Canada-Newfoundland and Labrador Job Grant

Applying in LaMPSS

Immigration, Population Growth and Skills Government of Newfoundland and Labrador

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1. Labour Market Programs Support System (LaMPSS)

The C- NL Job Grant Program is administered by the Department of Immigration, Population Growth and Skills using the Labour Market Programs Support System (LaMPSS) application. LaMPSS is a common method for administering Labour Market Programs in Newfoundland and Labrador, focused on providing consistency in processes and improving services to labour market program agreement holders.

All organizations entering into an agreement for delivering Labour Market Programs in Newfoundland and Labrador must first be registered as a LaMPSS organization. This is a one-time registration process. If your organization has not previously registered with LaMPSS, you can obtain a LaMPSS Registration Form at http://www.aesl.gov.nl.ca/lampss_public/index.html.

The functionality of LaMPSS provides organizations with self-serve capability, enabling you to apply for funding online for some labour market programs, as well as submitting required financial and activity reports online. Once available, we will provide you with user access enabling the ability to utilize the LaMPSS self-service capabilities.

Please read this entire document, including the program eligibility and requirements document. The information contained in this Guide will become part of the contract/agreement with the Province of Newfoundland and Labrador for the delivery of Canada-NL Job Grant program.

2. Applying for Canada-NL Job Grant Funding

1.1 Applying Online

Once you are a registered LaMPSS user, and program availability is advertised, you can apply for funding online using the self-serve capability. To apply online go to: https://lampss-org.aes.gov.nl.ca/login/login.aspx?ReturnUrl=%2f

If you require technical support in accessing LaMPSS, including assistance with login or compatibility issues, please contact call 1-844-252-6777 or email ExtOrgHelp@gov.nl.ca.

If you have questions about different parts of the application that is not answered in this document, Department staff is available to support and facilitate the process with you; please contact us at 1-800-563-6600 for assistance.

Completing an Application Form

This section provides supporting information that you will need to complete the application form. The preferred method of application is online using LaMPSS; a paper application may be considered depending on the situation but may take longer to process as Department staff will have to enter the information manually in LaMPSS.

Applications **must be received at least thirty calendar days prior to the start of training** to ensure a timely review and assessment of the request for funding.

Organization Information

Enter the name and complete mailing address for your organization. If you are applying online, this information will be pre-populated.

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Project Details

Please provide the following:

| Project Title | Provide a title specific to this project. | |
|----------------------|--|--|
| | For example: "Your Organization Name and Training Title" | |
| Agreement Start Date | Provide the proposed start date of training. | |
| Agreement End Date | Provide the proposed end date of training. | |

Past Agreements

This is to be completed if you have received funding under any AESL programs. If have received funding, check YES and list your most recent contract number(s) or past agreement types (i.e., Job Creation Partnerships (JCP), Community Partnerships, JobsNL) If are unsure of dates or agreements then **do not check yes**.

Project Description

Please provide a brief outline of the training/project (maximum 300 words).

- Training course information, including detailed description of the training.
- Copy of the quote from the training provider on the cost of the training.
- Training schedule.
- Location of the training.
- Trainer contact information, including name(s) and telephone number(s).
- Itemized budget breakdown.
- Letters from partners confirming financial or in-kind contribution, i.e., other organization or government entity.
- Your organization's mandate whether an Industry Association, Employer, Consortia, union or other.

All items noted above **must** be provided as part of your application and **is required** for your application to be assessed.

See the **Supporting Documentation Checklist** below for further help related to required documentation for submission.

Agreement Contact

Provide the appropriate primary contact for your organization including their title and contact information. This contact should be an individual empowered to negotiate this agreement on behalf of your organization (If you are a registered LaMPSS user this information will be pre-populated on the application, including civic address).

Language Preference

English or French.

Participants

Enter the total number of Project Participants (training recipients) expected to be served under this project.

Project Location

Please provide the address information for the location(s) where the project activities will be delivered (up to three can be entered). If you have not yet secured a location, or if the training is expected to

occur outside the province, please enter your main organization address and advise the Department at a later date of the project address.

