



ON-THE-JOB TRAINING (OJT) APPLICATION

Business Information

Business Name:	Phone:
Address:	FAX:
	E-mail:
Federal Tax I.D. No.:	State Tax I.D. No.:
Individual with Signatory Authority:	Title:

Worksite Referral and Contact Information

Interviewer :	Title:
Supervisor:	Title:
Address (If different from above):	Phone (If different from above):
	Fax (If different from above):

Worksite Information

1. Type Business: <input type="checkbox"/> Private For-profit <input type="checkbox"/> Private Non-profit <input type="checkbox"/> Public Non-profit	
2. Total number of employees: Full-Time: Part-Time: Temporary	
3. Does the worksite conform to relevant occupational health and safety laws and guidelines? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If "No", please explain:	
4. Benefits provided to regular employees: <input type="checkbox"/> Health Insurance <input type="checkbox"/> Dental Insurance <input type="checkbox"/> Holiday <input type="checkbox"/> Sick Leave <input type="checkbox"/> Retirement Other:	
5. Will benefits and working conditions for OJT positions be the same as other employees in similar positions and employment status <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Is there an existing collective bargaining contract? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, the appropriate labor organization and employer must provide written concurrence that an OJT contract will not be inconsistent with the current collective bargaining contract.	
7. Is the business involved in a strike, lockout, or other labor disputes? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. If the business relocated to the area within the past 120 days, did the relocation result in a loss of employment for any employee of such business at the original location if the original location is within the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If so, has the promise of OJT contract been used or proposed to encourage or induce the relocation of the business or part of the business if such relocation? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If you answered "Yes" to any of question 5-7, please explain:	

Previous OJT Contracts

9. Has the business had any previous OJT contracts within last 3 years? If no, go to next section <input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous Contract Start Date: _____ Contract End Date: _____	
Did the Trainee/Employee complete the training? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the Trainee/Employee still employed with the business? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Explain any "No" answers	

OJT Position Information

Number of positions	Position Title	Position Description	Hrly Rate of Pay	Typical Training Time (Hrs)	Hours/Week

Other Requirements

10. Does the business require the incentive of reimbursement to hire and train eligible individuals referred by Workforce Solutions or to retain and train individuals for these positions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11. Will these positions displace any currently employed workers in your business?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are regular employees on layoff from the same or any substantially equivalent jobs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have any employees been terminated or has your workforce been reduced with the intention of filling the vacancy(ies) by hiring a trainee whose wages are subsidized?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the job be created in a promotional line that will infringe in any way upon the promotional opportunities of currently employed individuals?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Does the business have the facilities, equipment, and/or supervision necessary to provide the required training for these OJT positions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Are these positions or will these positions be filled by a current employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, what is the length of employment?	
What are their current positions?	
If this contract is for currently employed workers, does the training <ul style="list-style-type: none"> • involve the introduction of new technologies, production or service procedures, or • upgrading to new jobs that require additional skills or workplace literacy? 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
14. Are any of the positions to be filled with an individual who is related to the employer or in a supervisory position which could create a situation of nepotism?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15. Will the positions involve any political activity, either directly or indirectly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16. Will the positions involve, either directly or indirectly, the construction, operation, administration or maintenance of any facility to be used for sectarian instruction or for religious worship?	<input type="checkbox"/> Yes <input type="checkbox"/> No
17. Will laborers and mechanics under an OJT contract who are employed by a business who is a contractor or subcontractor in any construction, alteration, or repair of public buildings or public works (including painting of projects and buildings), be paid wages and benefits at a rate not less than the locally prevailing wages and benefits on projects of a similar character in accordance with the Davis-Bacon Act?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

I certify that the information above is true and correct to the best of my knowledge.

Authorized Signature

Date

Printed Name

Title

Workforce Solutions reserves the right to accept or reject any On-the-job Training Application in whole or in part.

CERTIFICATIONS

DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

This certification is required by the Federal Regulations implementing Executive Order 12549, Government-wide Debarment and Suspension, for the Department of Agriculture (7 CFR Part 3017), Department of Labor (29 CFR Part 98), Department of Education (34 CFR Parts 85, 668 and 682), and Department of Health and Human Services (45 CFR Part 76).

The undersigned contractor certifies that it or its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Have not within a three-year period preceding this proposal been convicted or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph 2 of this certification; and
4. Have not within a three-year period preceding this contract had one or more public transactions (federal, state, or local) terminated for cause or default.

Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

These certifications are a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction.

CERTIFICATION REGARDING TEXAS CORPORATE FRANCHISE TAX

Pursuant to Article 2.45, Texas Business Corporation Act, state agencies may not contract with for profit corporations that are delinquent in making state franchise tax payments. The following certification that the entity entering into this subcontract is current in its franchise taxes or is not subject to the payment of franchise taxes to the State of Texas must be signed by the individual authorized to sign the subcontract for the subcontract for the subcontracting entity.

The undersigned authorized representative of the entity subcontracting herein certifies that the following indicated statement is true and correct and that the undersigned understands making a false statement is a material breach of subcontract and is grounds for subcontract cancellation. Indicate the certification that applies to your subcontracting entity:

- The subcontracting entity is a for-profit corporation and certifies that is not delinquent in its franchise tax payments to the State of Texas.
- The subcontracting entity is a non-profit corporation or is otherwise not subject to payment of franchise tax to the State of Texas.

CERTIFICATION REGARDING THE HIRING OF UNDOCUMENTED WORKER

Pursuant to Texas Government Code 2264.051, a business that applies to receive a public subsidy from a state agency shall certify that the business, or a branch, division, or department of the business does not and will not knowingly employ an undocumented worker as defined in Texas Government Code, 2264.001(4)

The undersigned authorized representative of the entity making the offer or application herein understands and certifies that

- o The following indicated statement is true and correct;
- o Making a false statement is a material breach of contract and grounds for contract cancellation; and
- o If, after receiving a public subsidy, the entity is convicted of a violation under 8 United States Code 1324 a(f) (relating to the unlawful employment of undocumented workers) the entity shall repay the entire amount of the public subsidy under contract and annual interest of 15% calculated monthly on the balance due for the term of the outstanding contract issued pursuant to this offer or application, within 120 days of receiving the notice of violation.

Workforce Solutions Lower Rio Grande Valley may bring civil action to recover any amounts owed, as well as court costs and reasonable attorney fees.

EQUAL OPPORTUNITY

No individual shall be excluded from participating in, denied the benefits of, subjected to discrimination under, or denied employment in the administration of, or in connection with, any such program because of race, color, religion, sex, national origin, age, disability, or political affiliation or belief. Employer certifies that all public areas comply with the Americans with Disabilities Act.

Printed Name of Authorized Representative

Title of Authorized Representative

Signature of Authorized Representative

Date

AN EQUAL OPPORTUNITY EMPLOYER / PROGRAMS

Auxiliary aids and services are available upon request to individuals with disabilities Relay Texas: 1-800-735-2989 (TTY); 1-800-735-2988 (Voice); 1-800-622-4954 (Español)
Click: WFSolutions.org ●Twitter: @WFSolutions ●Facebook: /WFSolutions & /RGVOP ●E-mail: info@WFSolutions.org ●Call: (877) 687-1121