



JOBSTART/FUTURE SKILLS PROGRAM

APPLICATION FORM

Workbased Training for the Unemployed

For assistance in completing any portion of this application, please contact your local JobStart/Future Skills Project Coordinator.

Date Received:	SIAST or Regional College:	Project Number:	
_____ APPLICANT NAME (Full Legal or Incorporated Name)		_____ Saskatchewan Justice, Corporations Branch Registration Number (6 or 9 digits)	
_____ MAILING ADDRESS	_____ CITY/TOWN	_____ PROVINCE	_____ POSTAL CODE
_____ CONTACT PERSON	_____ TELEPHONE	_____ FAX NUMBER	

A. PROJECT NAME OR TITLE: _____

<p>B. CURRENT NUMBER OF EMPLOYEES: _____</p> <p>C. NUMBER OF NEW POSITIONS TO BE CREATED: _____</p>	<p>D. PROPOSED DURATION OF PROJECT: From: ____ / ____ / ____ To: ____ / ____ / ____ Day / Month / Year Day / Month / Year</p> <p>E. TOTAL TRAINING TIME: _____ DAYS or _____ WEEKS</p>
---	--

F. JOBSTART/FUTURE SKILLS PROJECT COORDINATOR: _____
Telephone Number: _____

G. BACKGROUND INFORMATION:

1. **Company Description** – Please provide a brief description of your company or organization and the service or product your company provides.

2. **Previous JobStart/Future Skills Project** – Yes No If yes, please give a brief description of the previous project, the outcome(s) and how many people were trained.

JobStart/Future Skills Workbased Training for the Unemployed

Please attach a typed proposal outlining the following information.

H. PROJECT CRITERIA

1. Rationale

Why is this project necessary? Please indicate specific activities that have been completed in an attempt to recruit experienced employees.

2. Objectives

What will this project accomplish? What will this training enable the trainees to do?

3. Training Outline

Identify the skills and knowledge that will be taught and practised by the trainees. Be specific as possible by identifying each major task of the job and all associated smaller tasks. **Please complete the attached Training Plan Form for each occupation being trained.**

4. Credit/Recognition

All training (or a significant portion) **must** qualify for academic credit and/or industry recognition. (this credit or industry recognition may be available through SIAST, the universities, industry bodies, apprenticeship boards, STEC or professional associations). **Your JobStart/Future Skills Project Coordinator will assist you to research credit availability or industry recognition for your training project.** *Please attach letters from organizations verifying the credit or certification that will be awarded.*

5. Trainee Recruitment Process

Please describe the trainee recruitment process.

- Have trainees been selected?
- Do you require assistance to locate trainees?
- Are there specific groups you will recruit for training, such as youth, aboriginal, social assistance recipients, disabled persons or visible minorities?

Trainees cannot be immediate family members of the applicant and should not be hired prior to project approval.

6. Prerequisites

Describe the academic and/or work experience requirements the potential trainees must have before they participate in the project.

7. Evaluation

Describe how you will determine if the training is successful in meeting your needs. What evaluation or testing will be done? Who will do this evaluation and what qualifications does this person possess? How will you ensure the training meets the educational institution or industry's minimum acceptable standards?

8. Relevant Issues or Details

Describe any other issues or details.

**JobStart/Future Skills Workbased Training for the Unemployed
BUDGET INFORMATION SHEET**

Project Number: _____		

APPLICANT NAME (Full Legal or Incorporated Name)		

CONTACT PERSON	TELEPHONE	FAX NUMBER

I. BUDGET <i>(attach a separate sheet if required)</i>	Total Cost	Portion requested from JobStart/Future Skills
<ul style="list-style-type: none"> • Salaries and Benefits Trainees (# trainees x hrs/wk x \$ per hour) x number of wks. 		
Instructor (# instructors x hrs/wk x \$ per hour) x number of wks.		
Benefits		
<ul style="list-style-type: none"> • Materials and Supplies (please itemize) 		
<ul style="list-style-type: none"> • Other (provide details and itemize) 		
Total Cost for the Project	\$	\$
Total Future Skills Reimbursement allowed (maximum of \$5,000 per trainee)		

J. APPLICANT DECLARATION:

- (1) The information that is provided in this application is complete, true and accurate.
- (2) I have legal authority to apply on behalf of the above named business or organization.
- (3) I confirm that the participants selected under this project will be covered by a Workers' Compensation or a private liability insurance package.
- (4) I authorize Saskatchewan Post-Secondary Education and Skills Training to verify my application with other government programs.
- (5) It is understood that funds requested will be used only for this project, that all records related to project costs will be maintained and are subject to audit.
- (6) The JobStart/Future Skills Program has the right to publicize this project.

_____	_____	_____	_____
Name (please print)	Title	Signature	Date