



pennsylvania

DEPARTMENT OF LABOR & INDUSTRY
BUREAU OF WORKFORCE DEVELOPMENT ADMINISTRATION

APPLICATION FORM

Type of Submission: _____ Type of Project: _____ Applicant Type: _____

Local Workforce Development Board: _____

Grant/Project Title: _____

Targeted Industry Cluster: _____ Sub-Cluster: _____

Counties served by this grant:

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

Local Workforce Development Areas (LWDA) affected by this grant:

☐ Allegheny	☐ Lackawanna	☐ Pittsburgh	☐ West Central
☐ Berks	☐ Lancaster	☐ Southern Alleghenies	☐ Southwest Corner
☐ Bucks	☐ Lehigh Valley	☐ Tri-County	☐ Northwest
☐ Chester	☐ Luzerne-Schuylkill	☐ North Central	☐ Central
☐ Delaware	☐ Montgomery	☐ Northern Tier	☐ South Central
☐ Westmoreland-Fayette	☐ Philadelphia	☐ Poconos	☐ Statewide

Is your business a Pennsylvania Qualified Small Business as Described in 4 Pa. Code 2.32? _____

Applicant Information

Name: _____

Address 1: _____

Address 2: _____

City: _____

State: PA

Zip Code: _____

Name and contact information of primary person to be contacted on matters involving this application

First Name: _____ Last Name: _____ Phone: _____

Title: _____ Email: _____

Funding proposal request (\$): Labor & Industry: \$ _____ Matching Funds: \$ _____

Authorized representative printed name:

Authorized representative signature/date:

Auxiliary aids and services are available upon request to individuals with disabilities.

Equal Opportunity Employer/Program

APPLICATION FORM

Application Instructions

Labor & Industry (L&I) Workforce Development Grant

1. **Type of Submission:** Indicate whether this is a new request for funds for a new project or if this is a continuation of a project that was previously funded.
2. **Type of Project:** Indicate whether this grant is for training or services.
3. **Applicant:** Select applicant type from drop down menu.
4. **Local Workforce Development Board (LWDB):** Select the name of the LWDB with whom this project will be affiliated from the drop down menu, if applicable.
5. **Grant/Project Title:** Enter the name of the project.
6. **Target Industry Cluster/Sub Cluster:** Enter the name of the Industry Cluster and, if applicable, the sub-cluster. Pennsylvania defined industry clusters can be found here: [Industry Clusters \(pa.gov\)](https://www.pa.gov/government/industry-clusters).
7. **Counties Served** — Include all counties that will be served by the grant.
8. **Local Workforce Development Areas (LWDA) affected** — List all LWDAs involved in the grant. Pennsylvania LWDAs can be found here: [LWDA Map \(pa.gov\)](https://www.pa.gov/government/lwda-map).
9. **Small Business** — Select whether your business is a Pennsylvania Qualified Small Business.
10. **Applicant Information:** Enter the applicant's name and address.
11. **Contact Information:** Enter contact information.
12. **Funding Proposal Requests:** Enter the amount requested for the project and include the amount of matching funds (if applicable)
13. **Authorized Representative:** Enter the name of the authorized representative. Sign and date the form.