

# MASSACHUSETTS WORKFORCE TRAINING FUND

## GENERAL PROGRAM TRAINING GRANT

### REQUEST FOR APPLICATIONS

On behalf of the Executive Office of Labor and Workforce Development, the Department of Career Services and Commonwealth Corporation are requesting applications for General Program Training Grants from the Massachusetts Workforce Training Fund. For more information, please visit [www.mass.gov/wtftp](http://www.mass.gov/wtftp).

**Deval L. Patrick**

Governor

**Timothy P. Murray**

Lt. Governor

**Joanne F. Goldstein**

Secretary

Executive Office of Labor and Workforce Development

## Rolling Application Process

Workforce Training Fund Training Grant applications will be accepted and reviewed throughout the year. Upon submission, applications undergo a technical review to assure that all required application documentation has been submitted. Applications that are incomplete or missing required documentation will not be considered for funding. After the technical review, all application documentation is reviewed and applicant companies/organizations are checked for Workforce Training Fund eligibility including compliance with applicable federal and state laws. Next, the Workforce Training Fund Advisory Board convenes to review and approve grant awards. \* After the Advisory Board meeting, applicants are notified of the application outcome. **In most cases, applicants will be notified of application outcomes within 60 days from submission of a complete application.\***

---

\* Workforce Training Fund applications will be considered by the Workforce Training Fund Advisory Board when a quorum is present. If a quorum is not available, award decisions will be made at the next available opportunity.

# Table of Contents

Overview .....	4
Workforce Training Fund Programs.....	4
Scope of Request for Applications .....	5
General Program Training Grant Guidelines.....	5
Application Instructions .....	7
Training Module Description and Budget Attachment Instructions.....	13
Return on Investment (ROI) Statement Instructions .....	15
Financial Statement Instructions .....	17
Application Submission Instructions.....	17
Application Content Checklist.....	18
Special Instructions for Consortium Applications.....	18
Contact Information.....	18

## Overview

According to Massachusetts General Law, Chapter 29, Section 2RR, the Massachusetts Workforce Training Fund Programs are state programs, financed by Massachusetts employers:

*“to provide grants to employers, employer groups, labor organizations and training providers for projects to provide education and training to existing employees and newly hired workers. In determining who shall receive grants, the commissioner shall consider the following criteria:*

*(i) whether the project will increase the skills of low-wage, low-skilled workers;*

*(ii) whether the project will create or preserve jobs at wages sufficient to support a family;*

*(iii) whether the project will have a positive economic impact on a region with high levels of unemployment or a high concentration of low-skilled workers;*

*(iv) whether the employer has made a commitment to provide significant private investment in training during the duration of the grant and after the grant has expired;*

*(v) whether the project will supplement, rather than replace, private investments in training;*

*(vi) whether the employer is a small business that lacks the capacity to provide adequate training without such assistance;*

*(vii) whether the project will provide residents of the commonwealth with training for jobs that could otherwise be filled only by residents of other nations; and*

*(viii) whether the project is consistent with the workforce development blueprint prepared by the regional employment board.*

*(ix) whether the employer has recently or plans to locate its business in the commonwealth and employ residents of the commonwealth who will benefit from training, provided that said employer shall not receive funds until said employer has located its business in the commonwealth.”*

## Workforce Training Fund Programs

The Workforce Training Fund consists of three programs:

1. The **Hiring Incentive Training Grant Program** assists companies in paying for training of new employees that are Massachusetts residents and who have been unemployed for 6 months or more; the period of unemployment is waived for Veterans. HITGs provide \$2,000 per employee, up to \$30,000 per company over a 12 month period. <http://www.mass.gov/wtftp/hitg>
2. The **Express Program** provides grants of up to \$30,000 to companies with 50 or fewer employees and to labor unions to plan and implement employee training through use of pre-approved training vendors and courses. Applicants are eligible to receive up to \$30,000 over a 24 month period. <http://www.mass.gov/wtftp/express>

3. The **General Program** provides two types of grant:
  - a. **General Program Technical Assistance Grants** provide up to \$25,000 to individual employers or group of employers/employees, for a period of up to six-months, to assess training needs, develop training curriculum, identify career ladders and associated skill requirements, and/or to plan for a training infrastructure. <http://www.mass.gov/wtfg/general>
  - b. **General Program Training Grants** provide up to \$250,000 to employers, employer organizations, labor organizations, intermediary organizations, training providers, or a consortium of such entities, for up to two years, train incumbent workers. <http://www.mass.gov/wtfg/general>

## **Scope of Request for Applications**

Information provided in the *General Program Training Grant Application, Training Module Description and Budget* and the *General Program Training Grant Request for Applications* (this document) **refers exclusively to the training grants within the General Program of the Workforce Training Fund.** The following information does not apply to the General Program Technical Assistance Grants, Hiring Incentive Training Grants or Express Program grants.

