# WORK-BASED LEARNING OPPORTUNITY GRANT – APPRENTICESHIPS

**Application** 

**APPLICANT:** 

#### CERTIFICATION PAGE AND LEADERSHIP COMMITMENT

### 1. Certification of Information Contained in this Application

The submitted Application is binding and valid at the discretion of the Texas Higher Education Coordinating Board. Any terms and conditions attached to an Application will not be considered. Applicant's attachment of such terms and conditions to an Application may disqualify the Application.

By submitting this document, the signatories certify to the following:

- (1) We are legally authorized to submit this application on behalf of the applicant institution.
- (2) The statements herein are true, complete, and accurate to the best of our knowledge.
- (3) If funds are awarded, this institution fully accepts the terms and conditions described in the Request for Applications (RFA) and accepts the obligation to comply with terms and conditions set by the Texas Higher Education Coordinating Board.
- (4) We further certify that any funded activity will be conducted in accordance with all applicable Federal and State laws and regulations, applications guidelines and instructions, Debarment and Suspension, Lobbying Certifications, Drug-Free Workplace requirements, and Special Provisions and Assurances as applicable.
- (5) It is understood that this application constitutes an offer and, if accepted by the Coordinating Board or renegotiated to acceptance, will form a binding agreement.

Name/Title of Person Authorized to Submit Application:

Name:

Name/Title of Primary Institutional Contact:
Name:
Phone:
Email:
Name/Title of Chancellor/President/Chief Academic Officer/Chief Financial Officer from Applicant Institution:
Name/Title:
Signature/Date of Chancellor/President/Chief Academic Officer/Chief Financial Officer from Applicant Institution:
Signature:
Date:

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### **Application**

*Funding Period:* February 15, 2022 – September 30, 2022

Application Deadline: January 31, 2022, 5 PM CDT

Eligible entities submitting applications after this date will not be considered for funding. The information provided in this application will serve as the basis for selection of grant recipients. Sections 1 through 6 of this Application must be completed as well as a Budget Request form and required certification forms.

### Submit completed form and required attachments to:

WorkBasedLearning@highered.texas.gov

Contact for questions: WorkBasedLearning@highered.texas.gov or 512-427-6200

#### 2. □ ⊠Contact Information

Name of Applicant as listed below will appear as the Contracting Party in the Notice of Grant Award:

- (a) Name of the Applicant Institution:
- (b) Contact information of the Primary Contact person, who will serve as point of contact for all THECB communication:

Primary Contact	
Person	
Phone	
Email	
Mailing Address	
Other Contact	
Person:	
F 613011.	
Position/Title:	

(c) Name of Contacts for Program Partner(s), Consortium Members, if applicable. Add additional rows as necessary.

Institution:	
Primary Contact	
Person:	
Institution:	
Primary Contact	
Person:	
Institution:	
Primary Contact	
Person:	

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3.	Requested Grant Amount			
	\$			
Pleas	se provide budget details in the <b>Budget Request form</b> .			
4.	Project Description			
	4.1 Project Summary			
	Please provide information on how your proposed project will expand or develop high demand apprenticeship programs.			
	a) Provide a brief description of how current apprenticeship programs are structured and supported at your institution. Provide the number of students that participated in apprenticeships last academic year and the pay range for those apprenticeships. (250 words maximum) (1-5 points awarded)			

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b) Provide a brief description of how your proposed project fits the overall program design to support, expand, or develop apprenticeships. This section should include a description of how the project addresses grant priorities, if applicable, and a clear connection to employer partners. (500 words maximum) (1-10 points awarded)

Please check all that apply:

	Registered Apprenticeship Program(s)	Apprenticeship Program(s)	Pre- apprenticeship(s)
Support			
Expand			
Develop			

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c)	Provide a brief description of the project's goals and activities, and how you intend to execute the project objectives. (250 words maximum) (1-5 points awarded)
4.2 Descri	otion of Applicant Institution (1-5 points awarded)
institut particip the rat	e a brief description about the relevant capabilities in apprenticeship programs of the cion serving as the primary applicant and the employer or industry partners that will pate in the Work-based Learning Opportunity Grants – Apprenticeship project. State ionale behind the institution's participation in the project and describe the institution's f commitment to the project. (250 words maximum)

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## **5. Project Timeline** (1-5 points awarded)

Complete the table below indicating the duration and estimated completion date for each of the project activities described in Project Summary 4.1.c (above).

Add additional rows to the table if necessary.

Activity	Duration	Estimated Completion Date