

TRAINING AGREEMENT
Local Area I Workforce Investment Board

SECTION I: General Information

Contract Number: _____ Program Title: _____ Program Activity: _____
Agreement Period: _____ to _____
Participant: _____ SSN: _____

SECTION II: Training Description

Participant Training Need(s): _____
Costs: _____
Total Amount Not to Exceed: _____

SECTION III: Training Agent and Grantor Information

Training Agent: _____ Grantor: _____
Address: _____ Address: _____
City/State/Zip: _____ City/State/Zip: _____
Phone: _____ Phone: _____

SECTION IV: Agreement Signature

The Training Agent agrees to provide the Participant listed in Section I with the skills and competencies necessary to meet the need specified in Section II. The Parties hereby agree to operate this program in accordance with the Provisions outlined in Section V and the Contractual Provisions Attachment, along with any additional Attachments listed below.

Additional Attachments: None List: _____

Authorized for the Training Agent:

Authorized for the Grantor:

Signature	Date	Signature	Date
Print Name/Title		Print Name/Title	

AAO Entry Section 2B and WIA Activity Intials: _____
 Date of Training Service Establishment of ITA Type of Training Pell Grant