



# WORKFORCE DEVELOPMENT TRAINING FUND

## Internship Grant Application

The purpose of this funding is to provide Wyoming based businesses the opportunity to offer structured learning experiences to individuals through internships that enhance an individual's work skills, knowledge and abilities. No governmental entity is eligible to apply except Wyoming county and memorial hospitals and emergency medical service providers.

An internship should provide:

- A practical learning experience or project, given by a designated supervisor
- An opportunity to observe, contribute, and rotate through the different parts of the department/organization
- Career connections, mentorship, and networking opportunities within the organization / industry
- Training, either "formal" or on-the-job along with constructive, on-going feedback for personal and professional development

### Application Information

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**The following information is provided to help ensure completeness of the application:**

- The applicant has read the information and rules about the Internship Grants program posted on the DWS website at <https://dws.wyo.gov/dws-division/business-training-support-unit/workforce-development-training-fund/>
- The applicant understands that no funds shall be disbursed prior to the execution of a contract with DWS. Payments shall be made for authorized expenditures on a cost reimbursement basis upon DWS's receipt and approval of invoices detailing actual expenditures made by the business.
- For the application to be considered, the Applicant (Business) shall be in Good Standing with the Secretary of State, if required, Wyoming Unemployment Insurance and Workers' Compensation, and the Workforce Development Training Fund. If considered to be exempt from Unemployment Insurance and/or Worker's Compensation's requirements, businesses are still required to register with each entity for the purpose of this grant application.

**Submit the application in the following order:**

- Part 1 – Application
- Part 2 – Application Narrative
  - Section 1 – Internship Program Summary
  - Section 2 – Structured Learning Experience
  - Section 3 – Partnerships
  - Section 4 – Cost Projections Narrative
- Part 3 – Cost Projections Worksheet

**\*\*This Internship Grant is not intended to be used for Registered Apprentice's wages\*\***



# WORKFORCE DEVELOPMENT TRAINING FUND

## Submission Instructions:

- Email signed application packet in a PDF format to [DWS-WDTF-Internship@wyo.gov](mailto:DWS-WDTF-Internship@wyo.gov).
- Application must be submitted as one document in its entirety.

## Formatting Instructions:

- The text of the Application and Narrative shall be 12-point font, double-spaced, and on one side of standard 8.5 x 11-inch pages.
- Margins must be 1 inch on all sides.
- The application narrative must use the section headings provided.
- Number all narrative pages in the **upper right-hand corner**.
- Do not add a footer.
- Include supporting documentation and properly label as appendix items.
- Part 2 (Application Narrative) may be up to five pages in length. Part 1 (Application), Part 3 (Cost Projections Worksheet), and any supporting documentation are not counted toward the page limit.

## General Instructions:

- Application Review and Contract Process can take, at a minimum, 30-45 days to be completed. Please allow time for that process before your planned internship starts. No funds shall be disbursed to any entity prior to the execution of the contract.
- Grant funds shall be paid directly to the Contractor (the business) on a cost reimbursement basis once DWS reviews and approves submitted invoices.
- DWS may reimburse up to \$25 per hour when the requested wage is supported by labor market information for the industry. Documentation supporting your requested hourly wage shall be included as appendix items. If needed, below are suggested websites to support your requested wages:
  - O\*Net - <https://www.onetcodeconnector.org/>
  - Wyoming at Work - <https://www.wyomingatwork.com>
  - Indeed – <https://www.indeed.com/>
- Interns that qualify for Workforce Investment and Opportunities Act (WIOA) services (Public Law §113-128; 128 Stat. 1425) and/or qualify for vocational rehabilitation services (Rehabilitation Act of 1973 as amended by Title IV and VI of the WIOA, Public Law §93-112; Title 34, C.F.R. 361.48) are not eligible for the WDTF Internship Grant.
- Preference will be given to Applicants who are in a preferred industry. For reference, please visit <https://dws.wyo.gov/dws-division/business-training-support-unit/workforce-development-training-fund/>
- Internship grants will be limited per state fiscal year up to 6 internships, based on demonstrated business need, ability to offer quality learning experience for each intern, and meeting the satisfaction of DWS review panel.
- Businesses in a Wyoming-based Registered Apprenticeship Program may be eligible for up to ten (10) internships, based on demonstrated business need, ability to offer quality learning experience for each intern prior to becoming a registered apprentice, and meeting the satisfaction of DWS review panel. The hours and learning experience obtained by the intern(s) can then be applied towards apprenticeship requirements if they become a registered apprentice, after the internship is completed.
- If the application fails to meet any of the above requirements, DWS may partially or fully deny.

