

# Sample Eligibility Checklist

On-the-job training document courtesy of the Atlantic County Office of Workforce Development

Circle Yes or No

- |  |     |    |
|--|-----|----|
| Has the employer experienced layoffs in the last six months?   | Yes | No |
| If yes, is the training agreement written for the same/similar positions?  | Yes | No |
| Does the employer have the necessary staff, equipment, and facilities to provide training and employment?  | Yes | No |
| Is any occupation subject to a bargaining agreement?   | Yes | No |
| Is Workman's Compensation or comparable accident insurance, UI and all other benefits required by law provided by the employer?                              | Yes | No |
| Are all employer taxes, both state and federal, current?   | Yes | No |
| Are time and attendance records accurately and properly maintained?  | Yes | No |
| Does a legitimate need for training and a reasonable expectation for employment exist for the participant completing the training described in the contract? | Yes | No |

**Note: No OJT contracts may be funded with employers who under previous OJT contracts exhibited a pattern of failing to provide OJT participants continual, long-term employment as regular employees with wages and benefits and working conditions at the same level and to the same extent as other employees working a similar length of time and doing the same work.**

Agreed by: \_\_\_\_\_  
Employer Representative Signature Date

Prepared by: \_\_\_\_\_  
Atlantic County Office of Workforce Development Representative Signature Date