## **General Program Training Grant Guidelines**

- General Program Training Grants are awarded competitively to employers, employer organizations, labor organizations, intermediary organizations, training providers, or a consortium of such entities, to train incumbent workers.
- Greater weight will be given to applications that address selection criteria associated with job creation/job preservation, increases in skills of low-skill, low-wage workers, and/or the applicants' plans to locate jobs and employ residents of Massachusetts and applications focused on employee skills attainment and achievement of transferable and measurable skills.
- Employers are encouraged to apply for training grants focusing on adult basic education (ABE) and/or English for speakers of other languages (ESOL).
- Employers who are minority or female-owned enterprises are encouraged to apply.
- Organizations whose employees are being trained must pay into the Workforce Training Fund.
- Companies of any size are eligible to apply.
- All trainees must be employed in Massachusetts. Companies that are planning to relocate to Massachusetts and hire and train Massachusetts residents may still be eligible for a Workforce Training Fund grant provided they plan to conduct the training in Massachusetts.
- Grants must be matched dollar-for-dollar by the applicant and its partners, if any. The match can be cash or in-kind. In-kind matching funds may include wages paid to trainees while in training.
- All trainees must be paid at their regular rate during training.

- Employers may use training provider(s) of their choice. They may also use qualified internal trainers (i.e. employees of the company) to conduct internal training. Applicants must provide information pertaining to the qualifications of training providers for evaluation during the application review process.
- Applicants should negotiate the costs of instruction and related training materials with training vendors to ensure that proposed costs are reasonable and necessary.
- General Program award recipients will not be considered for new General Program grants until two years have elapsed from the completion of the contract period for the most recent General Programs training grant.
- Training programs must be completed within two years.
- Applications that do not meet the technical requirements (e.g. incomplete application or missing documentation) will not be considered.
- Applications for training grants will not be approved if the training provider has rendered financial services to the applicant within the last 2 calendar years immediately prior to filing the grant application. Such financial services include, but are not limited to, auditing, accounting and tax preparation.
- Workforce Training Fund staff may perform post-training analysis of training funded by the Workforce Training Fund to analyze effectiveness and methodology. Grantees may be required to provide information including, but not limited to, participant-level data. Grantees will be notified in advance of information requests and will be given sufficient time to provide available information.
- Trainees cannot be government employees.
- A certified copy of a Certificate of Good Standing from the Massachusetts Department of Revenue that is less than 6 months old must be provided by WTF grantees prior to consideration for grant awards.
- Applicants must also be in full compliance with all obligations to the Department of Unemployment Assistance, Department of Industrial Accidents, and any other obligations to the Commonwealth of Massachusetts.
- Applicants or vendors who have been debarred from doing business with the Commonwealth of Massachusetts or the Federal Government will be excluded from participating in WTF funded projects.

# Application Instructions

Please provide all of the information requested according to the instructions below. In addition to the space provided, you may attach Word, Excel, or PDF files when submitting your application.

## I. Background Information

**Applicant Organization Name** Please use full, legal name as registered with the Secretary of the Commonwealth of Massachusetts.

**Application Date** Insert the date on which you are submitting the application for consideration.

**Year Established** What year was your company established?

**Doing Business As** If you operate under another name, please list your DBA name(s) here. If not, please leave this line blank.

**Contact Person Name & Title** This person does not necessarily have to be the senior-most person at your facility but should be familiar with the application and will be able to respond to phone calls and/or e-mails regarding your application

**Address, Phone, Fax & E-mail** These items refer to the contact person responsible for the application. This will be used for correspondence with the contact person listed. This address may or may not be the location of training.

**Does this application include a training consortium?** If your application is a collaboration involving more than one organization whose employees will benefit from the training proposed, please indicate "Yes." Please also list partner organizations. For our purposes here, training vendors are not partners. Consortium partners are those organizations whose employees will receive training.

**Please Note:** Consortium applicants should carefully follow "*Special Instructions for Consortium Applications*" (below).