*-Notice of disclosure-*

*Please be advised that any personal and business information provided in this application will not be shared outside of the Department of Workforce Services. Information may be shared internally for the benefit of other DWS programs.*



# WORKFORCE DEVELOPMENT

## TRAINING FUND

### PART 1 – Application (Complete sections, save, and submit with supporting documentation)

<b>For Office Use Only</b>	
Application #:	Date Received:

### Internship Grant Information

Internship Role/Occupation:	
Business Industry:	
Number of Internship(s) Requested:	
Number of Intern(s) Requested:	
Start and End Date of Internship(s):	
Total Amount Requested: <i>(based on Cost Projections Worksheet and to include admin cost, if requested)</i>	
If applicable, please list any previous WDTF Internship Grants that have been awarded by Grant ID number and number of internships:	

### Applicant Information (Business)

Legal Business Name:				
DBA (if applicable)				
Physical Address:				
	City:	State:	County:	Zip:
Remittance Address:				
	City:	State:	Zip:	
Date Business Established:		FEIN:		
WY UI No.:		WY Secretary of State Filing ID:		
WY WC No:				
Primary Contact:		Job Title:		
Email Address:		Phone Number:		
Signatory:		Job Title:		
Email Address:		Phone Number:		



# WORKFORCE DEVELOPMENT TRAINING FUND

## Required Components of Internship

Please initial each item, indicating your understanding that these documents, at a minimum, will be completed and submitted to DWS as required.

<b>Intern Attestation Form</b>	Initials
Any intern being considered to participate in this internship will complete an Intern Attestation Form that will be provided once the contract has been executed	
<b>Partnership with Educational Institution</b>	
Initial if you are partnering with an educational institution	Initials
<b>Final Report Documents</b>	
Final report documents will be submitted within 45 days of completing internship	Initials
Initial meeting with intern(s) to document goals, expectations and roles	
Mid-term evaluation	
Final exit interview by both the intern and the business	
Final report summary to include results internship and how it helped the intern	
<b>Reimbursement Documents</b>	
Indicate preference for submitting invoices: Monthly                      Quarterly                      End of Internship	Initials
Grant Reimbursement Form ( <i>provided by DWS</i> )	
Pay stubs that support the hours recorded in the Grant Reimbursement Form	
The final invoice will be submitted with the final report and its reimbursement will take place after review and approval of the final report	

## Signature

1. Applicant Representative. The person signing this application (Signatory) as the Applicant Representative certifies that they agree to the contents of the application, is authorized to represent the Applicant and is legally responsible for the information provided in this application.

First and Last Name:	
Title:	
Business Name:	
Applicant agrees that if awarded this grant, their business name and awarded amount may be published by Department of Workforce Services.	Initials:
Signature:	Date:



# WORKFORCE DEVELOPMENT TRAINING FUND

## **PART 2 – Application Narrative** *(limit to five-pages)*

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### **Section 1**     *Internship Program Summary*

Briefly summarize your internship program and describe how the structured learning experience will enhance an individual’s work skills, knowledge and abilities. The summary should include:

- An overview of the goals for the internship program
- A brief description of the selection process
- A description of the training, supervision, documentation and evaluation process
- Expected outcomes and the proposed economic impact on the community

### **Section 2**     *Structured Learning Experience*

- The applicant shall detail the meaningful work assignments planned for the intern(s) and what their role(s) will be within the organization. If the requested hourly wage is higher than Wyoming’s industry average, please provide justification to support your request in this section.
- Training plan detailing specific skills, tasks, and competencies to be attained during the internship. This plan outlines the tasks, duties, and responsibilities that the student is expected to learn
- Please provide justification for the number of internships being requested and how each of the interns will be mentored and supported for a quality work experience.
- Identify each of the staff members that will be assigned to mentor, provide constructive feedback, and complete the documentation for each intern’s performance, as identified below:
  - Initial meeting documenting expectations and role of the intern(s);
  - Mid-term meeting documenting progress, questions and feedback;
  - Completed exit interview questionnaires from both the business and the intern(s);
  - Final Report Summary of how the internship supported the business, improved efficiency, profitability or compliance of the business(es) or industry;
  - How the structured learning experience increased the skill level of the intern.

