Department of Personnel & Administration

**REQUEST FOR APPRENTICE WAIVER  
FOR COMPLIANCE WITH COLORADO APPRENTICESHIP REQUIREMENTS**

- No responsive, eligible subcontractors bid the project
  - Confirmed - Approved**
  
- No responsive, eligible Apprenticeship program within 50 miles one-way of the project
  - Confirmed - Approved**

Project Number: _____	Subcontractor: _____
Project Name: _____	List Trades: _____
General Contractor: _____	_____
Phone: _____	_____
Email: _____	_____

**Please attach additional documentation/evidence needed (if any) to support the waiver request.**

Agency: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Kathleen Miller  
Office of the State Architect  
Department of Personnel and Administration  
1525 Sherman St  
Denver, CO. 80203

Phone: (303) 866-5857  
kathleen.miller@state.co.us

**THIS FORM MUST BE SUBMITTED TO OSA PRIOR TO CONTRACT EXECUTION.**