# School-to-Work Program

# Summary Cover Page

Name of applicant:

Name of fiscal agent:

Vendor ID Number:

Project title:

Project county:

Project partners:

Project service area *(e.g. town/city/municipality to be served, and House and Senate legislative districts):*

Project summary:

Project Point of Contact and Contact Information:

Registered Apprenticeship Program Partner(s):

Registered Apprenticeship RAPIDS ID#: The apprenticeship program partner(s) will be able to provide their RAPIDS ID number.

Pre-Apprenticeship Program Name: