



TRAINING, EMPLOYMENT & DEVELOPMENT FUND REQUEST

The Training, Employment & Development Fund is available to Georgina Island First Nation members and staff. The objective of this grant is to provide financial support to help overcome skill-based barriers. The focus of the grant is to help our First Nation members receive training and job development programs that will improve skills and employability.

The Employment, Training and Development Fund may be used for:

- ✓ Course costs such as Driver's Education Course, Health & Safety course, etc.
- ✓ Fees for certificates, exams and licenses
- ✓ Personal Safety Equipment
- ✓ Some transportation and accommodation costs related to training
- ✓ Tuition fees that are not covered through Post-Secondary Education Department
- ✓ Top-up for subsidized staff wages (OTTER program training, summer student jobs)

How to apply:

Applications are available from the Economic Development Officer, Marlene Stiles at the Georgina Island Administration Office or can be downloaded on-line at <http://www.georginaisland.com.php72-37.lan3-1.websitetestlink.com/community-services/economic-development/>

A completed application package ***must be received at least a week prior to the training start date*** to ensure that the Economic Development Department has adequate time to review and respond to the applicant.

The following criteria is used to determine funding approval:

1. Initial assessment to determine if request meets funding guidelines;
2. If previous request for funding was approved and training was successfully completed;
3. The Economic Development Officer may require further information for clarification (i.e. a business plan or education plan)
4. Once a decision is made, the applicant will be informed of the decision via email and telephone.
5. Upon approval, payment will be made directly to the learning or licensing institution or approved payee.

TRAINING, EMPLOYMENT & DEVELOPMENT FUND APPLICATION

Date: _____

Please attach invoice or quote to application prior to submission.

Please circle:

Staff Training Application (Provided by HRD) **OR** External Application (Personal)

APPLICANT INFORMATION:

NAME: _____

Street Address: _____

City, Province, Postal Code: _____

Telephone: _____ Email: _____

DETAILS OF THE TRAINING YOU WANT TO ATTEND:

Title of Training/Course: _____

Dates of Training: _____

Cost of Training: _____ Amount Requested: _____

Training Provider: _____

Address of Training Institute:

Phone number: _____ email: _____

What skills or technical knowledge do you want to improve?

Describe goals or outcomes intended to be reached from this training event:

Signature of Applicant Signature of Supervisor (if applicable)