

## Workforce Preparedness Grant APPLICATION

<u>Eligibility:</u> A Workplace Preparedness Grant of up to \$1,000 per individual is offered for the purpose of acquiring the tools and supplies needed to perform work duties not provided by their employer. This may include items such as steel-toed shoes, industrial maintenance tools, welding helmets, gloves, and other supplies routinely used within the occupation supported by the individual's certification or degree. *Application deadline: February 16, 2024* 

For a complete list of criteria and eligibility, visit <a href="https://onenobleco.com/workforce-readiness">https://onenobleco.com/workforce-readiness</a>

Eligible individuals will be individuals who work or live in Noble County, Indiana in the occupation for which they:

- Are actively seeking a workforce certification, OR
- Have completed a workforce certification program after February 1, 2023, OR
- Have earned a college degree after February 1, 2023

PLEASE NOTE: Application does not guarantee funding. Funds will be awarded based on need and completeness of application as determined by a grant review committee. If awarded funding, receipts (as proof of eligible purchases) must be submitted to Be Noble, Inc. within fifteen (15) days of award notification. Failure to provide receipts may result in forfeiture and requested return of funds.

## 2. Contact Information

| Contact Name *<br>First                      | Last                             |               |       |      |
|--|----------------------------------|---------------|-------|------|
| Primary Address *                            |                                  |               |       |      |
| Address Line 2                               |                                  | City          |       |      |
| Primary Phone # *                            | Other Phone #                    |               |       |      |
| Email  |                                  |               |       |      |
|  |                                  |               |       |      |
| 2. Employment                                |                                  |               |       |      |
| Current / Prospective Employer *             |                                  |               |       |      |
| Address                                      |                                  | City          |       |      |
| Phone #                                      | HR Contact                       |               |       |      |
|  |                                  |               |       |      |
| Is your current / prospective employment sup | oported by your certification an | nd/or degree? | ☐ Yes | □ No |

| Are you actively seeking a wor                                 | kforce certification, as | ssociate degree, or bachelor's degree?                                | ☐ Yes               | $\square$ No |
|--|--------------------------|---|---------------------|--------------|
| If yes, in what field?   |                          | If yes, from where?   |                     |              |
| Have you earned a workforce of                                 | certification, associate | e degree, or bachelor's degree since Febro                            | uary 1, 2023?       |              |
|  | ☐ Yes                    | □ No  |                     |              |
| If yes, in what field?   |                          | If yes, from where?   |                     |              |
| **Please enclose supporting of application. This can include a |                          | ur workforce certification enrollment, cenn instructor/institution.** | tificate, or degree | e with       |
| 3. Assessing Needs   |                          |   |                     |              |
| For which of the following nee                                 | ds are you requesting    | funding? Select all that apply.                                       |                     |              |
| ☐ Steel-toed shoes   | $\square$ Tools          |   |                     |              |
| $\square$ Welding equipment                                    | $\square$ Other $\_$     |   |                     |              |
| How much funding are you rec                                   | uesting?*                |   |                     |              |
| 4. Efforts   |                          |   |                     |              |
| Why do you need assistance?                                    |                          |   |                     |              |
|  |                          |   |                     |              |
| How will this funding help add                                 | ress the need you hav    | ve described above?   |                     |              |
| How will this grant funding hel                                | p you gain or retain e   | mployment and excel in your occupation                                | ?                   |              |
|  |                          |   |                     |              |
| Applicant's Signature:   |                          |   |                     |              |
|  |                          | <del></del>   |                     |              |
| Date:  |                          |   |                     |              |