

**PAsmart Next Generation Industry Partnerships Grants**

**Application Form**

**Grant Overview**

Up to $4.6 million of Next Gen IP funds are available to support the convening of partnerships and the implementation of business-driven priorities and action plans. Grant applications will be accepted until January 10, 2020 at 11:59 PM EST and should be sent via email to RA-LI-PAWDB-IP@pa.gov. Additional rounds may be announced, based on the availability of funds. Any questions should be directed to: pasmart@pa.gov.

Before You Start the Application

Applicants should review relevant grant information, including the Notice of Grant Availability

(NGA), Appendices, and pre-application checklis[t: https://www.governor.pa.gov/PAsmart-Grants](https://www.governor.pa.gov/PAsmart-Grants).

Applicants must complete all questions on this form and upload all required documents, including budget forms and other supplemental materials, for an application to be considered complete, submitted, and ready for review by the Pennsylvania Department of Labor and Industry. Applicants should ensure the final application form is no longer than 17 pages, not including the required supplemental information such as the budget form. More information about eligibility criteria, required documentation, and other grant application requirements is available in the Notice of Grant Availability and other grant-related documents.

Application Checklist

Before submitting this application, Applicants are encouraged to ensure all required materials are included:

Completed Application Form (20 pp. Max)

Completed Budget Form

Completed Partnership Membership Form

Completed Training Plan (If Applicable)

Letters of Support: Economic Development

Letters of Support: Education

Letters of Support: Workforce Development

**Partnership Summary**

* **1. Partnership Name**

**Click or tap here to enter text.**

* **2. Applicant Name**

**Click or tap here to enter text.**

* **3. Local Workforce Development Board (Fiscal Agent)**

**Click or tap here to enter text.**

* **4. Has the Partnership Previously received PAsmart Next Gen IP Funds?**

**Yes**

**No**

* **5. Amount of Funding Requested**

**Click or tap here to enter text.**

**\*6. What activities will these funds be used towards?**

**Choose an item.**

\*7. **Primary Contact for Application**

**Name:** Click or tap here to enter text.

**Title:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**Address 2:** Click or tap here to enter text.

**City/Town:** Click or tap here to enter text.

**State/Providence:** Click or tap here to enter text.

**Zip/Postal Code:** Click or tap here to enter text.

**Email Address:** Click or tap here to enter text.

**Phone Number:** Click or tap here to enter text.

**8. Partnership Convener Contact** (if different from Primary Contact for Application)

**Name:** Click or tap here to enter text.

**Title:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**Address 2:** Click or tap here to enter text.

**City/Town:** Click or tap here to enter text.

**State/Providence:** Click or tap here to enter text.

**Zip/Postal Code:** Click or tap here to enter text.

**Email Address:** Click or tap here to enter text.

**Phone Number:** Click or tap here to enter text.

\*9. **Fiscal Agent Contact** (if different from Primary Contact for Application)

**Name:** Click or tap here to enter text.

**Title:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**Address 2:** Click or tap here to enter text.

**City/Town:** Click or tap here to enter text.

**State/Providence:** Click or tap here to enter text.

**Zip/Postal Code:** Click or tap here to enter text.

**Email Address:** Click or tap here to enter text.

**Phone Number:** Click or tap here to enter text.

**\*10. Counties Served** (Check all that apply)

Adams

Allegheny

Armstrong

Beaver

Bedford

Berks

Blair

Bradford

Bucks

Butler

Cambria

Cameron

Carbon

Centre

Chester

Clarion

Clearfield

Clinton

Columbia

Crawford

Cumberland

Dauphin

Delaware

Elk

Erie

Fayette

Forest

Franklin

Fulton

Greene

Huntingdon

Indiana

Jefferson

Juniata

Lackawanna

Lancaster

Lawrence

Lebanon

Lehigh

Luzerne

Lycoming

McKean

Mercer

Mifflin

Monroe

Montgomery

Montour

Northampton

Northumberland

Perry

Philadelphia

Pike

Potter

Schuylkill

Snyder

Somerset

Sullivan

Susquehanna

Tioga

Union

Venango

Warren

Washington

Wayne

Westmoreland

Wyoming

York

**Goals and Objectives (10 Points)**

**11. Summarize goals and objectives of the partnership and its activities to-date, including the launch/relaunch process, meetings, convener and regional support team priorities and activities, partnership strategies and challenges, as well as alignment to the goals of the Governor’s PAsmart initiative and the PAsmart Framework principles and funding priorities. Demonstrate how the partnership meets the convening and/or implementation criteria in Appendix A.**

Click or tap here to enter text.

**Partnership Analysis (15 Points)**

Provide a detailed summary of your proposed partnership. Your summary must align with the attached Partnership Form.

**12. Describe how the region and scope of the industry cluster were determined and the need for the partnership using labor market information and other regional data.**

Click or tap here to enter text.