**Federal Employer ID Number** This item refers to the FEIN issued by the Internal Revenue Service.

**DUA ID Number** This item refers to the Division of Unemployment Assistance Identification Number.

**Local Workforce Investment Board** Please select from the list provided. Your selection should correspond with the area in which training will take place. To determine which Workforce Investment Area to select, please visit: <http://www.massworkforce.com/cities-towns.php>

**Type of Organization:**  For-Profit  Non-Profit Check whichever box applies.

**Industry Type:** Please choose a general classification from the list provided (below) that best captures the applicant’s industry:

- |   |  |
|---|--|
| 1. Agriculture, Forestry, Fishing and Hunting | 11. Real Estate and Rental and Leasing                                       |
| 2. Mining                                     | 12. Professional, Scientific, and Technical Services                         |
| 3. Utilities                                  | 13. Management of Companies and Enterprises                                  |
| 4. Construction                               | 14. Administrative and Support and Waste Management and Remediation Services |
| 5. Manufacturing                              | 15. Educational Services   |
| 6. Wholesale Trade                            | 16. Health Care and Social Assistance  |
| 7. Retail Trade                               | 17. Arts, Entertainment, and Recreation                                      |
| 8. Transportation and Warehousing             | 18. Accommodation and Food Services  |
| 9. Information                                | 19. Other Services (except Public Administration)                            |
| 10. Finance and Insurance                     |  |

For a full list of industries classified under each code, please visit: <http://www.census.gov/naics/2007/NAICOD07.HTM>

**Total Number of Current Employees:**

<b>Parent Company:</b>	How many people does your parent company employ full-time?	How many people does your parent company employ full time?
<b>Massachusetts:</b>	How many full-time employees work in Massachusetts?	How many part-time employees work in Massachusetts?
<b>Applicant Worksite(s):</b>	How many employees work at the worksite(s) participating in this project?	How many part-time employees work at the worksite(s) participating in this project?

**Company Headquarters Address:** Please list the address of your organization’s headquarters.

**1.) Briefly describe the nature of the applicant’s business including a description of products or services provided:**

Provide a brief description of your business, industry, and products and/or services produced.

**2.) a.) Has your company experienced layoffs in the past year?**  Yes  No

**b.) If Yes, how many workers have been laid off?**

**c.) Please describe the nature of the layoff and indicate if how many laid-off workers have been recalled:**

Was the layoff seasonal or temporary? Have any of those laid-off been rehired? When and why did layoffs take place?

**3.) a.) Are any of the employees to be trained union members?**  Yes  No

**b.) If Yes, how many?**

**c.) If Yes, how was the union involved in the design of the training plan:**

Applications involving union members must be accompanied by a letter of support from the union local(s) involved.



**4.) Is this application the resubmission of a previous application which was not funded?**  Yes  No

Your application is considered a resubmission if it was previously not selected for funding and it being submitted again, with or without changes. If you have previously received a WTF grant and are applying for the first time since your last grant, your application is not considered a “resubmission.”

**5.) a.) Has your organization (including parent company) received a Workforce Training Fund Program grant in the past?**

Please check “yes” if you have received any WTF grants in the past, including Hiring Incentive Training Grants, Express Program Grants, Technical Assistance Grants, or General Program Training Grants of any size.

**b.) If yes, please describe previous grants received, including the award amount, type of grant, topics covered, dates, and the results of training.**

If you wish to inquire about your company’s grant history, please contact WTFP staff at (617) 626-5190 or [jalbert@detma.org](mailto:jalbert@detma.org). WTFP staff can verify participation and provide specific information pertaining to previous WTF grants.

## II. Proposed Training Project Summary

**1.) Provide a brief description of the proposed training plan.**

Given the limited space available, please provide a summary-level description of your project.

**2.) Why is training needed? What are the specific business goals and problems you are trying to address and how will training resolve them?**

What specific business goal(s), and/or business problem(s) do you seek to resolve with the proposed training initiative? A clearly stated need is an important component to evaluating a training plan. Do not simply describe desired outcomes or benefits of training.

**3.) Describe your organization’s current training activities and explain how the proposed training is different from, and will enhance, rather than replace those activities:** Please describe training activities and estimate the amount of money invested in employee training last year. Explain the difference between what you are already doing for training and what you propose to do in the proposed initiative. Please also describe how the proposed training will supplement, rather than replace private investment in training. How is the training proposed in your application above and beyond the current efforts and resources of your company? Will the proposed training build on your current efforts?

