



## Workforce Innovation and Opportunity Act Incumbent Worker Training Program

# Employer Application

### ABOUT THE PROGRAM

Local Workforce Innovation and Opportunity Act (WIOA) funds can be made available through a process designed to assist Bay Consortium/Local Workforce Development Area 13 businesses, which could include a single employer or a group of employers that share similar workforce needs, using a sector strategy approach to meet the skills training needs of their incumbent workforce.

#### Employer Eligibility

- Private for profit or non-profit businesses operating in Virginia for entire twelve month period prior to application date;
- Current on all Virginia tax obligations;
- Proposing training for employees in a Virginia facility;
- Demonstration of linkages of the training activity to demand occupations and/or regionally targeted industries;
- The positive relationship of the training to the competitiveness of a participant and the employer;
- The relative wage and benefit levels of those employees (pre-training and anticipated upon completion of the training);
- The potential state, regional, and local economic impact, if any, of the training project.
- A non-eligible employer is a business with a history of failing to provide WIOA participants with continued employment or/and a recently relocated business that has resulted in employee separations.

#### Incumbent Worker Employee Eligibility

All employees participating in incumbent worker training must meet the eligibility below. An incumbent worker is:

- At least 18 years of age;
- A citizen of the United States or a non-citizen whose status permits employment in the United States;
- Males born on or after January 1, 1960 must register with the selective service system within 30 days after their 18th birthday or at least before they reach the age of 26;
- Must be a full-time employee of the participating employer for at least 6 months;
- Needs skills upgrading or retraining, completion of GED or High School Degree, basic skills upgrade, to retain or be successful in current employment;
- An employee to be trained that works at a facility located in Virginia or working for a staffing agency and placed at a Virginia facility.

#### Reimbursement Limits

Funding covers the costs of training, as well as the fees for certification exams and textbooks, as follows:

- 90% of the cost for employers with not more than 50 employees;
- 75% of the cost for employers with 51-100 employees; and
- 50% of the cost for employers with more than 100 employees.

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**Workforce Innovation and Opportunity Act Incumbent Worker Training Program**

**GENERAL INFORMATION**

Company Name:			
Street/Mailing Address:			
City:	State:	Zip:	County:
Company Contact Person:		Title:	
Phone:	Ext:	Fax:	
E-Mail:	Website:	Years in Business:	
Date of Inception:		Total FT employees at this location:	
Legal structure of Business: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Non-Profit Organization			
Employer's Federal ID #:		DUNS #:	
Brief description of your business:			

**TRAINING REQUEST INFORMATION**

Number of FT employees to be trained:	Total training cost per employee: \$
Name and Address of Training Provider:	
Training will be delivered: <input type="checkbox"/> On Site <input type="checkbox"/> At the training Institution <input type="checkbox"/> Remote Site <input type="checkbox"/> Online	
Will training result in a certification? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Course Description and Objectives:	
Training Schedule (# hours of training):	Training Start and End Dates:
Please provide a list of competencies the participants will attain:	



**Workforce Innovation and Opportunity Act Incumbent Worker Training Program**

How will this training component directly contribute to improving or upgrading skills of the incumbent worker and improve efficiencies or quality in a way that makes the company more competitive?

**WHAT ARE THE DESIRED OUTCOMES OF THIS TRAINING?**

<input type="checkbox"/>	Will upgrade skills	<input type="checkbox"/>	Will provide a certification.
<input type="checkbox"/>	Will provide process improvement	<input type="checkbox"/>	Will improve the long term wage levels of trainees
<input type="checkbox"/>	Will help to prevent layoffs Jobs saved #	<input type="checkbox"/>	Will improve the short term wage levels of trainees
<input type="checkbox"/>	Will train in a demand occupation	<input type="checkbox"/>	Will create new jobs, #

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.

**Name of Applicant:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**ALL APPLICATIONS MUST BE SUBMITTED TO [sgolas@baywib.org](mailto:sgolas@baywib.org)**