

## ATTACHMENT B

### Massachusetts EA Training On-the-Job (TOJ) Employer Self-Attestation Eligibility Checklist

#### Section 1: Employer Information

Employer's Legal Business Name:		
Alternative Business Name(s) (including DBAs):		
MOSES Employer ID:	FEIN <sup>1</sup> :	
DUA No. <sup>2</sup>		
Business Address:		
City:	State:	ZIP:
EA TOJ Site Address (If different than above):		
City:	State:	ZIP:
Employer EA TOJ Contact Person:	Title:	
Contact Telephone Number:	E-mail:	
Type of Business: <input type="checkbox"/> Private: <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		

#### Section 2: Employer Review

1) Has the employer had any layoffs in the last year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
1a) If YES, provide explanation:	
2) Has the employer filed any WARN <sup>3</sup> notices in the last year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2a) If YES, provide explanation:	
3) Has the employer already hired the prospective TOJ Trainee(s)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4a) If YES, provide explanation:	
4) Is the employer able to commit to providing long-term employment for successful TOJ Trainees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7a) If NO, provide explanation:	
5) Will EA TOJ funds be used to directly or indirectly assist, promote or deter union organizing?	Yes <input type="checkbox"/> No <input type="checkbox"/>

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<sup>1</sup> Federal Employer Identification Number (FEIN)

<sup>2</sup> Department of Unemployment Assistance (DUA)

6) Will the EA TOJ result in the full or partial displacement of employed workers? <sup>4</sup>	Yes <input type="checkbox"/> No <input type="checkbox"/>
7) Does the employer agree to provide EA TOJ trainee wages that are at least equal to: a) The Federal, state or local minimum wage (which ever is highest)? <sup>5</sup> b) Other employees in the same occupation with similar experience	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
8) Does the employer agree to provide the EA TOJ Trainee with the same workers' compensation, health insurance, unemployment insurance, retirement benefits, etc. as regular, non-TOJ employees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If NO, provide explanation:	
9) Does the employer agree to comply with federal and State non-discrimination and equal opportunity regulations?	Yes <input type="checkbox"/> No <input type="checkbox"/>

### Section 3: Meeting Commonwealth Criteria

10) Is the employer in good standing with the Department of Unemployment Assistance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
11) Is the business currently debarred from doing business with the Commonwealth or the federal government according to the following lists: a. <a href="#">Federal Government's Excluded Parties List System</a> b. <a href="#">Office of the Attorney General Debarment List</a>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>  Yes <input type="checkbox"/> No <input type="checkbox"/>
12) Has the employer been issued a Certificate of Good Standing from the Massachusetts Department of Revenue within 6 six months of the anticipated TOJ start date? (If YES, attach to this checklist)	Yes <input type="checkbox"/> No <input type="checkbox"/>
12a) If NO, provide explanation <sup>6</sup> :	

### Section 4: Signatures

***I hereby certify that the above information is, to the best of my knowledge, true and correct.***

Employer Signature:	Date:
Type/Print Name:	Title:

<sup>4</sup> Displacement occurs when: 1) the employer has terminated the employment of any regular employee with the intention of filling the vacancy with an OJT participant; 2) when the OJT position infringes on the promotional opportunities of currently employed workers; or 3) when an individual is on layoff from the same or any substantially equivalent job as the OJT position. Displacement may also include a reduction in the hours of non-overtime work, wages, or employment benefits of any currently employed employee.

<sup>5</sup> According to the Fair Labor Standards Act

<sup>6</sup> Note: A certificate of good standing from the Department of Revenue issued within 6 months of the OJT start date is required to execute an OJT Contract.

**Checklist Prepared By:**

Signature:	Date:
Type/Print Name:	Title:
MassHire Career Center:	