**4.) Please list and describe the qualifications of the training provider(s) you have selected for the proposed training project:** Who is providing Training? How are they qualified to provide training?

**5.) Describe the process you used to select training providers:** Please describe the process which led you to choose the training provider(s). Did you seek additional quotes from competitors? Have you worked with the training provider in the past? Did you negotiate costs with the vendor(s) selected?

**6.) Describe the process you used to involve employees in developing the training plan:**

**7.) Describe the applicant’s commitment to provide significant private investment in training after the grant has expired:**

In specific terms, how will the company’s investment in training continue during and beyond the grant period? Is training sustainable? How will the skills and knowledge acquired from the training program be sustained after the training period (i.e. “train-the-trainer” model)? Will additional training follow? How does your history of investment in training provide evidence to support this?

**8.) Indicate the number of trainees participating and the average wages of trainees, expressed as an hourly wage:**

Example:

<b>Trainee Category Groups</b>	<b>Number of Trainees Participating (unduplicated)</b>	<b>Average Hourly Wage</b> <i>(Please include all cash earnings including incentives, commissions, and cash bonuses. Do not include fringe benefits.)</i>
Managers & Administrators	<i>3</i>	<i>\$28.85/hour</i>
Administrative Support & Clerical	<i>2</i>	<i>\$19.75/hour</i>
Professional & Technical	<i>3</i>	<i>\$26.25/hour</i>
Sales & Marketing	<i>4</i>	<i>\$25.00/hour</i>
Service	<i>0</i>	<i>n/a</i>
Production/Construction	<i>23</i>	<i>\$18.50/hour</i>
<b>Total Unduplicated Participants</b>	35	

In the center column, please provide a complete count of expected participants, according to the category groups provided. There should be no duplication of trainees, even when one trainee is participating in more than one training module.

In the column on the right, please input the average wage, stated as an hourly figure, for all trainees in each category group. For instance, if there are two managers, one who earns \$30/hour and one who earns \$20/hour, the average hourly wage for “Managers and Administrators” is \$25. You should include all cash income, including bonuses and commission, not just base pay, whenever applicable. Do not include fringe benefits or other non-cash compensation.

**III. Impacts**

**1.) Describe what the impact of this training initiative will be on the size of your workforce. Please make specific estimates of the number of new jobs created and/or the number of anticipated lay-offs which would be prevented as a result of training.**

If you anticipate increasing the size of your workforce as a result of this training initiative, please specify and describe anticipated the nature and wages of new positions and what role this training initiative plays. Have you

recently experienced layoffs or are layoffs expected? If you believe training will decrease the number of layoffs in the future, please describe the nature and wages of the jobs saved. Please explain how this training will prevent layoffs. If a significant number of jobs created or preserved are part-time jobs, please specify how many are part-time.

Example:

*Last year two employees from the Solid-Surface Manufacturing area were laid off as a result of decreased sales. Upon completion of training we will be able to expand our product offerings to include countertops made of recycled composite materials. Given the growing demand for these products, we anticipate a 9% increase in the Solid-Surface Manufacturing product sales. This additional revenue will make the division more viable and will prevent more layoffs. We plan to rehire the 2 employees who were laid off and add 3 additional employees for a total gain of 5 employees. These 5 positions are Assembler, Class II positions. They are production line positions with an average annual wage of \$38,000.*

**2.) a.) Describe how wages of trainees will be impacted by this training initiative and when you expect this to take place.** Please describe any anticipated wage increases that are closely connected to the proposed training initiative.

**b.) What is the total number of employees expected to receive wage increases as a result of training?**

**c.) What is the average annual wage increase expected as a result of training?** Indicate increases as a percentage of current annual wages earned (including overtime, bonuses, commission, etc.) by those expected to earn increases.

**d.) During the last 2 years, what was the average annual wage increase for your workers?** Provide historical data for comparison.

**3.) Describe how the project will increase the skills of low-wage, low-skilled workers, if applicable.**

Low-wage worker means a worker whose average weekly wage is less than 50% of the most recent average weekly wage as determined under M.G.L. c. 151A, § 29 subsection (a). As of October 2010, the state average weekly wage was \$ 1,088.61. Therefore, a low-wage worker is someone who earns less than \$544.31 per week (\$28,303.86 annualized).

