INSTRUCTIONS: The Initial Trainee Information sheet must be completed and submitted along with the busines

## To be completed by GRANT applicants

Participant	Participant	Participant	Position Title
First Name	Middle initial	Last Name	rosition fitte

ss's RRIWT Application to document the number of employees that will participate in approved training(s) as w

Salary/Hourly Rate	Length of Employment
Salary/Hourty hate	Length of Employment

rell as each employee's position	and length of employi	nent.	