**Energy Efficiency Training Grant**

**Program Application**

Logo

Description automatically generated

## **Applicant Information**

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| **Applicant Organization Name** | Click or tap here to enter text. |
| **Applicant Organization Street Address** | Click or tap here to enter text. |
| **Applicant Organization Street Address** | Click or tap here to enter text. |
| **Applicant Organization City** | Click or tap here to enter text. |
| **Applicant Organization State** | Click or tap here to enter text. |
| **Applicant Organization Zip** | Click or tap here to enter text. |
| **Taxpayer ID (Employer ID Number – EIN)** | Click or tap here to enter text. |
| **Applicant Contact Name (Project Manager):** | Click or tap here to enter text. |
| **Applicant Contact phone1** | Click or tap here to enter text. |
| **Applicant Contact Phone2** | Click or tap here to enter text. |
| **Applicant Contact Email** | Click or tap here to enter text. |
| **Applicant Authorized Representative Name (Person with authority to sign the Performance Agreement)** | Click or tap here to enter text. |
| **Applicant Authorized Representative phone1** | Click or tap here to enter text. |
| **Applicant Authorized Representative phone2** | Click or tap here to enter text. |
| **Applicant Authorized Representative email** | Click or tap here to enter text. |

## **Partner Organization (enter N/A if no partner organization)**

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| **Partner Organization Name** | Click or tap here to enter text. |
| **Partner Organization Street Address** | Click or tap here to enter text. |
| **Partner Organization Street Address** | Click or tap here to enter text. |
| **Partner Organization City** | Click or tap here to enter text. |
| **Partner Organization State** | Click or tap here to enter text. |
| **Partner Organization Zip** | Click or tap here to enter text. |
| **Unique Entity Identifier (UEI from SAM.gov registered account)** | Click or tap here to enter text. |
| **Taxpayer ID (Employer ID Number – EIN)** | Click or tap here to enter text. |
| **Partner Contact Name (Project Manager):** | Click or tap here to enter text. |
| **Partner Contact phone1** | Click or tap here to enter text. |
| **Partner Contact Phone2** | Click or tap here to enter text. |
| **Partner Contact Email** | Click or tap here to enter text. |
| **Partner Authorized Representative Name (Person with authority to sign the Performance Agreement)** | Click or tap here to enter text. |
| **Partner Authorized Representative phone1** | Click or tap here to enter text. |
| **Partner Authorized Representative phone2** | Click or tap here to enter text. |
| **Partner Authorized Representative email** | Click or tap here to enter text. |

The applicant or partner organization is a locally and culturally connected entity.

## **Requested Budget**

**Enter the requested budget amount.** This amount should be the same as the total program budget listed on the Budget Template. Click or tap here to enter text.

## **Requested Period of Performance**

**What is the requested grant duration?** Please list the time needed to complete a successful program, not to exceed 2 years. Click or tap here to enter text.

## **Program Focus**

**Identify the focus area the program intends to address (options are listed below).** Choose an item.

1. HVAC training: HVAC training programs should include plans for connecting new trainees who graduate from training programs with prospective employers. Programs can include training for new workers, programs to upskill incumbent workers, and pre-apprentice/apprenticeship programs. Training should include information on heat pump technology installation and available incentives. This focus area is specific to HVAC technicians.
2. Home energy auditing and modeling: Auditing training programs must include home energy modeling to meet the BPI 2400 specifications. Training should include information on available incentives.
3. Contractor business development: Business development training programs for contractors providing energy efficiency installations should include business competency and information on available incentives. Programs may include business training for contractors’ employees.
4. Home energy efficiency upgrades: Home energy efficiency upgrade training programs should provide training to contractors and technicians on weatherization, heat pump installation, heat pump water heater installation, electrical panel upgrades, or any other home upgrade to achieve maximum energy savings from energy efficiencies. Programs should include information on available incentives.

## **Program Goal**

**Explain how the proposed training program will achieve the requirements of the program focus area that you have chosen.**

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| What is the current need in the focus area? (Where do you see gaps, demand for training, or training deficit?) Please provide examples or data to support this need. |
| Click or tap here to enter text. |
| How will this program address the need that you have identified? What will the training provide that will reduce the need or bridge the gaps in existing programs? |
| Click or tap here to enter text. |
| What are the specific outcomes the program hopes to achieve? (Real goals that can be measured.) What will be used to measure program success? (This could be anything that can be measured like number of participants or program training materials developed.) The program work plan may help in completing this section. |
| Click or tap here to enter text. |

