

Office of Economic and Workforce Development¹
Workforce Development Division



TRAINING PROVIDERS & LABOR MARKET RESEARCH

Name:	Date:	
Training requested:		
I have researched these three (3) schools to compare training curriculum, cost, etc.		
1. School Name:	Phone: ()	
Address:	City/Zip:	
Course Name:		
Cost of Training:	Length of Training:	
Days Per Week:	Hours Per Day:	
Contact Person:	Pell Grant: Yes No	
What companies/businesses have hired your graduates?		
Company:	Contact Person:	Phone No.:
Company:	Contact Person:	Phone No.:
Company:	Contact Person:	Phone No.:
2. School Name:	Phone: ()	
Address:	City/Zip:	
Course Name:		
Cost of Training:	Length of Training:	
Days Per Week:	Hours Per Day:	
Contact Person:	Pell Grant: Yes No	
What companies/businesses have hired your graduates?		
Company:	Contact Person:	Phone No.:
Company:	Contact Person:	Phone No.:
Company:	Contact Person:	Phone No.:

3. School Name:		Phone: ()
Address:		City/Zip:
Course Name:		
Cost of Training:		Length of Training:
Days Per Week:		Hours Per Day:
Contact Person:		Pell Grant: Yes No
What companies/businesses have hired your graduates?		
Company:	Contact Person:	Phone No.:
Company:	Contact Person:	Phone No.:
Company:	Contact Person:	Phone No.:

Labor Market Research

I have contacted these three (3) employers to survey the labor market to determine if this is a demand occupation as defined by the Workforce Investment Act (WIA) regulations.					
1. Employer:			Phone:		
Address:			City/Zip:		
Contact:			Wage:		
Are they hiring?	Yes	No	Benefits:	Yes	No
2. Employer:			Phone:		
Address:			City/Zip:		
Contact:			Wage:		
Are they hiring?	Yes	No	Benefits:	Yes	No
3. Employer:			Phone:		
Address:			City/Zip:		
Contact:			Wage:		
Are they hiring?	Yes	No	Benefits:	Yes	No