



Skills Development Program

Thank you for applying to the Peterborough Community Futures Development Corporation's **Skills Development Program**. Detailed below are the contents of the supporting documentation package that must be submitted with your request for funding. This should provide sufficient information to permit an assessment and decision on your application. Peterborough CFDC may request additional information or clarification of the data provided. All information provided will be kept strictly confidential.

The **Skills Development Program** objectives are to support community based initiatives which support the development of the labour force that will meet the needs of the business community, encourage new local entrepreneurs and attract external investment within the CFDC's service area. It aims to fuel local programs that will build strength within the local labour force by encouraging growth of transferable and diversified skills. The funds will be used to assist and encourage training of employees of "for profit" businesses, mainly tourism, manufacturing and construction sectors. The purpose is to enhance skill sets of those employees, provide transferable skills to the employees, and contribute to the overall strength of the workforce capabilities of the area. Please complete and sign the accompanying Peterborough CFDC request for funding form and return it with the supporting documentation package to:

**Eastern Ontario Development Program Committee
Peterborough Community Futures Development Corporation
351 Charlotte Street
Peterborough, ON K9J 2W1
Applications can be sent via fax at 705.745.2369**

Applications are assessed on the following criteria:

- a. A for-profit organization located and conducting activities in Peterborough County
- b. Investment in transferable skills
- c. Eligible costs include on-the-job or classroom training and may be in-house or outsourced. Trainees may be new hires of existing employees.
- d. Summer students, temporary jobs and part time jobs less than 20 hours per week are **not** eligible.
- e. Peterborough CFDC may contribute 50% of the training costs to a maximum of \$5,000 per employee to a maximum of \$25,000 per business.
- f. Sound project budget and work plan
- g. All projects will be required to submit monthly reporting and a final report that will include a summary of activities, accomplishments and a financial reconciliation of the project.

All Funds must be expended by December 31, 2009

If the application is approved, Peterborough Community Futures Development Corporation will prepare a letter of understanding with terms, conditions and monthly reporting requirements. Funds will be released to the company only after successful completion of the training. Peterborough CFDC reserves the right to request site visits to monitor training progress (with advance notice). Peterborough CFDC contributions will be subject to a 10% hold back until applicant has completed the project, met all project requirements as laid out in the letter of understanding and/or until a final report and budget is received by Peterborough Community Futures Development Corporation.

Any questions or concerns regarding the application process or the **Skills Development Program** should be directed to:

Judy Heffernan, General Manager
Phone: 705.745.5434
Fax: 705.745.2369
Email: comdev@cdc.on.ca



351 Charlotte Street
Peterborough, ON K9J 2W1

Skills Development Program Application

Organization: _____

Contact Name: _____

Address: _____

Telephone: _____

Email: _____

Purpose: _____

Amount Requested: _____

Authorizing Signature

Date

Name

1. Business profile

Contact Person: _____

Position: _____

Fax: _____ Email: _____

Business name: _____

Business address: _____

City: _____ Postal Code: _____

Type of Business: _____

Length of time in business: _____

Classification of Business:

- Retail Food Tourism Manufacturing Service
- Construction Wholesales Other – (specify) _____

Describe your business in detail. What products or services do you provide?

How many employees do you have? _____

Number of current employees _____ Part time _____ Full-time

Number of Employees to be trained _____

2. Project Description

Name/title: _____

Start date: _____ Completion date: _____

Location of project: _____

Describe in detail the nature of the skills investment required. Please use a separate form if the application covers multiple positions or types of training.

What is the objective to be achieved by the organization with the training?

Will the training be: (yes or no)

- _____ On the job
- _____ Classroom
- _____ Combination of both
- _____ In-house
- _____ Out-sourced
- _____ Combination of both

Have you selected a trainer? _____

Name of consultant and firm: _____

Contact information: _____

If the training is in-house, provide qualifications of trainers

(Please include all supplementary information available concerning overall training details and plans, quotes for outsourced training, and any other relevant information.)

3. Project Costs

Major expenditures related to your application

Items	Cost
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total Cost	\$ _____

What is the source of your 50% contribution?

_____ \$ _____

Skills Development Program Funding

_____ \$ _____
Total Funds \$ _____

Attached:

- List of employees to be trained
- Minimum 2 Quotes for Training
- Trainer's CV or qualifications
- Business Registration, Letters of Incorporation or Not for Profit Status (Required)**