



## PAsmart Registered Apprenticeship AMBASSADOR Network - Grant Application Form

### Registered Apprenticeship AMBASSADOR - Application Form - Overview

#### Overview

Up to \$1,500,000 is available for establishing the Pennsylvania Registered Apprenticeship AMBASSADOR Network. The Network will build a system of Registered Apprenticeship Intermediaries across Pennsylvania to strengthen the number, quality and performance of registered apprenticeships and pre-apprenticeships. Applications will be accepted until December 21, 2018 at 11:59pm. Any questions should be directed to: [pasmart@pa.gov](mailto:pasmart@pa.gov).

#### Before You Start the Application

Applicants should review relevant grant information, including the Notice of Grant Availability (NGA), 1-pagers, and pre-application checklist: <https://www.governor.pa.gov/PAsmart-Grants>

Applicants must complete all questions 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. 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
- Letters of Supports
- Completed Form: Budget Form



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Applicant Information

\* 1. Ambassador Network Name:

\* 2. Local Workforce Development Board:

\* 3. Amount of Funding Requested:

\* 4. Applicant Name:

\* 5. Applicant Address:

Street Address:

City:

County:

Zip:

**\* 6. Primary Contact for Application:**

First Name:

Last Name:

Title:

Email:

Phone:

**\* 7. Fiscal Agent Contact: (if different from Primary Contact for Application)**

First Name:

Last Name:

Title:

Email:

Phone:

**\* 8. Applicant Type: Please select the category that best describes the applicant. (only select one):**

**\* 9. Applicant Partners: Please list all the organizations/partners who will be participating in the grant. (1500 characters)**

\* 10. Counties Served (check all that apply):

- |                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Adams      | <input type="checkbox"/> Elk        | <input type="checkbox"/> Montour        |
| <input type="checkbox"/> Allegheny  | <input type="checkbox"/> Erie       | <input type="checkbox"/> Northampton    |
| <input type="checkbox"/> Armstrong  | <input type="checkbox"/> Fayette    | <input type="checkbox"/> Northumberland |
| <input type="checkbox"/> Beaver     | <input type="checkbox"/> Forest     | <input type="checkbox"/> Perry          |
| <input type="checkbox"/> Bedford    | <input type="checkbox"/> Franklin   | <input type="checkbox"/> Philadelphia   |
| <input type="checkbox"/> Berks      | <input type="checkbox"/> Fulton     | <input type="checkbox"/> Pike           |
| <input type="checkbox"/> Blair      | <input type="checkbox"/> Greene     | <input type="checkbox"/> Potter         |
| <input type="checkbox"/> Bradford   | <input type="checkbox"/> Huntingdon | <input type="checkbox"/> Schuylkill     |
| <input type="checkbox"/> Bucks      | <input type="checkbox"/> Indiana    | <input type="checkbox"/> Snyder         |
| <input type="checkbox"/> Butler     | <input type="checkbox"/> Jefferson  | <input type="checkbox"/> Somerset       |
| <input type="checkbox"/> Cambria    | <input type="checkbox"/> Juniata    | <input type="checkbox"/> Sullivan       |
| <input type="checkbox"/> Cameron    | <input type="checkbox"/> Lackawanna | <input type="checkbox"/> Susquehanna    |
| <input type="checkbox"/> Carbon     | <input type="checkbox"/> Lancaster  | <input type="checkbox"/> Tioga          |
| <input type="checkbox"/> Centre     | <input type="checkbox"/> Lawrence   | <input type="checkbox"/> Union          |
| <input type="checkbox"/> Chester    | <input type="checkbox"/> Lebanon    | <input type="checkbox"/> Venango        |
| <input type="checkbox"/> Clarion    | <input type="checkbox"/> Lehigh     | <input type="checkbox"/> Warren         |
| <input type="checkbox"/> Clearfield | <input type="checkbox"/> Luzerne    | <input type="checkbox"/> Washington     |
| <input type="checkbox"/> Clinton    | <input type="checkbox"/> Lycoming   | <input type="checkbox"/> Wayne          |
| <input type="checkbox"/> Columbia   | <input type="checkbox"/> McKean     | <input type="checkbox"/> Westmoreland   |
| <input type="checkbox"/> Crawford   | <input type="checkbox"/> Mercer     | <input type="checkbox"/> Wyoming        |
| <input type="checkbox"/> Cumberland | <input type="checkbox"/> Mifflin    | <input type="checkbox"/> York           |
| <input type="checkbox"/> Dauphin    | <input type="checkbox"/> Monroe     |   |
| <input type="checkbox"/> Delaware   | <input type="checkbox"/> Montgomery |   |



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Goals and Objectives (35 Points)

\* 11. Please clearly describe the goals and objectives of the proposed Registered Apprenticeship Ambassador Network, including how those goals and objectives are aligned with the goals of the Governor's PAsmart Program, existing workforce, education, and economic development initiatives, and labor market information. (6,000 characters)



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Proposal Narrative (35 points)

\* 12. Please describe your proposed initiative, including how the proposed Registered Apprenticeship Ambassador Network targets statewide and/or regional approaches informed by data aligned with stability and growth for registered apprenticeships in the commonwealth. (3,000 characters)

