

APPLICATION FORM

Type of Submission:		Type of Project:		Applicant Type:	
Local Workforce Development Board:					
Grant/Project Title:					
Targeted Industry Cluster:				Sub-Cluster:	
Counties served by this grant:					
<input type="checkbox"/> Adams	<input type="checkbox"/> Clarion	<input type="checkbox"/> Huntingdon	<input type="checkbox"/> Montgomery	<input type="checkbox"/> Venango	
<input type="checkbox"/> Allegheny	<input type="checkbox"/> Clearfield	<input type="checkbox"/> Indiana	<input type="checkbox"/> Montour	<input type="checkbox"/> Warren	
<input type="checkbox"/> Armstrong	<input type="checkbox"/> Clinton	<input type="checkbox"/> Jefferson	<input type="checkbox"/> Northampton	<input type="checkbox"/> Washington	
<input type="checkbox"/> Beaver	<input type="checkbox"/> Columbia	<input type="checkbox"/> Juniata	<input type="checkbox"/> Northumberland	<input type="checkbox"/> Wayne	
<input type="checkbox"/> Bedford	<input type="checkbox"/> Crawford	<input type="checkbox"/> Lackawanna	<input type="checkbox"/> Perry	<input type="checkbox"/> Westmoreland	
<input type="checkbox"/> Berks	<input type="checkbox"/> Cumberland	<input type="checkbox"/> Lancaster	<input type="checkbox"/> Philadelphia	<input type="checkbox"/> Wyoming	
<input type="checkbox"/> Blair	<input type="checkbox"/> Dauphin	<input type="checkbox"/> Lawrence	<input type="checkbox"/> Pike	<input type="checkbox"/> York	
<input type="checkbox"/> Bradford	<input type="checkbox"/> Delaware	<input type="checkbox"/> Lebanon	<input type="checkbox"/> Potter	<input type="checkbox"/> Statewide	
<input type="checkbox"/> Bucks	<input type="checkbox"/> Elk	<input type="checkbox"/> Lehigh	<input type="checkbox"/> Schuylkill		
<input type="checkbox"/> Butler	<input type="checkbox"/> Erie	<input type="checkbox"/> Luzerne	<input type="checkbox"/> Snyder		
<input type="checkbox"/> Cambria	<input type="checkbox"/> Fayette	<input type="checkbox"/> Lycoming	<input type="checkbox"/> Somerset		
<input type="checkbox"/> Cameron	<input type="checkbox"/> Forest	<input type="checkbox"/> McKean	<input type="checkbox"/> Sullivan		
<input type="checkbox"/> Carbon	<input type="checkbox"/> Franklin	<input type="checkbox"/> Mercer	<input type="checkbox"/> Susquehanna		
<input type="checkbox"/> Centre	<input type="checkbox"/> Fulton	<input type="checkbox"/> Mifflin	<input type="checkbox"/> Tioga		
<input type="checkbox"/> Chester	<input type="checkbox"/> Greene	<input type="checkbox"/> Monroe	<input type="checkbox"/> Union		
Local Workforce Development Areas (LWDA) affected by this grant:					
<input type="checkbox"/> Allegheny	<input type="checkbox"/> Lackawanna	<input type="checkbox"/> Pittsburgh	<input type="checkbox"/> West Central		
<input type="checkbox"/> Berks	<input type="checkbox"/> Lancaster	<input type="checkbox"/> Southern Alleghenies	<input type="checkbox"/> Southwest Corner		
<input type="checkbox"/> Bucks	<input type="checkbox"/> Lehigh Valley	<input type="checkbox"/> Tri-County	<input type="checkbox"/> Northwest		
<input type="checkbox"/> Chester	<input type="checkbox"/> Luzerne-Schuylkill	<input type="checkbox"/> North Central	<input type="checkbox"/> Central		
<input type="checkbox"/> Delaware	<input type="checkbox"/> Montgomery	<input type="checkbox"/> Northern Tier	<input type="checkbox"/> South Central		
<input type="checkbox"/> Westmoreland-Fayette	<input type="checkbox"/> Philadelphia	<input type="checkbox"/> Poconos	<input type="checkbox"/> Statewide		
Is your business a Pennsylvania Qualified Small Business as described in 4 Pa. Code 2.32?					
Applicant Information					
Name					
Address 1					
Address 2					
City			PA	ZIP Code	
Name and contact information of primary person to be contacted on matters involving this application					
First name		Last name		Phone	
Title				Email	
Funding proposal request(\$):		Labor & Industry: \$		Matching Funds \$	
Authorized representative printed name:		Name			

Authorized representative signature/date:

*Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program*

APPLICATION FORM

Application Instructions

Labor & Industry (L&I) Workforce Development Grant

1. **Type of Submission:** Indicate whether this is a new request for funds for a new project or if this is a continuation of a project that was previously funded.
2. **Type of Project:** Indicate whether this grant is for training or services.
3. **Applicant:** Select Applicant type from drop down menu.
4. **Local Workforce Development Board (LWDB):** Select the name of the LWDB with whom this project will be affiliated from the drop down menu.
5. **Grant/Project Title:** Enter the name of the project.
6. **Target Industry Cluster/Sub Cluster:** Enter the name of the Industry Cluster and, if applicable, the sub-cluster.
7. **Counties Served** — Include all counties that will be served by the grant.
8. **LWDA's affected** — List all LWIA's involved in the grant.
9. **Small Business** — Select whether your business is a Pennsylvania Qualified Small Business.
10. **Applicant Information:** Enter the applicant's name and address.
11. **Contact Information:** Enter contact information.
12. **Funding Proposal Requests:** Enter the amount requested for the project and include the amount of matching funds (if applicable)
13. **Authorized Representative:** Enter the name of the authorized representative. Sign and date the form.