**4.) How will this training make your company more productive and how will this be measured?** In this section please comment on the impact this training initiative will have on productivity. Please explain how productivity will be impacted as well as what metrics will be used to measure improvements to productivity that relate to this training initiative. Whenever possible, measures should be quantifiable.

Example:

*We expect, as a result of training, to reduce machine set-up time and frequency. We also anticipate increasing output per labor hour by 6% in the first year, and 3% each year after. Also as a result of training, we anticipate quality improvements which will result in a 25% reduction in rework.*

**5.) How will this training make your company more competitive and how will this be measured?** In this section, please comment on how this training initiative will make your company more competitive. Please also describe how you will measure success in this area. For instance, will you increase market share? Will you be able to enter new markets or

offer new products or services? Will it make your company more profitable? Whenever possible, measures should be quantifiable.

Example:

*This training initiative will reduce our production costs and will allow us to bid more competitively against competitors in this very cost-competitive industry. By doing so, we hope to increase market-share from 9% to 11% within two years. This training initiative will also allow us to produce triple coated widget covers which will allow us to respond to customer demand by entering the outdoor widget market. We hope to produce and sell 20,000 outdoor widgets by the end of the grant period. This represents over \$300,000 in new revenue as well as a more comprehensive line of product offerings.*

**6.) Please check all of the following selection criteria that apply to the proposed training project:**

**the project will increase the skills of low-wage, low-skilled workers;**

Low-wage worker means a worker whose average weekly wage is less than 50% of the most recent average weekly wage as determined under M.G.L. c. 151A, § 29 subsection (a). As of October 2010, the state average weekly wage was \$ 1,088.61. Therefore, a low-wage worker is someone who earns less than \$544.31 per week (\$28,303.86 annualized).

**the project will create or preserve jobs at wages sufficient to support a family;**

Wages sufficient to support a family means a wage which exceeds 50% of most recent average weekly wage as determined under M.G.L. c. 151A, § 29 subsection (a). As of October 2010, the state average weekly wage was \$ 1,088.61. Therefore, wages sufficient to support a family means wages which exceed \$544.31 per week (\$28,303.86 annualized).

**the employer has made a commitment to provide significant private investment in training during the duration of the grant and after the grant has expired;**

**the project will supplement, rather than replace, private investments in training;**

**the employer is a small business that lacks the capacity to provide adequate training without such assistance;**

Small business means an enterprise with less than 500 employees.

**the project will provide residents of the commonwealth with training for jobs that could otherwise be filled only by residents of other nations;**

**the employer has recently or plans to locate its business in the commonwealth and employ residents of the commonwealth who will benefit from training, (employer shall not receive funds until said employer has located its business in the commonwealth);**

**the employer is a minority-owned enterprise;**

**the employer is a women-owned enterprise; and**

**the project includes Adult Basic Education (ABE) and/or English for Speakers of Other Languages (ESOL)**

**7.) What other impacts of training do you expect? How will success be measured?**

Please describe other benefits expected as a result of this training initiative. Whenever possible, include measurements you will use to measure success.

Example:

*Over the next decade, there will be a dramatic increase in need for assisted living facilities as the population ages. As a result of this training initiative the company will be able to increase capacity in our assisted living facilities to accommodate increasing demand. By the end of the next fiscal year we will have increased capacity by 10%. Furthermore, as a result of the training initiative, the company will expand the use of electronic medical records. More extensive use of electronic medical records will not only aid us in compliance with new regulations, but should offer significant cost savings. It is the goal of XYZ Inc. for 100% paperless medical records by July 2012.*

**IV. Applicant Feedback**

- 1.) **Did you receive any assistance preparing this application?** Please provide information on assistance provided.
- 2.) **Please rate the ease of using this application on a scale of 1 to 5 (with 1 being “much easier than expected” and 5 being “much more difficult than expected”) :**
- 3.) **How did you learn about the Workforce Training Fund Program (check all that apply)?**

**V. Authorizations**

Please carefully read the requirements of the application prior to signing. Authorized officials (e.g. CEO, President, Director) must agree to terms and sign the application electronically.