### **Section 3**     *Partnerships*

- Indicate any partnerships with an educational institution that is related to this internship
- Detail information about any partnerships that will financially support the structured learning experience or contribute to the business’ internship program.
- Briefly describe if any other funding has been secured in connection with this internship and how the additional funds will be applied to the internship’s expenses.

### **Section 4**     *Cost Projections Narrative*

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The applicant shall include a narrative that addresses the anticipated costs listed in Part 3 (Cost Projections Worksheet). This narrative shall outline and define the intern(s) work schedule to include the anticipated work hours. While completing the application and planning the work schedule of your internship, please consider the following:



## WORKFORCE DEVELOPMENT TRAINING FUND

- Once contract has been fully executed, grant funds shall be paid to the applicant either on a monthly or quarterly basis, or at the end of the internship.
- WDTF will not reimburse for wages incurred prior to a contract being executed
- Application review and contract process can take, at a minimum, 30-45 days to be completed.
- WDTF understands that you may need to start your intern by a certain time frame; please reference in the narrative if your intern has already started, will be starting soon or will not be starting until execution of contract.
- Requested wage is not guaranteed. The wage being requested will require support from industry wage information that correlates to the occupation of the intern, job responsibilities and duties, and/or experience level. The business is welcome to pay the intern more, based on business needs, but WDTF will be able to reimburse what is deemed reasonable based on the supporting documentation provided and narrative explanation.

Please include the following information in your narrative, which should also align with the cost projections worksheet (*this information can be an estimation*):

- Each internship allows up to 1040 hours and will only reimburse up to 40 hours per week.
- Determine how many hours per week your intern will be working
- Determine how many weeks the intern will be working, up to 1040 hours
- Based on this information, determine your start and end dates
- Confirm the number of interns requested in your narrative to also align with the cost projection worksheet
- DWS may reimburse up to \$25 per hour when the requested wage is supported by labor market information for the industry. Documentation supporting your requested hourly wage shall be included as appendix items. If needed, below are suggested websites to support your requested wages:
  - O\*Net - <https://www.onetcodeconnector.org/>
  - Wyoming at Work - <https://www.wyomingatwork.com>
  - Indeed – <https://www.indeed.com/>
- If the Applicant is requesting a higher hourly wage than what shows on the supporting document, please provide justification for this request. Wage determination is dependent on state industry average
- If the Applicant chooses to pay more per hour, please indicate as such in the narrative, not on the worksheet
- The anticipated wage per hour for each intern, not to include insurance coverage, bonuses, overtime wages, supplies and/or equipment, or travel expenses.
- The applicant may calculate up to 5% of the total reimbursable wages as an administrative cost for hosting the internship;
- The total grant amount being requested must match the Internship Grant Information section and the Cost Projections Worksheet of the application.



# WORKFORCE DEVELOPMENT

## TRAINING FUND

### PART 3 – Cost Projections Worksheet

- An Internship opportunity is eligible for up to 1040 hours per fiscal year and **up to \$25/hr** (with supporting documentation as referenced in Section 4)
- Each internship should be separated into its own row below

	Role/Occupation	Start Date	End Date	Total # of weeks	# of interns	Hourly wage	Total # of hours (no more than 1040)	Total Reimbursable Wages
Internship 1								
Internship 2								
Internship 3								
Internship 4								
Internship 5								
Internship 6								
<i>Sub-Total (all requested internship wages)</i>								
<i>Administrative Cost of Internship (not to exceed 5% of Sub-Total)</i>								
<i>Total Amount Requested (must match cost projections narrative)</i>								