

BEFORE YOU BEGIN

This application is for employers who are submitting a request for funding under the Canada-Yukon Job Grant. Please review the guidelines at <http://www.education.gov.yk.ca/employers/cjf.html> and contact Yukon Education before completing and submitting this application.

EMPLOYER INFORMATION

Organization Legal Name Agreement No. (For Office Use Only)

- Organization acting on behalf of employers Private Not for profit
 Selected Crown Corporation First Nation

Sector Type

Name and Title of Contact

Business Mailing Address Area Code and Phone number

City/Town Prov/Terr Postal Code Area Code and Fax number

Business Location (if different from mailing) Email

Organization Size

PROJECT DESCRIPTION: OBJECTIVE

Please describe your project:

Between to , the Recipient will arrange for and contribute to the
START DATE (YYYY-MM-DD) END DATE (YYYY-MM-DD)
training of to: [select A or B below]
NUMBER OF PARTICIPANTS

A) prepare for employment as a ; or
JOB TITLE

B) increase
WORK RELATED SKILL

as a .
JOB TITLE

SUPPORTING DOCUMENTATION

The following documents must be submitted with this application. Please note that incomplete applications will not be considered for funding.

Participant Training Cost Calculation	Provide one "Participant Training Cost Calculation" sheet (pg. 2) for each participant.
Training Cost Details	Attach cost details from third-party trainer for each participant.

PARTICIPANT TRAINING COST CALCULATION

Please complete one Participant Training Cost Calculation sheet for each participant.

TRAINING COST

Tuition (Includes Tuition, Student and Lab Fees, Exam Fees or invoiced Institutional Costs)*

Required Training Materials (Includes books, web access fees, required safety clothing or equipment)*

*You must include cost details from the third-party trainer.

Total Training Costs A)

REQUIRED EMPLOYER CONTRIBUTION

Employer Contribution must equal a minimum of 1/3 of the Total Training Costs in box A)

B)

Minus Eligible Wage Contribution

For small businesses, (less than 50 employees), wages paid during the training period to **either** the training participant or their replacement, may be included for up to 50% of the Employer Contribution i.e. 50% of Box B.

Total Wages paid during training period

C)

Maximum Eligible Wage (50% of Box B)

D)

Eligible Wage Contribution (Box C or D, whichever is less)

E)

Total Employer Cash Contribution F)

(Box B minus Box E)

FUNDING REQUEST

Box A) minus Box F)

The government-funded Canada Job Grant Contribution is limited to \$10,000 per participant.

Applications for funding must be approved by Advanced Education before the start date of the training activity. Training costs incurred prior to the approval of the CJG are not eligible for reimbursement. Please note that incomplete applications will not be considered for funding.

COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

The personal information you have provided is collected for the purpose of administering labour market programs and services and will be shared with the following:

Any Case Managers you have engaged or are required to utilize for the purposes of developing and managing your Action Plan and who have assisted you in completing this application.

Any Delivery Organization to which you have been referred by either a Case Manager or Advanced Education in order to complete your Action Plan.

The information you provide may also be used for policy analysis, statistical, research and/or program evaluation purposes by the Government of Yukon and Government of Canada.

This information is collected and managed in accordance with the *Access to Information and Protection of Privacy Act*, R.S.Y., 2002, c.1 (the "Act"). Records and information pertaining to this application may be disclosed to third parties only in accordance with the Act.

Questions about the collection, use or disclosure of this information can be directed to the Director of Labour Market Programs & Services, Department of Education, Advanced Education Branch, Box 2703, Whitehorse, Yukon Y1A 2C6 or phone 667-5131, toll free at 1-800-661-0408, extension 5131.

I acknowledge that I have read and understand the above information regarding the collection, use, and disclosure of my personal information:

Employer must record their name and the date this form is completed in the space provided below.

Name:

Signature:

Title:

Date (YYYY-MM-DD):

SUBMIT APPLICATION

Applications will not be accepted by email due to the personal and confidential information contained therein.

By Mail Yukon Education/Advanced Education
PO Box 2703
Whitehorse, Yukon Y1A 2C6

By Fax Yukon Education/Advanced Education
Fax number: (867) 667-8555

Hand Delivery Yukon Education/Advanced Education
1000 Lewes Blvd. Whitehorse

Questions? For more information, contact Yukon Education at 1-800-661-0408, local 5131.