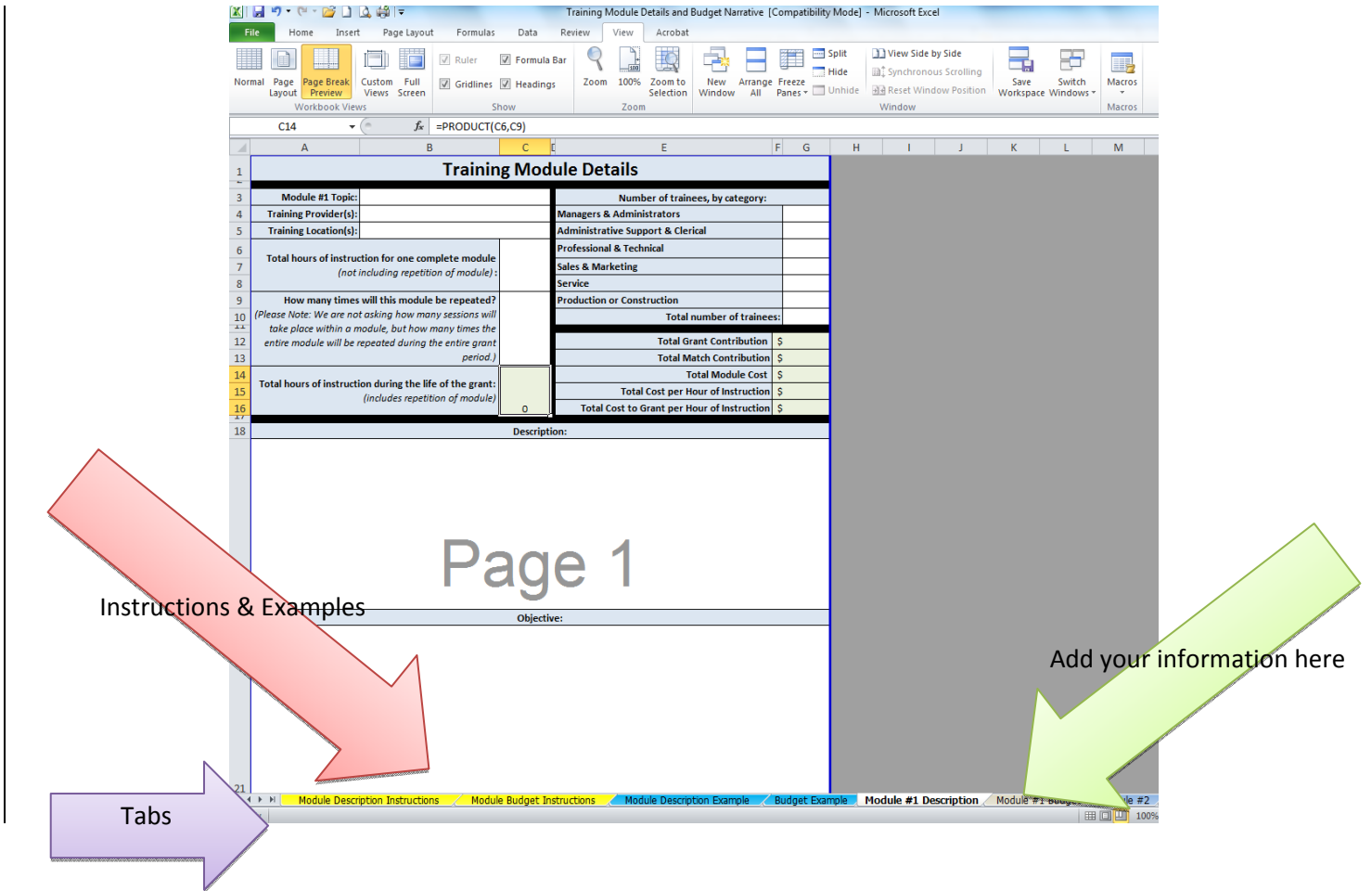
**Training Module Description and Budget Attachment Instructions**

Please complete the Training Module Description and Budget attachment (Microsoft Excel Worksheet). Each training module proposed in your application should have a unique description and budget. For our purposes, a “Module” is a course of training which covers a given topic. A module may include one class session or several. A variety of related sub-topics can be combined under one module. A module may be repeated to accommodate several different groups of trainees during the grant period.

Please Note: Unless otherwise noted, reviewers will assume all participants of a module will receive identical training. If training on the same topic varies significantly among different groups of participants, each variation should be described as a separate module. This is particularly important if the number of hours of training and/or measures of success differ between groups. For example, Customer Service Training is too broad a topic if one group of Sales Associates are receiving 15 hours of training and another group of Call Center Representatives are receiving 60 hours of training. In this

case it is recommended that the topic be organized as two unique modules: Module 1- Customer Service for Sales Associates & Module 2 – Customer Service for Call Center Representative.

