



**Office of Economic and Workforce Development**  
**Workforce Development Division**  
One-Stop Business & Career Centers

**OJT AGREEMENT SIGNATURE SHEET**

**CONTRACT NO.:\_\_\_\_\_ MODIFICATION NO.:\_\_\_\_\_ DATE:\_\_\_\_\_**

CONTRACTOR	EMPLOYER

This agreement and all of the attachments to it have been examined and approved by the authorized representatives of the "Contractor" and of the "Employer" and these persons have placed their signatures at the bottom of this page. When so executed, this agreement becomes a binding contract between the "Contractor" and the "Employer" on the beginning date of the "Contract Period" indicated below.

**A. OBLIGATION**

The total funds obligated pursuant to this agreement are: \$\_\_\_\_\_.

**B. CONTRACT PERIOD**

This contract covers the period from: \_\_\_\_\_ to \_\_\_\_\_ and is not to exceed \_\_\_\_\_ training hours.

**C. MODIFICATION**

This modification:

- Increases the funds previously obligated by \$\_\_\_\_\_  
 Decreases the funds previously obligated by \$\_\_\_\_\_

for a new total contract amount of \$\_\_\_\_\_

- Does not change the funds previously obligated.

The effective date of this modification is: \_\_\_\_\_.

**PURPOSE OF THE MODIFICATION:**

**APPROVED BY CONTRACTOR:**

Signature

**APPROVED BY EMPLOYER:**

Signature

Name and Title

Name and Title

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**ON-THE-JOB TRAINING PROPOSAL**

**I. EMPLOYER INFORMATION:**

Company		Telephone No.	
Address		Training Site (if different)	
Name & Title of Contact Person		Individual(s) Authorized to Sign Invoices	
Federal Employer Identification Number		State Identification Number	
Workers' Compensation Policy Carrier		Compensation Policy No	Expiration Date
Number of full-time employees	Incorporated: YES <input type="checkbox"/> NO <input type="checkbox"/>		

**II. TRAINING PROGRAM DATA:**

A	B	C	D	E
Participant(s) Job Title	Employer Wage Rate	Rate of Reimbursement	Total Training Hours	Maximum Reimbursement
		50%		

TOTAL CONTRACT AMOUNT: \$ \_\_\_\_\_

**III. ORGANIZED LABOR CONCURRENCE:** (If under collective bargaining agreement)

Concurrence Given By \_\_\_\_\_  
 Name of Union Representative \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**IV. EMPLOYER'S CERTIFICATION AND AGREEMENT:**

I certify to the best of my knowledge that the information indicated is true and correct and that I intend to pay 50% of the participant's wages during training and retain the participant(s) at the end of the subsidized training period if satisfactory performance is maintained. I am also aware of my responsibilities as stated in this Proposal and the accompanying Assurances.

Signature of Authorized  
 Employer Representative: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**TRAINING OUTLINE**

This form must be completed for each occupation.

OES Code: \_\_\_\_\_ OCCUPATION  
TITLE: \_\_\_\_\_

EMPLOYER'S TITLE FOR THIS OCCUPATION: \_\_\_\_\_

Provide a detailed job description of this position as performed in this company. (Use reverse side if needed.)

Include a detailed outline of training to be given tasks that need to be learned and approximate hours of training required for each task. Total compensated training hours are not to exceed those negotiated. (Use reverse side if needed.)

## **ASSURANCES**

As a condition of the On-The-Job Training Agreement, the employer must:

1. Insure that individuals selected for training are eligible for the program prior to the starting date of this contract (participant is referred for on-the-job training to your organization by an agency contracted with the San Francisco Office of Economic and Workforce Development for this purpose).

Fill the training positions within 30 calendar days of the contract's start date. Funds obligated for training positions that are still unfilled after 30 calendar days will no longer be available.

2. Prepare OJT Trainee Timesheets at the end of each month to reflect activity during that month. Timesheets with original signatures should be sent to the agency that referred this individual to you at the end of the month. The timesheets should reflect the total number of hours the trainee worked during the month.

3. Hire the participant at the beginning of the contract period (after the contract has been approved and the participant has been certified eligible).

4. Maintain copies of invoices, payment records, timesheets and records of training provided under this contract for a period of three years after the training specified in this contract has been completed.

5. Make all required payroll deductions and appropriate tax and withholding payments to Federal and State authorities as required by law.

6. Provide the participants with the same benefits and working conditions (including workers' compensation), as received by other employees of the firm working a similar length of time and doing the same type of work.

7. Adhere to Minimum Wage Ordinance

8. Include, only if applicable, a copy of the company's apprenticeship standards or a letter stating the intention to develop a formal apprenticeship programs with assistance from an appropriate apprenticeship representative. The letter must also contain a statement that the employee(s)/ participant(s) enrolled in apprenticeship occupations will be given an opportunity to advance to journey status.

This is required in those instances where the training being offered is in an occupation that appears on the list of recognized apprenticeship trades as published by the Department of Labor or State Apprenticeship Council.

Should a formal apprenticeship program fail to be developed with assistance from an apprenticeship representative, this agreement will be modified to make certain that it reflects the actual job(s) provided.