

## Guidance for Apprenticeship Training Grants

**Overview:** Apprenticeship programs are a strong strategy used by many employers to invest in potential workers and train them in the skills needed to perform a job for which there is a need. These programs also allow unemployed and unskilled individuals to obtain skills that can lead them to find or continue employment.

The Tennessee Department of Labor and Workforce Development (TDLWD), Workforce Services Division, supports employer efforts to increase employment and skilled training attainment through the Apprenticeship TN Registered Apprenticeship Programs (RAPs). The benefit of the RAP is that it allows employers to train employees in the skills they need and allows participants to work a paying job while learning a skill.

Tennessee is a State Apprenticeship Agency, or SAA. This allows Tennessee to approve applications for apprenticeship programs submitted for certification as Registered Apprenticeship Programs (RAPs) without going through the process with the U.S. Department of Labor (USDOL). Approval received by Tennessee's SAA is equal to approval granted by USDOL.

TDLWD distributes state apprenticeship funds through Local Workforce Development Boards (LWDBs) to support employers as they develop and implement registered apprenticeship programs and train eligible training recipients.

### I. Program Eligibility:

- Apprenticeship programs must be federally registered and approved by Tennessee SAA
- Employers may seek assistance with allowable training costs for eligible apprenticeship participants who are enrolled in their first, second, third, or fourth year(s) of training.
- Assistance may be provided for a maximum of two separate years of training, reimbursed annually.

### II. Program Requirements:

- A maximum of \$2,500 can be reimbursed for each 1<sup>st</sup> and 2<sup>nd</sup> year apprentice
- A maximum of \$1,500 can be reimbursed for each 3<sup>rd</sup> and 4<sup>th</sup> year apprentice provided they have not previously utilized two years of RAP funding.

### III. Allowable Costs:

- Wages/salaries paid for participants in apprenticeship program
- Textbooks and materials
- Tuition expense (tuition is defined as instruction related to the Related Technical Instruction (RTI) portion of the apprenticeship program) or training costs
- Other costs associated with the apprenticeship program, such as PPE, tools, etc.

#### IV. Program Requirements:

- Employers must complete a Northern Middle Board Apprenticeship Application to apply for funding reimbursement
- Employers approved for funds must enter into a contract with start and end dates.
- The US DOL Form ETA-671 must be completed and signed by both the Sponsor and the participant upon enrollment in the RAPIDS system and a copy of each participant 671 form must be provided to NMWB Staff as part of the contract requirement.
- Apprenticeship participants will be required to complete a one page NMWB Apprenticeship Application to collect demographic information.
- Employers will submit monthly invoice request with required support documentation. Depending on how the RTI is being delivered invoices may be less frequent than monthly.
- Supporting documentation must be provided with each invoice demonstrating appropriate and allowable expenses
- NMWB staff will review submitted data and invoices for accuracy
- NMWB staff will have regular contact with grant recipient to ensure proper information is being maintained
- Lack of response by grant recipient to the NMWB staff may result in termination of contract.

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# Employer Apprenticeship Grant Application

## Section 1: Company Information

Company Name:		Application Date:	
Company Website:		Years in Business:	
Company Street Mailing Address:			
City:	State:	Zip:	County:

Write a brief description of your company services or products.

Number of full time employees at this location:		
Is your company union affiliated? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please notify union of this application.</i>		
Primary Company Contact Name:		Title:
Phone:	Fax:	Email:
HR Contact Name:		Title:
Phone:	Fax:	Email:
Finance Contact Name:		Title:
Phone:	Fax:	Email:

Is the company current on all state and federal tax obligations?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the company a Tennessee for-profit business (or a not-for-profit healthcare business)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the company current on unemployment and workers compensation requirements?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has the company filed for bankruptcy in the last 12 months?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the company financially viable?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has the company received apprenticeship funding before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what was the grant amount?	Award Year?	