The *Training Module Description and Budget* is a Microsoft Excel worksheet with multiple tabs (see image and descriptions below). In addition to instructions and examples, there is space provided for up to seven different training modules. Please provide all of the information requested for each module. Please use the instructions and examples for guidance. If necessary, you may include clearly labeled attachments to supplement the information provided in the worksheet. Do not include brochures or marketing materials provided by training vendors. Summarize pertinent information in the form provided.



**Description of the *Training Module Description and Budget* Tabs:**

***Module Description Instructions* Tab and *Module Budget Instructions* Tab:** These tabs provide instructions on how to complete each field in the *Module Description* and *Module Budget* tabs. Helpful tips on how the reviewers will evaluate this application information are also provided. Reading this information prior to completing the *Module Description* and *Module Budget* tabs is highly recommended.

**Module Description Example and Budget Example Tabs:** This tab offers examples of a completed *Module Description* and *Budget*. Note that the *Module Description* and *Budget* refer to the same training. It is highly recommended that you review this tab prior to completing the *Module Description* and *Budget* tabs.

**Module #1 - 7 Description and Module #1 - 7 Budget Tabs:** Complete these tabs based on your proposed training plan following the given the instructions and examples.

**Combined Total Budget Tab:** This tab automatically calculates the training plan totals based on the information provided in the *Description* and *Budget* Tabs.

## Return on Investment (ROI) Statement Instructions

Within the context of the selection process, the “Return on Investment” (ROI) is a ratio between the WTF funds invested and the projected monetary value of the benefits of the investment. For our purposes, the ratio is determined by comparing the amount of WTF funds invested with the returns found in the “Core ROI” (as outlined below) and the “Additional Measures” of ROI which resulted from the training. The period of time used in the calculation should be limited to the two-year period for which each WTF grant contract is written. Estimates should be reliable. Applicants will be accountable for ROI projections if they receive a grant. Do not over-estimate. All the information provided in the ROI must be directly related to training and should not include forecasts unrelated to training.

An important measure of effectiveness and efficiency with which WTF funds are being used is the ROI that an organization demonstrates in the following core areas. Estimating a specific monetary benefit for each of these areas allows for the projected results to be compared and aggregated. An individual company’s ROI will not be reported in any external report without first executing a contract between the Workforce Training Fund and the grant recipient. Below is a suggested methodology on how the Core ROI measures can be calculated.

**PLEASE NOTE:** No form is provided for ROI statements. Applicants may submit their choice of a Word, Excel, or PDF file with ROI information.

### Core ROI

***Company Matching Funds ROI:*** *To what degree will the applicant exceed the one-to-one match requirement (including cash and in-kind contributions) to provide additional private investment in training. For example: If a company has match funds totaling \$225,000 for a grant request of \$100,000, then the added monetary value coming from the match would be \$125,000.*

***Company Match ROI - \$125,000***

***Promotion ROI:*** *What is the annual cash value of increased wages due to promotions which are directly attributed to training? For example: Four employees are promoted as a result of the training and given*



a 10% pay raise on their average wage of \$30 per hour. Employee promotions (4) x \$3.00 (10 % raise on the average wage of \$30/hour) x 40 hours/week x 52 weeks/year = \$24,960

**Promotion ROI - \$24,960**

**Wage Increase (not connected to promotion) ROI:** What is the cash value of wage increases which are directly attributed to training, but are not associated with promotion? For example: Twenty employees who successfully complete training receive a 3% raise on an average salary of \$30,000 = \$900 x 20 = \$18,000

**Wage Increase ROI - \$18,000**

**Employee Retention/Turnover Reduction ROI:** What is the estimated cash value (reduced turnover cost to the applicant) of retaining employees who would have otherwise left the company. This measure is specific to claims or reduced employee turnover as a result of training. For example: Turnover will be reduced causing two additional employees to be retained as a result of the training. In this example, the company's replacement cost is \$10,000 per vacancy. (\$10,000 x 2) = \$20,000.

