

Training Release

Only one training release is required per company

*FEIN (Federal Employer Identification Number):			
*Employer Legal Name:			
Doing Business As Name:	<input type="checkbox"/> Same as Legal Name, or enter here:		
Unemployment Insurance Tax ID:		Active Status:	
Industry Category			
Industry Sub Sector			
Industry Group			
Business Description: (Max 100 characters)			
Branch/Location Name: (Ex: "Harrisburg Office")			
Ownership			
Affirmative Action Employer		Federal Contracting Job Listing Employer	

Employer Details

*Address Line 1:			
Address Line 2:			
*City:		*State:	
*Zip Code:		*County:	#REF!
*Phone Number:		Extension:	
Fax Number:		Email:	
Website URL:			

Personal Details

*Name:			
*Address Line 1:	0		
Address Line 2:	0		
*City:	0	*State:	0
*Zip Code:	00000	*County:	####

I hereby acknowledge that by providing a signed copy of this registration form to my Industry Partnership Coordinator/Local Workforce Development Board Representative (please circle one) I am granting the Coordinator/WDB representative permission to enter confidential data regarding employee training into the Comprehensive Workforce Development System (CWDS) on my behalf. This confidential data includes but is not limited to an employee's social security number.

Signature of Company Representative: _____

Please Print Name: _____

Please complete this form, print and sign the bottom, then return to Sherry Cockerham via fax or scan.

Sherry Cockerham

MACC/DC Project Coordinator

737 Constitution Drive

Exton, PA 19341

(610) 321-8213

(610) 458-7770 (Fax)

scockerham@ccedcpa.com

The Manufacturing Alliance of Chester and Delaware Counties MACCDC Grant Application 2018-2019

Please complete the following information and return with requested materials

Employer Data			
Organization Name:			
Organization Address:			
Contact Person Name/Phone Number:			
Course Title:			
Dates and Location of Course:			
Cost of Course: \$			
<i>Please note: MACCDC will be able to reimburse up to 50% of the cost of the course (course fee only). The check will be made out to the organization at the name/address indicated above.</i>			
Participant Data			
Name of Participant		Title	/RN
Address		City	
State	PA	Zip	
Phone		E-mail	
Fax		Website	
Social Security Number (REQUIRED)		Gender (Optional)	Male/Female
Race (Optional)		Ethnicity (Optional)	
Name of Certification/Credential Achieved by Participant:			
Please answer the following question (REQUIRED) :			
"Did this training improve your technical skill set?" Yes/No (circle one)			
Please explain:			

Please return this form after the completion of the course with the following materials:

- Training description (agendas and/or course flyer)
- Copy of proof of payment (copy of check or proof of credit card payment)
- Copy of certification and/CEs achieved as a result of the training

Fax or mail the MACCDC Grant Application form plus materials to:

Fax: 610-458-7770 Attn: Sherry Cockerham, MACCDC Project Coordinator

Mail: Chester County Economic Development Council

Attn: Sherry Cockerham, Project Coordinator, **The Manufacturing Alliance of Chester and Delaware Counties**
737 Constitution Drive, Exton, PA 19341

Please do not email the form due to security reasons.

Questions: If you have any questions, please contact Jim Lauckner at 610-321-8231 or jlauckner@ccedcpa.com

Next Generation Industry Partnership Training Plan

Grant Title: Manufacturing Alliance of Chester and Delaware Counties

Fiscal Agents: Chester County WDB

Note: This plan is a continuation of the 2017 – 2018 Grant as part of the Implementation Plan

Name of Training	HPO SOC	Estimated # of Participants	Average Cost per Participant	Total Cost per Training	Specific Expected Outcomes
Reading and Interpreting Blueprints and Technical Documents		5			<ul style="list-style-type: none"> 60% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
Industrial Drive Systems		5			<ul style="list-style-type: none"> 60% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
Mechanical Systems: Troubleshooting and Repair		10			<ul style="list-style-type: none"> 70% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
CNC Programming		14			<ul style="list-style-type: none"> 60% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
CNC Operations		10			<ul style="list-style-type: none"> 60% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
Programmable Logic Controls		5			<ul style="list-style-type: none"> 60% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.

Microsoft Project Management 2016		10			<ul style="list-style-type: none"> • 7 of 10 will earn the certification • 80 % will earn a raise and / or promotion
Industrial Automation and Control		5			<ul style="list-style-type: none"> • 70% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
Manufacturing Processes		5			<ul style="list-style-type: none"> • 60% of incumbent worker trainees will receive a wage increase, or a career-ladder promotion.
		69	Enter avg. \$ 725.65	Enter total \$50,070.00	

Please calculate the total number of estimated participants, the average cost per participant, and total cost per training and enter into the appropriate cells. \$ 70.00 adjustment will be made.