Project/Training Activities

The table below outlines the required information for each eligible activity for the **Canada-NL Job Grant** program. These are the set of eligible activities. On your Application Form provide the required information for the training activities that you plan to deliver as part of your project.

You have the option of selecting the following four Activity Types from the drop down box:

- 1. Skills Enhancement Short Term Training;
- 2. Skills Enhancement Job Specific;
- 3. Skills Enhancement Skilled Trades; and
- 4. Skills Enhancement Work Place Training.

As an example, if your business requires new staff trained to operate a piece of equipment, this is considered as one eligible **activity type** – SKILLS ENHANCEMENT SHORT TERM TRAINING.

Your business may also need to train existing staff to use specialized software for inventory control. This is considered a separate eligible activity under the **activity type** – SKILLS ENHANCEMENT JOB SPECIFIC.

| TITLE | | | | |
|-----------------------------------|--|--|--|--|
| Brief Description | Describe the training and how it will be delivered, i.e., online, in class, etc. | | | |
| Expected Results | Please describe in detail the expected results which may | | | |
| | include: | | | |
| | Providing new types of training to trainees. | | | |
| | Upgrading skills of training recipients to improve | | | |
| | workforce productivity and operational efficiency. | | | |
| | - Providing employees, identified as the training | | | |
| | recipients, with transferable skills. | | | |
| | - Supporting the introduction of new technology, | | | |
| | machinery, equipment or new processes. | | | |
| Where does this activity/training | Identify the location for the activity/training. | | | |
| take place | | | | |
| Expected number of Project | Provide the expected total number of training recipients that | | | |
| Participants/Trainees | will participate in the activity and training. | | | |
| Expected number of Participants | Please provide the expected total number of existing | | | |
| (Training Recipients) who will | employees to be trained and the number of unemployed | | | |
| achieve/maintain employment | persons to be trained, and who will achieve and maintain | | | |
| | employment as a result of the activity/ training. | | | |
| Activity Budget and Costs | Please provide the expected costs for this activity/training. | | | |

If more than one training activity has been identified, repeat the above table for *each eligible* training activity.

Project/Training Budget

The Department requires the budget details on the Itemized Budget Worksheet as listed below. If additional details need to be provided, submit electronically or as an attachment with your proposal in

LaMPSS. No final payment will be made until all invoices related to the budget categories are submitted.

In order to help determine both the government and employer contribution to a Canada-NL Job Grant program, a Contribution Tool has been developed and is accessible to employers to help calculate contribution amounts for **each training participant** as part of the application process for the program. This Contribution Tool is available on the Canada-NL Job Grant program website: http://www.aes.gov.nl.ca/foremployers/canada_nl_job_grant.html.

The following table outlines all of the eligible cost categories and items for the **Canada-NL Job Grant** program along with a brief description. On your Application Form, enter the total project costs and the amount of funding requested for each budget category. HST may be calculated and included in each category. Examples of project budgets are provided below.

Eligible Costs Category Table

| Eligible Costs Category Table | | | | |
|---|--|--|--|--|
| Budget Category | Eligible Costs | | | |
| Participant Program Delivery | | | | |
| Participant | | | | |
| Tuition Fees or Fees Charged by Training Provider | Allowable | | | |
| Program Materials and Supplies | Allowable | | | |
| Program Examination Fees | Allowable (include under tuition) | | | |
| Course Equipment | Please detail equipment needed as it relates to training plan | | | |
| Course Required Medical | Allowable | | | |
| Registration | Allowable | | | |
| Student Fees | Allowable (include under tuition) | | | |
| Text Books | Allowable | | | |
| Course Clothing | Detail required clothing as related to specific training need | | | |
| Travel Costs | Allowable for training that occurs within NL; out of province travel costs may be considered if the training is highly specialized or technical, and is not available in this province or can be reasonably developed and offered by an existing institution in this province. Refer to Travel – Eligible Costs. | | | |
| Trainee Total | | | | |
| In-kind contribution details | Only to be completed by Small-Businesses and Small- Not- for-Profit Organizations | | | |
| Wage/Wage Replacement | | | | |
| Grand Total | | | | |

Canada-NL Job Grant Contribution Tool

The Canada-NL Job Grant program Contribution Tool is designed to help employers calculate the employer and government contribution amounts and must be completed for each training participant. The Contribution Tool is accessible is available on the Department's website:

http://www.aes.gov.nl.ca/foremployers/canada_nl_job_grant.html

The <u>Contribution Tool</u> is to be used when calculating the costs for each individual being trained. If a proposed grant includes more than one employee, the <u>Contribution Tool</u> must be used to calculate the cost for each employee.

Legal Signing Officers

Provide the appropriate signing officers for this project; these signing officers must have legal signing authority for your organization.

Supporting Documentation

The table below outlines documents that must be included with your project application. Please attach these documents to your application under the title **SUPPORTING DOCUMENTATION** in the document type **DETAILED PROJECT DESCRIPTION** located at the end of the application. These documents are required as part of the department's review and assessment of your proposal; assessment of your application will be delayed without the required documents. These documents should be attached to your application in LaMPSS.

| Document | Content |
|---------------------|--|
| Detailed Project | Employer must attach a detailed project description that includes an outline |
| Description | and description of the training; timeframe(s); training provider(s), contact |
| | information for the training provider(s); other relevant information i.e., |
| | commentary on the benefit to the business, training participants, sector |
| | etc. as deemed appropriate by the applicant. Attach any relevant |
| C'a a di ana a f | documents related to the project to your application online in LaMPSS. |
| Signed Letter of | Employer must provide a signed letter of attestation. In the case of |
| Attestation | training an unemployed person hired at the time of training or within thirty |
| | days of the training date, the letter must state this employee will be hired as a result of the proposed training provided through the Canada-NL Job |
| | Grant program. In the case of training an existing employee, the letter |
| | must state the proposed training is of benefit to the current employee's |
| | development and continuation in employment with the |
| | business/organization. |
| Quote from the | Employers must submit a signed quote for the training from the training |
| Training Provider | provider that includes the dollar amount for each training recipient and |
| | contact information from the training provider, including name of a contact |
| | person, mailing address, email address and phone number. |
| Amount of In-kind | Employers must submit supporting calculations of what they are going to |
| wages to be paid to | pay the trainee during training. This is only required for Small Businesses |
| trainee | training existing employees as this information is required in determining |
| | both employer and government cash contributions. |
| Initial Employee/ | Initial Employee/Client Contact Form must be completed and signed for each |
| Client Contact Form | participant being trained. No Payment will be made to the employer |
| | without this information. |
| Client Consent to | <u>Client Consent Form</u> must be completed and signed for each participant |
| Release Information | being trained before funds can be disbursed to the employer. No Payment |
| | will be made to the employer without this information. |

Submitting Your Application

Once you have completed the application including the attachment of all required documentation, the application will be submitted to the Department using the LaMPSS Self-Serve system.

In this section of the application enter the information that was provided when your organization was registered in LaMPSS – your Organizations ID, Username and Password. Click the submit box. You will be connected with the LaMPSS System and your application will be submitted.

You can confirm the application has been submitted as an agreement number has been assigned to your application and the status will be listed as **Intake**.

If you have completed the application form on paper, mail your completed application form and the required attachments to a local Employment Centre.

3. Notification of Official Approval

Once the application has been assessed and approved, you will be notified in writing. An Agreement outlining the reporting requirements and payment schedule will be forwarded for signature. The employer shall sign one copy of the Agreement/Contract and return to the Department for final signature; when signed by the Department, a signed copy will be attached in LaMPSS for official record.

The employer must provide contact information for all the employees identified as training recipients and participating in the training within seven days of approval. Departmental staff will contact the training recipients to complete an Initial Employee/Client Contact Form and Client Consent Form. Participating training recipients must sign these forms to allow collection, use and disclosure of personal information; this is standard for all programs but also a requirement under the Canada – Newfoundland and Labrador Job Fund Agreement.

Both the <u>Initial Employee/Client Contact Form</u> and <u>Client Consent Form</u> must be completed for each trainee before training begins. Staff with the department will also follow-up with participating training recipients following completion of the training. The <u>Initial Employee/Client Contact Form</u> and <u>Client Consent Form</u> are available on the Canada-NL Job Grant program website: http://www.aes.gov.nl.ca/foremployers/canada nl job grant.html.

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