Applicant:

**Project Name:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Organization** | **Roles and Responsibilities** | **Cash/In-Kind Match Amount (Optional)** | **Fund Source\*** | **Partnership Agreement Letter\*\*** |
| **Intermediaries** |  |  |  |  |
|       |       |       |       | [ ] Yes |
|       |       |       |       | [ ] Yes |
| **Employers**  |  |  |  |  |
|       |       |       |       | [ ] Yes |
|       |       |       |       | [ ] Yes |
| **Education and Training Providers** |  |  |  |  |
|       |       |       |       | [ ] Yes |
|       |       |       |       | [ ] Yes |
| **Community-Based, Faith-Based, or Other Non-Profit Organizations** |  |  |  |  |
|        |        |       |       | [ ] Yes |
|        |        |       |       | [ ] Yes |
|  | **\*\*Total Cash/In-Kind Match** | **$ 0.00** |  |  |

\* Type of Funds: WIOA, General/State, other (please describe) as allowed by the Solicitation for Proposal (SFP).

\*\*Not required by SFP.