

STATE OF VERMONT: Adult Career and Technical Education Equipment Grant Program
APPLICATION COVER SHEET & CHECKLIST

1. Name and address of Career and Technical Education Center(s) involved _____

2. Name of the Primary Contact Person: _____
3. Phone Number: _____ Email: _____
4. Indicate your federal ID number: (if applicable) _____
5. Amount Requested: _____
6. Purpose (brief description): _____

ATTACHMENTS CHECKLIST		✓	<i>For Office Use</i>
A.	Provide a list of relevant Board(s) of Directors or Advisors, if applicable.		
B.	<i>Please describe your project and keep to 3 pages:</i>		
	a) Describe the program and equipment needed to deliver it.		
	b) How does this program align with current labor market demand?		
	c) What employers or industry representatives are you working with and what role do you expect them to play?		
	d) How will curriculum and equipment used in this program be shared or available for sharing?		
	e) How is this program connected to a career pathway or set of stackable credentials?		
	f) effect on the project if the award is not granted; if an award in an amount less than requested would be acceptable and, if so, what is the lowest amount that you feel would be helpful		
D.	Attach a maximum of 3 letters of support from local business or industry representatives; community partners serving prospective program participants; the Adult Career and Technical Education Association; a partner in higher education, etc.		

E.	Complete simplified project budget sheet; including information regarding private funds, employer contributions, and other in-kind donations.		
F.	Please Include first 2 pages of the organizations form 990 (if applicable)		
G.	Attach any other information that you feel would be helpful in assisting the Committee Members in making an award determination. (Pictures/sketches; curriculum; certificate or credential information, employment information, etc.).		

Questions can be directed to: Sarah Buxton, Vermont Department of Labor, sarah.buxton@vermont.gov

Please e-mail the completed application and cover sheet to sarah.buxton@vermont.gov

DRAFT

Vermont Department of Labor
 Adult Career and Technical Education Equipment Grant
 Project Budget Sheet

Name of the Sponsoring Organization: _____

		<u>Dollars</u>
A.	Total Capital Expenditure of project for which you are seeking funds:	\$ _____
B.	Equipment Grant Request:	\$ _____
C.	Existing Funding Sources for this project to date:	Committed Funds please check box Yes/No
a.	Employer /Industry Donations	\$ _____
b.	Tuition/Fee <input type="checkbox"/> <input type="checkbox"/>	\$ _____
c.	In-Kind <input type="checkbox"/> <input type="checkbox"/>	\$ _____
d.	Grants (do not include this potential grant)	\$ _____
e.	Other	\$ _____
Totals		\$ _____ 0.00

*** Please provide copies of documents to support your committed funds

CERTIFICATION

We have have not applied for any other State Equipment Grants this calendar year for this project.

If yes, please specify _____

We have have not received any other Building Community Grants in a previous year.

If you have, what year: _____ Which grant: _____

Amount Received: _____

I certify that the above statements are true and accurate to the best of my knowledge.

Printed Name:

Signature:

Date: