

**Division of Employment and Training Services
Incumbent Worker Training
Application**



Incumbent workers are individuals who are employed and worker training is designed to ensure these employed workers are able to acquire the skills necessary to retain employment and advance within the business or to provide the work skills and/or credentials needed to avoid a layoff. Incumbent worker training is conducted with a commitment by the employer to retain the worker(s) who receive the training.

Please complete and submit the Incumbent Worker Training application to dol.iwt@alaska.gov.

BUSINESS INFORMATION

Business Name (DBA):

Federal Employer Identification Number (EIN):

DUNS Number:

Mailing Address:

City/State/Zip:

Website:

Agency Type:

Name of Authorized Employer Representative:

Phone #:

E-mail Address:

Federal and State Employer Information Due Diligence Requirements:

1. General Liability Carrier Name:

Number:

Expiration Date:

2. Workers Compensation Insurance Carrier Name:

Number:

Expiration Date:

3. Automobile Liability Insurance Carrier Name (If driving a company vehicle is required.):

Number:

Expiration Date:

TRAINING INFORMATION

Is the training a US DOL Registered Apprenticeship Program? Yes No

If yes, a copy of the Standards of Apprenticeship will be obtained for the **Training Project Detail***

section. Registered Apprenticeship Sponsor’s Name if it is other than applicant’s name:

Apprenticeship Program Registration Number:

Number of employees to be trained:

Employee’s Name	Hire Date	Position Title	Credentials/ Licenses to be obtained	Training Dates

*If more than 5 employees, attach list.

***Training Project Detail -** Provide a detailed overview of the training that will be delivered to the employee(s). Include method of training (on-the-job, classroom, etc), training dates, skills to be obtained, and anticipated outcome for the employee after receiving the training. (enhanced employability, job upgrade, increase wages, etc.)

BUDGET

The projected training budget is:

Description	Detail	Grant Amount	Contribution Amount
PERSONAL SERVICES			
TOTAL		\$	\$

TRAVEL			
TOTAL		\$	\$

CONTRACTUAL			
TOTAL		\$	\$

TRAINING SUPPLIES			
TOTAL		\$	\$

PARTICIPANT SERVICES			
TOTAL		\$	\$

TOTAL EXPENDITURES

Employers must provide a **contribution** to the incumbent worker training program depending on the size of the business. This contribution can include wages paid to their workers during the time they are in training, as well as other in-kind contributions. Please select one of the following contribution rates:

- 50 or fewer employees = 10 percent
- 51-99 employees = 25 percent
- 100 or more employees = 50 percent

RELEASE/CERTIFICATION

Release: If this training project is associated with USDOL Registered Apprenticeship training, for the purpose of this incumbent worker proposal, the employer/sponsor gives the U.S. Department of Labor, Office of Apprenticeship permission to provide a copy of the approved Standards of Apprenticeship to the Alaska Department of Labor and Workforce Development.

The Employer agrees to:

- Not displace any current employees or face a reduction in regular (non-overtime) hours in order to accommodate incumbent worker training.
- Abide by all labor laws and payment of overtime hours where applicable. Benefits and wages offered must be at the same level and extent of other employees who have been in a similar position for the same amount of time.
- Provide individualized mentoring/training to the identified incumbent worker(s) and provide for agency monitoring if requested.
- Notify DETS immediately of any change in employment status of identified incumbent worker(s).
- Retain the incumbent worker(s) once training is successfully completed, unless good cause is shown to terminate or if the incumbent worker does not wish to continue employment.

Certification: The employer certifies that all information included on this application is true and accurate to the best of their knowledge.

Authorized Employer Signature

Date: