

APPLICATION FOR INCUMBENT WORKER TRAINING FUNDS

Applicant Data	
Company:	
Trainee's first and last name:	Trainee's Job Title:
Home Address, City, State, Zip (must be PA resident):	
Phone:	COUNTY the Trainee resides in:
Social Security # :	Date of Birth:
Email:	Company Website:
Company/Organization Data	
Size of Company:	
#Employees at Location: <input style="width: 50px;" type="text"/>	#Employees Worldwide: <input style="width: 50px;" type="text"/>
Federal Employer Identification Number (FEIN): <input style="width: 50px;" type="text"/>	
NAICS Industry Code (North American Industry Classification Code): <input style="width: 50px;" type="text"/>	
Project Information	
Title of the Proposed Training Course (also email the full course description to SEI Coordinator): <input style="width: 90%; height: 20px;" type="text"/>	
Training Start Date: <input style="width: 50px;" type="text"/> Training Complete Date: <input style="width: 50px;" type="text"/>	
Total # of employees to be trained: <input style="width: 50px;" type="text"/>	
Cost of Training per person: \$ <input style="width: 50px;" type="text"/>	
<i>(Grant may reimburse up to 50% of Total Contracted Instructional Cost)</i>	
<p>REQUIRED: Use the table on page four or provide a separate spreadsheet itemizing the Job-related training and numbers to be trained that you are requesting funds for <i>(must include Standard Occupational Classification (SOC*) codes or job titles of attendees)</i>. Remember to include training provider. <i>*see SEI Industry Partnership Training Plan.</i></p>	

Briefly describe your training needs and explain how upskilling current employees will help them meet job requirements, retain current employees, and meet organizational strategic goals **(response required for consideration)**.

**Projected Company Outcomes
(required)**

As a result of this training, will any or all the following apply (at least one must apply for consideration)?

1. Quality Improvement Yes No
2. Increased Productivity Yes No
3. Improved Profits (Cost Savings, etc.) Yes No
4. Increased industry competitiveness
 Yes No Specify _____

**Projected Trainee Outcomes
(required)**

As a result of this training, will any or all the following apply? (at least two must apply for consideration. # 4 may apply if this training helps keep the employee's skills current thus avoiding being laid off)

1. Wage increase Yes No
2. Promotion Yes No
3. Industry Recognized Credential Yes No
4. Requisite for retained employment (layoff aversion). Yes No

Explain _____

Incumbent Worker Training Funds Terms & Conditions (CHECK all boxes)

- 1. The company agrees to provide at least a 50% cash match to any training funds received from SEI Industry Partnership. **Call if you have questions.**
- 2. The company agrees to provide their Federal Tax Identification Number (FEIN) as well as Social Security Numbers (SSNs) for all employees trained with support of SEI Industry Partnership funds. The Pennsylvania Department of Labor & Industry requires that employee training information must be entered in the secure Commonwealth Workforce Development System database.
- 3. The company agrees to provide all required training enrollment information within one (1) week after the end of training event.
- 4. The company agrees to provide all training invoices within twenty days after the end of each training event.
- 5. The company agrees to provide training evaluations information required by the SEI Industry Partnership as well as overall impacts of the training on the company.
- 6. The company agrees to share **any** training success stories with the SEI Industry Partnership staff upon request.
- 7. If the training funded by the SEI Industry Partnership is in support of a certification program, the company agrees to provide proof of certification to the SEI Industry Partnership.
- 8. The company agrees to cooperate with SEI Industry Partnership staff in collection of any additional information requirements that may arise from the Pennsylvania Department of Labor & Industry.

List Each Training Detail Separately. Specific Courseware Only.

(Credential: A = Apprenticeship; C = Certificate; IC = Certification;
CE = Continuing Education Credit)

Course Title	# Trainees	Total Cost	Job Title(s)	Start/End Date	Provider	Credential Received
<i>Example: BPI Building Analyst</i>	5	\$9250	Lead Technician	01/02/2023 01/30/2023		C
<i>Example: LEED Green Associate</i>	10	\$2500	Senior Sustainability Analyst	01/4/2023 02/26/2023		IC
Total Contracted Instructional Cost	\$					

This assistance is being made available by the Smart Energy Initiative of SE PA (SEI), an initiative of the Chester County Workforce Development Board and the Chester County Economic Development Council with grant funds received from the Pennsylvania Department of Labor and Industry.

PLEASE NOTE:

Please send the completed application and training release to:

The Smart Energy Initiative of Southeastern PA
Chester County Economic Development Council
Attn: **Sherry Cockerham**
737 Constitution Drive
Exton, PA 19341

Scanned or e-copy to scockerham@ccedcpa.com or fax to 610-458-7770. Please call 610-321-8213 for questions or assistance. Participant tracking form should be mailed or faxed ONLY – do not email for security purposes.

Priority will be given to applications which include the strongest employee and company outcomes and explanation of how upskilling current employees will help them meet job requirements and companies retain current employees and meet organizational strategic goals.