

Employer OJT Eligibility Determination		
WIA OJT Eligible	<input type="checkbox"/> Yes	<input type="checkbox"/> No
OJT/NEG Project Eligible	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Checklist Completion Date:		

Massachusetts On-the-Job Training (OJT) OJT Employer Eligibility Checklist

Section 1: Employer Information

Employer's Legal Business Name:		
Alternative Business Name(s) (including DBAs):		
MOSES Employer ID:	FEIN ¹ :	
DUA No. ²	DUNS No. ³ :	
Business Address:		
City:	State:	ZIP:
OJT Site Address (If different than above):		
City:	State:	ZIP:
Employer OJT Contact Person:	Title:	
Contact Telephone Number	E-mail:	Fax:
Type of Business*: <input type="checkbox"/> Public <input type="checkbox"/> Private: <input type="checkbox"/> Not-for-Profit <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
Short Description of Business:		
Employer NAICS Code ⁴ :	# of Employees on OJT Site:	Years in Existence:
Is the Business being sold or merging with another employer: Yes <input type="checkbox"/> No <input type="checkbox"/>		
If YES, Provide explanation:		

Section 2: Employer Review

1) Has the employer had any lay-offs in the last 3 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
1a) If YES, provide explanation:	
2) Has the employer filed any WARN ⁵ notices in the last 3 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2a) If YES, provide explanation:	
3) Has the employer failed to provide OJT Trainees with continued long-term employment in the past?	Yes <input type="checkbox"/> No <input type="checkbox"/>

¹ Federal Employer Identification Number (FEIN)

² Department of Unemployment Assistance (DUA)

³ Dun & Bradstreet (D&B) provides a "data universal number system" (DUNS) which is a unique nine-digit identification number for each business. The federal government requires organizations to provide a DUNS number as part of their grant applications and proposals. *It is not required for OJT in Massachusetts.*

⁴ North American Classification Systems (NAICS)

⁵ Worker Adjustment and Retraining Notification (WARN) [<http://www.doleta.gov/programs/factsht/warn.htm>]

3a) If YES, provide explanation:	
4) Has the employer already hired the prospective OJT Trainee(s)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4a) If YES, provide explanation:	

Section 3: Meeting Federal Criteria

5) Is the business any of the following?*	Yes <input type="checkbox"/> No <input type="checkbox"/>
a. A gambling establishment	Yes <input type="checkbox"/> No <input type="checkbox"/>
b. Swimming pool	Yes <input type="checkbox"/> No <input type="checkbox"/>
c. Aquarium	Yes <input type="checkbox"/> No <input type="checkbox"/>
d. Zoo	Yes <input type="checkbox"/> No <input type="checkbox"/>
e. Golf Course	Yes <input type="checkbox"/> No <input type="checkbox"/>
6) Is the employer looking to relocate operations in whole or in part?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6a) If YES, does the company intend to use WIA funds for relocation?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7) Has the employer relocated less than 120 days ago?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7a) If YES, were employees laid off at the previous location as a result of the re-location?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8) Is the employer able to commit to providing long-term employment for successful OJT Trainees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8a) If NO, provide explanation:	
9) Will OJT funds be used to directly or indirectly assist, promote or deter union organizing?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10) Will the OJT result in the full or partial displacement of employed workers? ⁶	Yes <input type="checkbox"/> No <input type="checkbox"/>
11) Does the employer agree to provide OJT Trainee wages that are at least equal to:	Yes <input type="checkbox"/> No <input type="checkbox"/>
a) The Federal, state or local minimum wage (which ever is highest)? ⁷	Yes <input type="checkbox"/> No <input type="checkbox"/>
b) Other employees in the same occupation with similar experience	Yes <input type="checkbox"/> No <input type="checkbox"/>
12) Does the employer agree to provide Trainees with the same workers' compensation, health insurance, unemployment insurance, retirement benefits, etc. as regular, non-OJT employees?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If NO, provide explanation:	
13) Does the employer agree to comply with the non-discrimination and equal opportunity provisions of the Workforce Investment Act of 1998 and its regulations?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Section 4: Meeting Commonwealth Criteria

14) Is the employer in good standing with the Department of Unemployment Assistance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
--	--

⁶ 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.

⁷ According to the Fair Labor Standards Act

15) Is the business currently debarred from doing business with the Commonwealth or the federal government according to the following lists: a. Federal Government's Excluded Parties List System b. Division of Capital Asset Management Debarred Contractor's List c. Businesses Issued Stop Work Orders by the Department of Industrial Accidents d. Office of the Attorney General Debarment List	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"/>
16) Has the employer been issued a Certificate of Good Standing from the Massachusetts Department of Revenue within 6 six months of the anticipated OJT start date? (If YES, attach to this checklist)	Yes <input type="checkbox"/> No <input type="checkbox"/>
16a) If NO, provide explanation ⁸ :	

Section 5: OJT Information

Potential OJT Positions:	
Additional Comments:	
Employer meets all requirements of WIA OJT Eligibility Employer meets all requirements of WIA OJT/NEG Project Eligibility <i>(Complete Employer OJT Eligibility Determination on front page)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>

Section 6: 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:

Checklist Prepared By:

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

⁸ 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.