**Employee Retention/Turnover Reduction: ROI- \$20,000**

**Job Creation ROI:** What is the estimated cash value (salary & fringe) of jobs created directly as a result of training. For example: As a result of the training, a company will add three new positions with an average salary and fringe benefits valued at \$70,000 per year. (3 x \$70,000) = \$210,000

**Job Creation ROI - \$210,000**

**Increased Productivity ROI:** Estimate the cash value of productivity increases described in your application. For example: According to historical data, a 1% increase in productivity has a value of \$100,000 savings to the company. The company estimates that the training resulted in a 5% increase in productivity. (5 x \$100,000) = \$500,000

**Productivity ROI - \$500,000**

**Increased Competitiveness ROI:** Estimate the cash value of productivity increases described in your application. For example: The organization calculates, according to historical data, a 1% increase in market share equals \$250,000 in additional revenue. They project a 4% increase in market share. (4 x \$250,000) = \$1,000,000

**Competitiveness ROI - \$1,000,000**

**Total Core ROI = \$1,897,960**

### **Additional ROI**

Applicants may also add other examples of ROI resulting from the WTF funded training. These additional calculations should be tied to the specific performance and operational improvement cited in your application, and may include items such as increases in sales volume, inventory reductions, cycle time reductions, or any other impacts the training had upon the organization for which a ROI can be calculated. Examples of additional ROI include:



**Product Development Cycle Time ROI** For example: A 33% decrease in new product development cycle time, results in one additional product per year. A 50% decrease in product enhancement cycle time allows for 3 additional product revision launches per year. One new product and three new revisions per year would equate to approximately a 1% increase in revenue, or \$200,000.

**Product Development Cycle Time ROI - \$200,000**

**Reduction in Vendor/Contractor Expenses ROI** For example: A 75% reduction in software contractor expenses. Previously, annual expenses for software contractors were \$165,333 x 75% = \$124,000

**Reduction in Vendor/Contractor Expenses ROI - \$124,000**

**Total Additional ROI - \$324,000**

**Total Combined ROI: \$1,221,960**

**Total WTF Grant Request: \$100,000**

**Ratio: 12.22 to 1**

## Financial Statement Instructions

All WTF General Program applicants are required to provide two copies of the company's financial statements for the two most recent years. Audited financial statements are preferred. Financial documentation is requested in order to evaluate the applicant's basic financial stability. Financial information will not be used to make judgments about any organization's profitability relative to other applicants.

Documents provided as part of the application process, including any documents that contain financial information are kept confidential and will be retained by the Department of Career Services in a secure location until destroyed in accordance with the Statewide Records Destruction schedule. Please note that under Massachusetts General Laws Chapter 29, s.2RR(e) any documents submitted containing financial information are not public records and are not subject to disclosure.

## Application Submission Instructions

All applications will be received electronically (including consortium applications). Applications should be submitted via e-mail to [wtfp@commcorp.org](mailto:wtfp@commcorp.org). Please review the checklist below, prior to submission. Cover letters should include a brief summary of the proposal as well as any supplemental information you wish to provide. Applicants who are re-applying after having a previous application denied should address feedback provided in reference to your last application in the cover letter.

Hard Copy attachments, including Financial Statements should be mailed to:

Workforce Training Fund Program  
Commonwealth Corporation  
2 Oliver Street, 5<sup>th</sup> Floor  
Boston, Massachusetts 02109

## Application Content Checklist

- Cover Letter (optional but recommended)
- WTFP Grant Application – Completed and Authorized PDF Form
- Consortium Partner Supplemental Form – Completed and Authorized PDF Form (Consortium Applications Only)
- Training Module Description and Budget – Excel Worksheet
- Return on Investment Statement – No form is provided. Word, Excel or PDF files are acceptable.
- 2 Most Recent Financial Statements (preferably audited) – Hard Copies
- Certificate of Good Standing from MA Department of Revenue (less than 6 months old) – PDF File or Hard Copy

## Special Instructions for Consortium Applications

**Supplemental Information:** With the exception of the lead organization, all consortium application partners (e.g. organizations receiving grant-funded training) must complete the “Consortium Partner Supplemental Form” provided. The information requested mirrors that provided by the lead applicant in Section *I. Background Information* in the application.

**Certificates of Good Standing:** Each consortium partner must provide a Certificate of Good Standing (C.O.G.S.) from the Massachusetts Department of Revenue. C.O.G.S. must be less than six months old. No consortium applications will be considered if all partners have not provided a C.O.G.S.

**Financial Statements:** Each consortium partner receiving at least 30% of grant funds must provide copies of the company’s financial statements for the two most recent years. Audited financial statements are preferred. Financial document will be returned to the contact person listed for each partner organization.

## Contact Information

If you have any questions, please contact the Workforce Training Fund Program at (800) 252-1591 or [wtfp@commcorp.org](mailto:wtfp@commcorp.org).