

CANADA-SASKATCHEWAN JOB GRANT EMPLOYER APPLICATION

All details and information contained in this application are collected, used and disclosed in the evaluation, approval and administration of the Canada-Saskatchewan Job Grant. Please ensure all fields have been fully completed prior to submitting an application.

APPLICANT INFORMATION (The Employer is referred to as the Applicant)

Full Legal or Incorporated Name

Sask. Corporation Registry Number (if applicable)

Mailing address

City/Town Province Postal Code

Website

Project Contact Title

Email Phone Ext. Fax

AUTHORIZED REPRESENTATIVE OF APPLICANT (Person who has legal authority to enter into an agreement on behalf of the organization such as officers of the organization):

Name of Legal Authorized Representative Title

Email Phone Ext. Fax

Number of Employees ☐ 1 - 50 (Small business as per section 18.97 of *The Employment Program Regulations*) ☐ 51 - 500 ☐ 501 or more

APPLICANT TYPE

- | | |
|---|---|
| <input type="checkbox"/> A federally approved Crown Corporation or Indigenous Government training for jobs located in small or remote communities (i.e. with a population of 100,000 or less) where the Crown Corporation or the Indigenous Government:
(a) is a major employer; and (b) has demonstrated training needs | <input type="checkbox"/> Farmers as defined in <i>The Fuel Tax Regulations, 2000</i> |
| <input type="checkbox"/> Labour organizations as defined in <i>The Saskatchewan Employment Act, 2013</i> ; and self-governing professional organizations, societies or a member of that, that is regulated by an Act | <input type="checkbox"/> Banks registered pursuant to the <i>Bank of Canada Act</i> |
| <input type="checkbox"/> Entities registered pursuant to <i>The Non Profit Corporations Act, 1995</i> | <input type="checkbox"/> Credit Unions registered pursuant to <i>The Credit Union Act, 1998</i> |
| | <input type="checkbox"/> Private Training Institutions |
| | <input type="checkbox"/> Trade unions |
| | <input type="checkbox"/> Commercial Cooperatives |
| | <input type="checkbox"/> For-profit business |

APPLICANT DEMOGRAPHICS

Primary Sector representing Applicant's business activities (choose only one):

- | | |
|---|--|
| <input type="checkbox"/> Accommodation and Food Services | <input type="checkbox"/> Mining and Quarrying |
| <input type="checkbox"/> Administrative and Support | <input type="checkbox"/> Oil and Gas Extraction |
| <input type="checkbox"/> Agriculture, Forestry, Fishing and Hunting | <input type="checkbox"/> Professional, Scientific and Technical Services |
| <input type="checkbox"/> Arts, Entertainment and Recreation | <input type="checkbox"/> Real Estate, Rental and Leasing |
| <input type="checkbox"/> Finance and Insurance | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Educational Services | <input type="checkbox"/> Transportation and Warehousing |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Information and Cultural Industries | <input type="checkbox"/> Waste Management and Remediation |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Wholesale Trade |
| <input type="checkbox"/> Management of Companies and Enterprises | <input type="checkbox"/> Other Services (except Public Administration) |

Are you registered with and covered under the Saskatchewan Workers' Compensation Board for liability insurance for your employees/trainees (minimum \$2 million coverage)? If not, please answer the next question.

☐ Yes ☐ No

Do you have liability insurance for your employees/trainees (minimum \$2 million coverage)? If yes, please answer the next question.

☐ Yes ☐ No

Should my application be approved, I understand it is a condition of contracting that the Minister be added as an additional insured to my liability insurance.

☐ Yes ☐ No

PROPOSED TRAINING ACTIVITIES

- Training must be at least 24 hours in length and completed within a 52-week time frame
- Travel costs are not eligible reimbursement costs under the Canada-Saskatchewan Job Grant
- Training must be provided by an external third party training agency
- Training included in this application must not be part of regular hiring/onboarding training for new employees

Note: Applications from First Nation Bands must include a copy of a Band Council Resolution. Non Profit Corporations cannot recover costs associated with GST.