13. **Active Partnerships Applying for Implementation Funds: Clearly describe and explain the current business-driven priorities and Action Plan. *Complete and attach the required Partnership Form.***

**Partnerships that have yet to launch, Applying for Convening Funds: must describe the strategies to identify business-driven priorities and develop an Action Plan. If any preliminary priorities have been identified, please include them.**

Click or tap here to enter text.

**14. Identify the individual(s) that will or have served as convener and demonstrate the roles, responsibilities and level of expertise of the convener/convening team members.**

Click or tap here to enter text.

**15. Describe the partnership’s strategy to sustain public and community partners engagement in the regional support team. *Attach at least three (3) letters of support from regional support team members as an attachment, including at least one (1) from an economic development partner, one (1) from an education partner, and one (1) from a workforce development partner*.**

Click or tap here to enter text.

**16.** **Describe the partnership’s strategy to identify and recruit businesses and business champions to participate in the partnership and highlight their involvement in the partnership. Identify any potential recruitment challenges, and strategies to address them.**

**Active partnerships should describe the plan to sustain business engagement and partnership membership, including the strategies and techniques to operationalize the partnerships’ Action Plan, membership and meeting activities, and how the team measures and addresses business-drive priorities.**

Click or tap here to enter text.

**Proposed Activities (20 Points)**

17. **Describe how the proposed activities and awarded funds will advance the partnership. Include:**

* How the funds will be used to identify and address business-driven priorities and address the specific strategies outlined in the Action Plan.
* Which business-driven priorities will be addressed in priority order (if applicable).

Click or tap here to enter text.

**Cross-Sector Alignment (10 Points)**

18. **Summarize how the partnership will align with existing workforce, education and economic development initiatives and programs, including the Pennsylvania WIOA Combined State Plan and relevant Regional and Local Plans, Future Ready and School Guidance Plans, Engage!, WEDnet, Registered Apprenticeship/Pre-Apprenticeship grants, and other programs funded through commonwealth grants.**

Click or tap here to enter text.

**Performance Outcomes and Assessment (20 Points)**

19. **Describe how the partnership will measure its success. Provide specific deliverables and outcomes, stated in measurable and timely terms including baseline information and expected improvement, and a clear plan for assessing the impact of the program being funded through the grant. Performance outcomes may include metrics such as hiring, recruitment, participation, and accomplishing business-driven priorities and action items. All partnerships are expected to report on the Next Gen IP statewide metrics as approved by the PA WDB (Appendix B).**

Click or tap here to enter text.

**Partnership Sustainability (15 Points)**

20. **Address the partnership’s sustainability across administration and operational functions by leveraging multiple funding sources as well as a declining reliance on fluctuating levels of public funding over partnership growth periods. Public sector partners must also demonstrate commitment to their ability to effectively and efficiently coordinate business engagement and utilization of public sector policies and funds, as appropriate.**

Click or tap here to enter text.

**Budget Information (15 Points)**

21. **Provide an accurate and itemized budget using a per-unit cost and total expenditure. The budget must include the required budget form and a detailed budget narrative, meeting the criteria below.**

* Complete and attach the required budget form, including match funds.
* Include a budget narrative containing a detailed breakout of quantity and cost to support each line item reflected on the budget form. If training is being funded, the number of participants to be served must be provided. If staff salaries will be supported by these funds, provide a description of the duties and responsibilities of each staff person to be funded.

Click or tap here to enter text.

**Bonus Criteria (8 Bonus Points)**

The following information is optional and is not required to be awarded funding. Priority points will be given to applicants who can demonstrate an exceptional plan and ability to address one or more of the following priorities. To be considered for bonus points, you must respond to the related prompts below in addition to any of the answers provided in the main application.

**Innovative financial models (2 points)**: Identify how the partnership plans to leverage additional funding (e.g. public, private, corporate, philanthropic, nonprofit, community-based organization).

Click or tap here to enter text.

**Exceed the 25 percent cash match (2 points):** Describe how the partnership plans to exceed the 25 percent cash match requirement.

Click or tap here to enter text.

**Diversity, Equity, and Inclusion (2 points):** Identify how the partnership will increase diversity, equity, and inclusion within the partnership, including serving and recruiting individuals with barriers or individuals from underserved populations.

Click or tap here to enter text.

**Evidence-Based Strategies (2 points):** Identify how the partnership will obtain data and employ evidence-based strategies to inform and guide convening and implementation activities that lead to measurable quantitative and qualitative outcomes.

Click or tap here to enter text.

**Other Application Items and Assurances**

Compliance Obligations - All grantees will be required to sign a grant agreement with the Pennsylvania Department of Labor and Industry. All grant funds must be committed, and services performed by June 30, 2021. The Pennsylvania Department of Labor and Industry shall seek repayment of funds if it determines that funds were not utilized for the original stated and approved purpose. Throughout the grant and upon completion of the grant, grantees will be required to submit regular reports as required by the Pennsylvania Department of Labor and Industry. Grantees must also comply with all requirements outlined in the solicitation document.

Are you able to meet all compliance obligations?

Yes

No

**Submission and Signature of Authorized Representative**

**Signature of Authorized Representative- Applicant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Authorized Representative- LWDB** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_