

Georgia Department of Labor

Pre-Award Analysis

Section 1: Employer Information

Complete the following Employer Information		
EMPLOYER NAME:		FEIN #:
		GA UI TAX #:
EMPLOYER CONTRACT SIGNATORY NAME:		EMPLOYER CONTRACT SIGNATORY TITLE:
TRAINING SITE ADDRESS:		OTHER NAMES UNDER WHICH EMPLOYER DOES BUSINESS:
PHONE:	FAX:	EMAIL:
TYPE OF ORGANIZATION: PRIVATE FOR PROFIT <input type="checkbox"/> PRIVATE NON-PROFIT <input type="checkbox"/> PUBLIC <input type="checkbox"/>		
COMPANY NAICS CODE:	# OF CURRENT EMPLOYEES IN THIS LOCATION:	YEARS IN EXISTENCE AT THIS LOCATION:

Section 2: Criteria for OJT Employers

YES	NO	Employer Requirements
<input type="checkbox"/>	<input type="checkbox"/>	1) Does the employer state that there are no currently laid-off workers in any substantially similar positions as those in which training will occur? If there have been layoffs in a substantially similar position, did the layoffs occur more than 6 months in the past?
<input type="checkbox"/>	<input type="checkbox"/>	2) Does the employer ensure that workers with a substantially similar position as that in which training will occur have not had or will not have their hours reduced as a result of this OJT?
<input type="checkbox"/>	<input type="checkbox"/>	3) Does the employer ensure that workers with a substantially similar position as that in which training will occur have not had or will not be terminated as a result of this OJT?
<input type="checkbox"/>	<input type="checkbox"/>	4) Does the employer agree that the proposed OJT will not infringe on the promotional opportunities of current workers?
<input type="checkbox"/>	<input type="checkbox"/>	5) Does the employer state that positions being hired for under this agreement are not temporary or short-term? Does the employer also state that the employer's intentions are to provide long-term employment for workers who meet the employer's standards of successful completion of training? (Short -term employment is defined as less than 26 weeks after completion of training.)
N/A	N/A	6) After a review of data, it appears that trainees' long-term employment rates are within an acceptable range. (N/A if this is a first year contract.)
<input type="checkbox"/>	<input type="checkbox"/>	7) Does the employer agree to ensure that trainees will be provided the same benefits and working conditions at the same level and to the same extent as other trainees or employees working a similar length of time and doing the same type of work?
<input type="checkbox"/>	<input type="checkbox"/>	8) Does the employer agree to ensure that trainee wages to be paid are at least equal to both: a) the Federal, state or local minimum wage (Fair Labor Standards Act), and b) other employees in the same occupation with similar experience?
<input type="checkbox"/>	<input type="checkbox"/>	9) Does the employer agree to ensure that trainees are provided with the same workers' compensation coverage as regular, non-OJT employees? Worker's Compensation Company: Travelers Insurance Account #: _____ Effective Dates: _____

<input type="checkbox"/>	<input type="checkbox"/>	10) Does the employer agree to ensure that the OJT will not result in the impairment of existing contracts for services or collective bargaining agreements?
<input type="checkbox"/>	<input type="checkbox"/>	11) Does the employer agree to obtain written concurrence from the concerned labor union when training is inconsistent with the terms of the collective bargaining agreement?
<input type="checkbox"/>	<input type="checkbox"/>	12) Does the employer agree to ensure that OJT funds will not be used to directly or indirectly assist, promote, or deter union organizing?
<input type="checkbox"/>	<input type="checkbox"/>	13) Does the employer agree to ensure that Trade funds will not be used to relocate operations in whole or in part?
<input type="checkbox"/>	<input type="checkbox"/>	14) Does the employer confirm that the company has operated at the current location for at least 120 days (unless the new location did not result in the layoff of employees at another location)?
<input type="checkbox"/>	<input type="checkbox"/>	15) Does the employer agree to provide safe working conditions for OJT trainees?
<input type="checkbox"/>	<input type="checkbox"/>	16) Has the employer signed an affidavit in accordance with the Georgia Security and Immigration Compliance Act and is the affidavit attached? See Exhibit A.
<input type="checkbox"/>	<input type="checkbox"/>	17) Has the employer's worksite where training will occur been visited by a representative from the Department?

Section 3: Authorized Signatures

I hereby certify that the above information is, to the best of my knowledge, true and correct.

EMPLOYER SIGNATURE:	TITLE:	DATE:
TRADE OJT AGENCY REPRESENTATIVE SIGNATURE:	TITLE:	DATE:

Section 4: Outcome of Pre-Award Interview

- Does the employer meet all requirements (i.e. answer "yes" to all questions above) of the OJT pre-award analysis? YES ☐ NO ☐
- Will an OJT Contract (Employer Agreement) be developed? YES ☐ NO ☐
If not, please explain.