Training Provider	<input type="text"/>		
Name of Program	<input type="text"/>		
Mailing address	<input type="text"/>		
City/Town	<input type="text"/>	Province	<input type="text"/>
		Postal Code	<input type="text"/>
Website	<input type="text"/>		
Training Contact	<input type="text"/>	Email	<input type="text"/>
Phone	<input type="text"/>	Ext.	<input type="text"/>
		Fax	<input type="text"/>

Training Provider Type

- | | | | |
|--|--|---|--------------------------------|
| <input type="checkbox"/> Federated or Affiliated College | <input type="checkbox"/> Private Training Agency | <input type="checkbox"/> Regional College | <input type="checkbox"/> Union |
| <input type="checkbox"/> Saskatchewan Polytechnic | <input type="checkbox"/> Private Vocational School | <input type="checkbox"/> University | <input type="checkbox"/> Other |

Training Start Date (dd-mmm-yyyy)	<input type="text"/>	Training End Date (dd-mmm-yyyy)	<input type="text"/>
Total Number of Training Hours	<input type="text"/>	Location of Training	<input type="text"/>

Credential

- | | | | | | |
|--|----------------------------------|--|--|---|---|
| <input type="checkbox"/> Certificate | <input type="checkbox"/> Diploma | <input type="checkbox"/> Bachelor Degree | <input type="checkbox"/> Certificate of Completion | <input type="checkbox"/> Certificate of Participation | <input type="checkbox"/> Safety Certificate |
| <input type="checkbox"/> Course Credit | <input type="checkbox"/> License | <input type="checkbox"/> Masters Degree | <input type="checkbox"/> Pre-Professional Program | <input type="checkbox"/> Professional Designation | <input type="checkbox"/> Other |

ELIGIBLE TRAINING COSTS (GST included)

Tuition fees or fees charged by a training provider	\$	<input type="text"/>	Mandatory student fees	\$	<input type="text"/>
Textbooks, software and other required materials	\$	<input type="text"/>	Examination fees	\$	<input type="text"/>
Total CSJG Eligible Training Costs				\$	<input type="text"/>

A [Formal Training Quote](#) must accompany this application form.

TRAINEE/PARTICIPANT INFORMATION AND CRITERIA

- Trainees must be Canadian Citizens, Permanent Residents of Canada or Protected Persons within the meaning of *The Immigration and Refugee Protection Act* (Canada) entitled to work in Canada
- Social Insurance Numbers are required for each trainee
- Trainees will be required to complete pre-training registration form and post-training form
- Applicants/Employers are not eligible trainees under the Canada-Saskatchewan Job Grant

Total Number of Trainees

The Canada-Saskatchewan Job Grant is an employer driven program that connects workers with training. This training will:

- ☐ Support a new hire to the organization; or
- ☐ Result in a new or better job for the trainee (existing employee); or
- ☐ Reduce skills gaps of the trainee (existing employee).

Based on your choice above, please identify how the training you have chosen will benefit the trainee:

APPLICANT DECLARATION AND CONSENT

I hereby declare the following:

- The information provided in this application is complete, true and accurate.
- The information contained in this application will be used to assess my eligibility for the Canada-Saskatchewan Job Grant.
- I have legal authority to apply for, and enter into, an agreement with the Ministry of Immigration and Career Training.
- I understand reimbursement of eligible costs will not be issued until the conclusion of training activities.
- I understand I will be required to submit a final report, receipts for eligible training costs, and trainee documentation within 30 days of the training end date.
- I am in good standing with the provisions of *The Saskatchewan Employment Act, 2013* and regulations.
- I understand grant funding to support training shall not replace existing employer investments in training.
- I understand any costs incurred prior to a Canada-Saskatchewan Job Grant approval are not eligible for reimbursement.
- Trainees(s) participating under this program shall not be held personally responsible for eligible training costs incurred during the training period, such as tuition fees, mandatory student fees, textbooks.
- I intend to employ trainees in Saskatchewan upon completion of the training activities outlined in this application.
- I understand the maximum amount of financial assistance to be paid for each trainee is \$10,000 per contract.

I hereby consent the Ministry of Immigration and Career Training to verify my application with other government programs.

Date (dd-mmm-yyyy)

Legal Authorized Representative, Name on behalf of Applicant (please print)

Signature on behalf of Applicant

Please submit your application and training quote to the nearest Canada-Saskatchewan Job Grant (CSJG) office.
You will be contacted once your application has been received.

Saskatoon and Area

Mailing Address:
225 - 1st Avenue North
Saskatoon, SK S7K 1X2

Telephone: (306) 964-1005
Email: cansaskjobgrant@gov.sk.ca

Regina and Area

Mailing Address:
1000, 2103 - 11th Avenue
Regina, SK S4P 3Z8

Telephone: (306) 787-4677
Email: cansaskjobgrant@gov.sk.ca