METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

Freddie O'Connell, MAYOR

OFFICE OF ECONOMIC AND COMMUNITY DEVELOPMENT

Jamari Brown, Executive Director

Justin Attkisson , Manager

One Public Square
Nashville, Tennessee 37201
Telephone: (615) 862-6000
FAX Number: (615) 862-6040

Workforce Advancement Grant Application

Grant Award Criteria

Small Businesses with more than 5 and fewer than 100 employees globally are eligible a grant that reimburse them for training to employees through a formal internal training program or a program provided by an accredited institution are eligible for $1,000 per employee, up to 10 employees, for that training. The eligible training must result in a diploma, certificate, license, or other recognized credential that advances the employee's skills within their industry. A maximum of $10,000 is available per company.

- **Prohibited Business**
  Nightclubs; hotels/motels; tattoo parlors; body piercing shops; cash advance, check cashing, and/or title loan businesses; pawnshops; adult entertainment businesses; automobile sales, automobile service, automobile repair, and/or automobile parking businesses; landfills; wrecker services; shops primarily selling products containing or used for consuming nicotine, CBD, THC< or other similar substances, and businesses operating from residential property.
- **Accredited Institution**
  An educational entity, which may include but is not limited to an apprenticeship program, college, university, or other educational program, that has voluntarily undergone a peer review process to confirm it meets specific quality, integrity, and operational standards set by an accrediting agency recognized by the Council for Higher Education Accreditation, the United States Department of Education, or United States Department of Labor.

To appropriately submit a grant application to the Economic and Community Development (ECD) staff, the Applicant shall submit: (i) an electronic copy of the grant application in portable document format (PDF) to the ECD staff. If any minor errors exist within a submitted grant application, then the ECD staff may, in its sole discretion, allow the Applicant up to ten (10) business days to make the necessary corrections.

The submitted grant application must contain the following subject line in the email:

"Workforce Advancement Grant Application (Name of Applicant); (Month/Year)"

Grant applications and supporting documents shall be collectively emailed to the individuals listed below:

Jamari Brown, Executive Director
One Public Square
Nashville, Tennessee 37201
Telephone: (615) 862-6000
Fax: (615) 862-6040
Email: Jamari.Brown@Nashville.gov

Justin Attkisson, Manager
One Public Square
Nashville, Tennessee 37201
Telephone: (615) 862-6000
Fax: (615) 862-6040
Email: Justin.Attkisson@nashville.gov

Applicant Information

Applicant Name: _____ Title: _____

Phone Number: _____ Email: _____

Business Information

Business Name: _____

Business Address: _____

City: _____ State: _____ ZIP Code: _____

Website: _____

Federal Tax ID Number: _____ State of Incorporation: _____ Year Established: _____

Current Number of Employees: _____

NAICS Code (census.gov/naics): _____

Brief Description of Business:

Please list the business's owners, officers, and directors:

Grant Request

Amount Requested: _____

Describe the training program (s) that will be used:

Training Categories	**Cost**
Accredited Institution Tuition:	
Trainer:	
Textbooks:	
Manuals:	
Equipment:	
On-the-Job Training Hours:	
Total Training Cost:	

Employee Number (Not Social Security)	**Training Program**
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Business Legal Standing

The company registered to conduct business in Tennessee	☐	All ad valorem taxes have been paid	☐
Company has a business license in Davidson County	☐	All business taxes have been paid	☐

Confirmation of Accuracy: To the best of my knowledge and belief, the information contained in this Metro Nashville Application for Incentives is true and correct.

I further certify that the business entity is in good standing under the laws of jurisdiction(s) in which the entity organized or authorized to conduct business and that no delinquent taxes are owed to any taxing entity. ☐

Supporting Documents Requested

Copy of Business Licenses	☐	Certificate of Good Standing	☐	Profit & Loss Statement or 12 Month to Month Cash Flow Statement	☐
Copy of Internal Training Program	☐	Copy of Accredited Institution's Training Program	☐		

Signature: _____ Date: _____