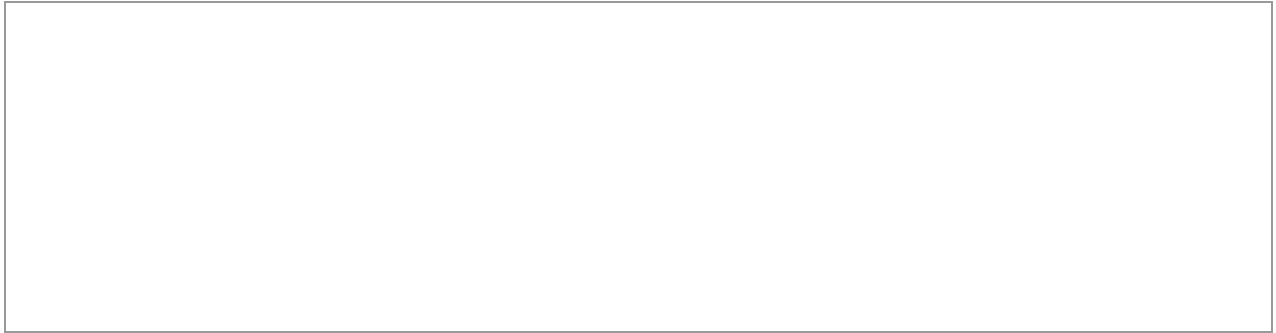
\* 13. How will the Registered Apprenticeship Ambassador Network effectively engage stakeholders, including convening employers and labor organizations, to develop registered apprenticeship models, including pre-apprenticeship programs (if applicable), and manage the project to completion? (3,000 characters)

\* 14. What resources, strategies, and capacity will the Registered Apprenticeship Ambassador Network develop or use to connect and sustain registered apprenticeship programs and pre-apprenticeship programs (if applicable) to diverse talent populations to address the skills gap statewide and/or regionally? (3,000 characters)

\* 15. How will the proposed Registered Apprenticeship Ambassador Network provide a systemic structure of expertise and coordination to grow registered apprenticeship programs and pre-apprenticeship programs (if applicable) that prioritize apprenticeship completion? (3,000 characters)

\* 16. How will the proposed Registered Apprenticeship Program engage relevant cross-sector stakeholders, including businesses, workforce intermediaries (such as industry associations or labor organizations), educational institutions, the public workforce system, and other key community-based organizations, and work collaboratively to ensure support and buy-in to achieve intended outcomes of the proposed initiative? (3,000 characters)

\* 17. Please provide a timeline of major activities and milestones, including the role that each key partner/intermediary will play in design, launch, and implementation of the proposed Registered Apprenticeship Ambassador Network.







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Expected Program Outcomes and Assessment (20 points)

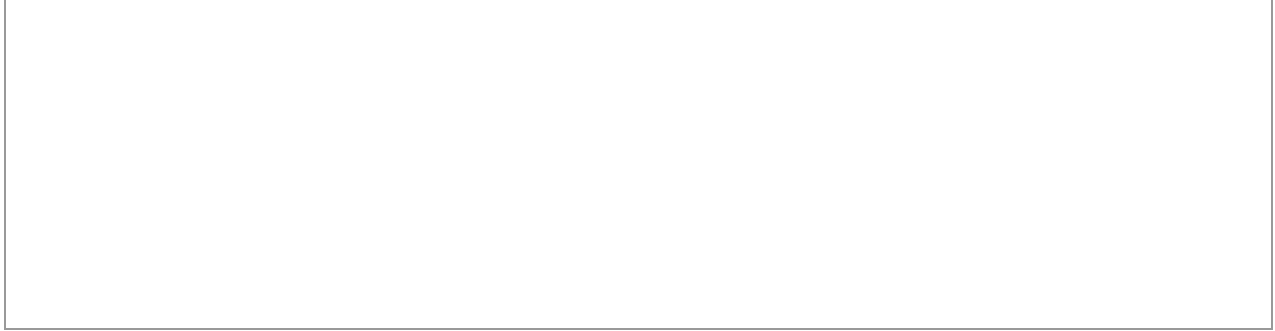
\* 18. Describe how the Ambassador Network will measure its success. Outcomes should be stated in measurable and timely terms, including baseline information and expected improvement, and there is a clear plan for assessing the impact of the program being funded through the grant.

(1,500 characters)

\* 19. Identify the intermediary/partner that will collect and analyze data as part of evaluating the impact of the proposed initiative and whether it achieves the performance outcomes? What is the timeline for data collection and evaluation for the proposed initiative?

(1,500 characters)

\* 20. Establish a timeline for key milestones for the proposed initiative and include when the partnership expects to meet its performance outcomes. (1,500 characters)





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Budget Information (10 points)

\* 21. Leveraging of Resources – Describe how the partnership will leverage other resources beyond the PAsmart Registered Apprenticeship Ambassador Network grant to support and sustain activities. Partnerships must identify all other resources (e.g. local, state, federal, private, philanthropic, nonprofit, etc.) leveraged to support the proposed Ambassador Network. This should include a description of any match funds (in-kind or cash) committed to the Registered Apprenticeship Ambassador Network, if applicable, and how such funds will be used.

(1,500 characters)

\* 22. Budget Narrative – Describe the proposed Registered Apprenticeship Ambassador Networks overall budget, including a thorough explanation of each cost categories (1,500 characters)

\* 23. Budget Form – Please submit a copy of the proposed Registered Apprenticeship Ambassador Network budget form using the upload tool below.

Choose File

No file chosen



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### Other Application Items and Assurances

\* 24. 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, 2020. 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. Upon completion of the grant, grantees will be required to submit a mid-term and a final report on forms supplied by the Pennsylvania Department of Labor and Industry. Are you able to meet all compliance obligations?

Yes

No



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25. If answered NO in Question 24, please describe the barriers that would prevent you from meeting the compliance obligations. (1,500 characters)

26. Support Documentation

Applicants are able to submit additional documentation to support the Ambassador Network proposal, not to exceed 5 pages.

Choose File

No file chosen



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Submission and Signature of Authorized Representative

\* 27. Signature of Authorized Representative - Applicant (Print Name)