<p>What is the company Unique Entity Identifier?*</p> <p><small>*In order to complete and issue a contract, the employer must have a Unique Entity Identifier (previously the DUNS number). For more information on how to obtain your Unique Entity Identifier <a href="#">click here</a>.</small></p>	
<p>What is the company Primary NAICS Code #? **</p> <p><small>**NAICS codes can be found by using the search feature at <a href="http://www.census.gov/naics">www.census.gov/naics</a>. In the "2022 Search" box on left side of page enter a keyword or words that describes your business.</small></p>	
Employer Federal ID #	Tennessee Sales Tax ID #
Unemployment Insurance ID #	



## Section 2: Related Technical Instruction

Federally Registered Apprenticeship Title:			
Federally Registered Apprenticeship Number:			
Name of Training Institution/Provider:			
Training Provider Mailing Street Address:			
City:	State:	Zip:	County:
Primary Training Provider Contact Name:			Title:
Phone:	Fax:	Email:	
Training Institution/Provider will be the Apprenticeship Sponsor for USDOL reporting.    Yes <input type="checkbox"/> No <input type="checkbox"/>			
<i>If no, please identify the Apprenticeship Sponsor.</i>			
Apprenticeship Length (trimesters or months):		Number of Apprentices:	
Training Duration – Number of RTI Hours:		Number of OJT Hours:	
Training Start Date:		Expected Training End Date:	
Number of work site mentors/trainers:			
Write a brief description of apprenticeship training.			

- Please attach the apprenticeship course competencies and instruction schedule to this application.
- Please attach the related course fee schedule from the training provider to this application.



# Employer Apprenticeship Grant Application

## Section 3: Budget

Per Participant Budget Worksheet		Totals	
A. Budget Category	B. Total Expenses	RTI Training & Supplies Cost Per Participant (1B + 2B)	OJL Wages Per Participant (3B)
1. Related Technical Instruction/ Tuition (RTI) <i>per participant</i>			
2. Materials/Textbooks <i>per participant</i>			
3. On-the-Job Learning Wages <i>per participant</i>			

Grant Request Details	
Number Of Apprentices	
Total Cost of RTI + OJL Wages	
Total Apprenticeship Grant Requested	
The NM Incumbent Worker Training Apprenticeship Grant and the State Apprenticeship Grant are both administered by the Northern Middle Tennessee Workforce Board and will be applied to this request. No additional application is required.	

## Section 4: Certification by Authorized Representative

As an authorized representative of the company listed on this application, I hereby certify that the provided information on this application is true and accurate. I am aware that any false information or intended omissions may subject me to civil or criminal penalties for the filing of false public records and/or forfeiture of any training award approved through this program.	
Company/Organization Name:	
Print Name of Signatory:	Title:
Signature:	Date:



# Employer Apprenticeship Grant Application

## Section 5: General Grant Award Information

An employer approved for funds enters into a contract with the Northern Middle Tennessee Workforce Board or their designated service provider through the Tennessee Department of Labor and Workforce Development, which commits the business to complete the training project as proposed in the application.

1. Approved budget items are reimbursed upon presentation of adequate documentation of the training and upon evidence that the training expense incurred has been paid by the employer.
2. Employers provide a matching contribution to the training project based upon the number of employees working at the time of the grant application.
3. Employers will keep accurate records of the project’s implementation process and certify that all information provided for the purpose of requesting reimbursements and reporting training activity is accurate and true.
4. Employers will work with the Apprentice Sponsor (often the training provider) to ensure proper documentation is maintained related to attendance and competencies, and is submitted for data entry in both the federal and state data management programs (RAPIDS and JOBS4TN).
5. Employers must submit reimbursement requests with required support documentation.
6. Employers and/or apprentices are required to supply information about the employees to be trained by completing the following forms and applications. Information must be reviewed by the Northern Middle Tennessee Workforce Board prior to the training start date. These forms will be provided to you by the Northern Middle Tennessee Workforce Board.
  - NM Apprentice Application
  - Apprentice Information Form (TDLWD Form)
  - USDOL Apprentice Application

## Section 6: For Internal Administrative Use Only

Date Application Received:	
Date Application Reviewed:	
Date Grant Awarded:	Amount Awarded:
Training Start Date:	Training End Date:
Date Contract Signed:	
Date all individual and company documents entered in Jobs4TN.gov.	