

## Agriculture Training Support Program Application Form

The personal information that you provide on this form and any attachments will be used for the purpose of administering the Canadian Agricultural Partnership **Agriculture Training Support Program**. Your personal information is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act and is protected by the privacy provisions of the Act. If you have any questions about the collection, use or disclosure of your personal information, please contact CAP.RiskManagement@gov.ab.ca

### 1. Applicant Information

Legal Name of Individual or Legal Name of Business (Legal Corporate Name): Note: all Eligible Expenses and Proof of Employment <u>must</u> be under this name			
Business Operating Name (if different from above):			
Mailing Address:		City/Town:	Province:
Postal Code:	Telephone Number:	Email Address:	Website:
Type of Business (Select One): Private Individual      Private Business/Corporation Public Business/Corporation		Size of Business by Number of Employees (Select One): Small (1-50)      Medium (51-499)      Large(500+)	
Are you a farmer/producer?    Yes      No If Yes, please provide one of the following: Social Insurance Number (Individual) <u>or</u> Business Identification Number (Business/Corporation):			
Municipality:	Legal Land Location of Farming Operation (if applicable): QTR    -SEC    -TWP    -RGE    -MER Premises ID Number (if applicable):		
Name of individual who can enter into legal contracts on behalf of Applicant:		Title:	
Project Start Date (mm/dd/yyyy):		Project End Date (mm/dd/yyyy):	
Name of Primary Contact:		Title:	
Mailing Address (If different from above):		City/Town:	Province:
Postal Code:	Telephone Number:	Email Address:	

## 2. Additional Applicant Information

### Type of Agricultural and Horticultural Applicant (Select One):

Services or businesses that farm, harvest, process, manufacture, produce or distribute food, including beverages, crops, animal products and by-products, and hunting.

Businesses that support the food supply chain including assembly yards, livestock auctions, food distribution hubs, feed mills, farm equipment dealerships and suppliers, feed suppliers, food terminals and warehouses, animal slaughter plants and grain elevators, all farm input including fertilizer plants and distribution.

Business that support the safety of food including animal and plant health and animal welfare.

Businesses that provide veterinary services, and that supply veterinary and animal control medications and related supplies and testing kits.

Operations that provide specialized pharmaceuticals or inputs to pharmaceuticals, to include medicinal marijuana operations.

### Current License Holder for food processors (if applicable):

Alberta Agriculture and Forestry

Alberta Health Services

Alberta Gaming, Liquor and Cannabis Commission

Canadian Food Inspection Agency

Other, please specify:

A copy of your "Certificate or License to Operate" must be included with your application

## 3. Grant Funding Request Summary

Has any other government funding been applied for or funding received regarding the expenses described in this application?

Yes

No

## 4. Calculation of Total Amount of Grant Requested

Grant Calculation of Eligible Job Training Support

Total Number of New Hire Employees (attach a separate Proof of Employment for each New Hire Employee)	Grant Rate per Eligible New Hire Employee	Total Grant <small>(Total Number of New Hire Employees multiplied by Grant Rate per Eligible New Hire Employee)</small>

Total Grant (A)

Grant Ratio % (B)

100%

Total Request Grant Amount for CAP Funding\* (A) x (B)

Note: Total Request Grant Amount for funding cannot exceed Program maximum Funding Level of \$50,000 per Applicant

## 5. Statement of Certification: (READ THIS CAREFULLY BEFORE SIGNING)

I, \_\_\_\_\_ certify that:

Name of individual applicant OR authorized representative of applicant (for corporate and other applicants)

- I am the Applicant or authorized to complete this Application to the Agriculture Training Support Program (the "Program") on behalf of the Applicant;
- I understand and agree to the Agriculture Training Support Program Terms and Conditions (the "Program Terms and Conditions");
- I am an Eligible Applicant as detailed in the Program Terms and Conditions;
- I understand that not all of the New Hire Employees included in this application may be approved as being eligible for funding, and that the Grant Agreement will list the approved New Hire Employees that the grant may be used for;

- I understand that each New Hire Employee **must** complete *COVID-19 safety procedures training*, and each New Hire Employee **must also complete at least one** of *occupational health and safety training* or *work-related duties and activities training*;
- I produce at least \$10,000 worth of agricultural or horticultural farm commodity, or processed food and beverage product, annually;
- I understand and acknowledge that any grant paid under this program shall be governed by the Program Terms and Conditions and are additionally subject to the Agriculture and Forestry Grant Regulation, as may be amended;
- I understand that funding for the Program is limited to program funding constraints; and
- I understand that applications under the Program will be processed as outlined in the Program Terms and Conditions;

**AND I certify that the information provided in this application is, to the best of my knowledge, true, complete and correct.**

**Total Amount of Grant Requested (as calculated in Section 4 of this form)** \_\_\_\_\_

**Legal Name of Applicant:** \_\_\_\_\_

**Signature of Applicant or Authorized Representative of Applicant:** \_\_\_\_\_

**Date** mm/dd/yyyy: \_\_\_\_\_

**Application Checklist:**

- All 5 sections of the application form have been completed
- Copy of certificate or license to operate (if applicable) has been provided
- Separate Proof of Employment for each New Hire Employee has been provided

Scan and submit application to [CAP.RiskManagement@gov.ab.ca](mailto:CAP.RiskManagement@gov.ab.ca) (preferred).

Alternatively mail to the following address:  
 Agriculture Training Support Program - Canadian Agricultural Partnership  
 Alberta Agriculture and Forestry  
 Program Delivery Section  
 Suite 301, 7000 113 Street NW  
 Edmonton AB T6H 5T6

Alternatively fax to 780.427.5921

**(Only applications received through the above email, address or fax will be considered)**

Funding for this program is provided by the Government of Canada and the Government of Alberta with funding administration support from Alberta Labour and Immigration and Alberta Agriculture and Forestry. This program is administered by Alberta Agriculture and Forestry.