## **Program History**

**Summarize the history of the program.**

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| This is an existing program. |
| What does your current program look like? What is your current post training hiring rate, if applicable? How will this funding be used to make the program better? If you intend to use this funding with additional funding, please explain what other funding sources support this program and why additional funding is needed. |
| Click or tap here to enter text. |
| This is a new program. |
| How do you intend to build this new program? What resources do you need to build the program? Are these resources available to you? Will you be using other funding sources to support this program either during the funding period or after? If so, please explain. |
| Click or tap here to enter text. |

## **Training Specifics**

**Explain the specific training logistics.**

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| What type of training will be provided (in-person, online, or other)? |
| Click or tap here to enter text. |
| Who will be responsible for providing the training (applicant staff, partner organization, or contractor)? |
| Click or tap here to enter text. |
| Where will the trainings be located, if in-person? |
| Click or tap here to enter text. |
| Who is the target audience for the training and what steps will be taken to reach the target audience? |
| Click or tap here to enter text. |
| What will the program look like? What can a participant expect to experience in the program and what will they learn? Please explain the structure or outline of the program. Include specific information on what certifications or trainings they will receive. You may use the program work plan to complete this section. |
| Click or tap here to enter text. |

## **Participant Development**

**Explain how the program will provide benefits to the program participants.**

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| How will the program connect participants to prospective employers or pre-apprenticeship/apprenticeship programs, where appropriate? How will the program provide upskilling to existing workforce, if applicable? How will the program provide business development, if applicable? What can a participant expect to achieve by completing the program? |
| Click or tap here to enter text. |

## **Participant Support**

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| Explain how this program will support participants from disadvantaged communities. Will this program provide wraparound services for participants? (This can include travel stipends, participant stipends, equipment, employer incentives, certification fees, technical assistance, software, or other.) |
| Click or tap here to enter text. |
| What services will be provided? |
| Click or tap here to enter text. |
| Who will be responsible for delivering these supporting services? (Will it be the applicant, partner organization, or other organization. Please be specific for each service provided.) |
| Click or tap here to enter text. |

## **Program Sustainability**

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| Describe how this program will benefit workers after the program is complete. Will the program continue to train workers/contractors after this grant funding has been exhausted? What funding will be used to continue the program? What deliverables will be developed that can be used after the program is complete? (This can include training materials, equipment, or other.) How will those deliverables be used or made available? |
| Click or tap here to enter text. |

## **Community Benefits**

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| Explain how the proposed program aligns with ODOE’s goal to prioritize disadvantaged or environmental justice communities. What communities does this program intend to benefit? Please list either community group or geographic area. (This can include either through participants from or by increasing services to these communities.) |
| Click or tap here to enter text. |
| What benefits does the program provide to these communities? |
| Click or tap here to enter text. |
| At least 51 percent of the community(s) receiving benefit is listed on the federal [Climate Economic Justice Screening Tool (CEJST)](https://screeningtool.geoplatform.gov/en/" \l "3/33.47/-97.5). |
| At least 51 percent of the community(s) receiving benefit is an [environmental justice community](https://oregon.public.law/statutes/ors_469a.400). |

## **Applicant Experience**

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| Provide a description of the applicant or partner organization’s experience with community program development within environmental justice communities. What experience or skills does the program team have that is beneficial to working within the community? (This could include outreach that is culturally specific or in languages other than English, providing services that meet the unique needs of community members, or a personal connection to the community.) What types of programs have the applicant or partner organization worked on? Were members of the program team responsible for developing the program? What were the outcomes of the program? |
| Click or tap here to enter text. |
| Explain what experience the applicant or partner organization has with state grant programs or programs with similar reporting requirements. Has the applicant or partner organization had experience with programs that require budgeting reports? Has the listed organization been required to survey participants and deliver survey responses? Does the organization have experience making program improvements based on program feedback? Please provide examples of the reporting requirements and how those were met. |
| Click or tap here to enter text. |
| Describe the experience the applicant, partner organization, or contractor has in providing training like the proposed program. |
| Click or tap here to enter text. |
| This grant will require applicants to survey participants for demographic information, program effectiveness, and post program benefits. |
| The applicant or partner organization will provide survey information to the Department, as specified in the Performance Agreement. |

## **Additional Documents**

Complete the documents listed below and send with this application to the Oregon Department of Energy by email [eetraining@energy.oregon.gov](mailto:eetraining@energy.oregon.gov) by the due date listed on the opportunity announcement.

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|  | Program Application |
|  | Program Budget Template |
|  | Program Work Plan |
|  | Memorandum of Understanding or Letter of Partnership (If the applicant will have a partner organization.) |
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