## **COJG REASONABILITY CHECKLIST**

Service providers delivering the Canada Ontario Job Grant (COJG) through a transfer payment agreement with the Ministry of Advanced Education and Skills Development (MAESD) are required to make decisions around the funding of training applications from employers. It is the responsibility of the service provider for Under 25 and the ministry for the Over 25 application stream to make decisions that are in line with ministry priorities and provide value for money.

This Checklist is to assist service providers and the ministry staff in their review of COJG application submissions. This Checklist is meant to be a reference and it is the responsibility of those reviewing the application to do a thorough review of the requested training application.

If the service providers or ministry is not satisfied that the employer has demonstrated the training is of reasonable cost, it is within the ministry or service provider's purview to decline the application. Below you will find a list of parameters to support you in your assessment of the application. Please use this Checklist to review the quality and impact of the COJG applications.

| APPLICATION TRIAGE LIST   |  |  |
|---|--|--|
| Application #:  |  |  |
| Employer Name:  |  |  |
| ☐ The total cost per participant is over \$ 2,500   |  |  |
| $\Box$ The per day per participant cost of the training is \$500 or more  |  |  |
| ☐ Employer has been in business 12 months or less   |  |  |
| ☐ The employer has submitted 10 COJG applications or more in the last 12 months   |  |  |
| ☐ The trainer has been selected as the first choice trainer 10 times or more in the last 12 months and is not an:   |  |  |
| Ontario Public College  |  |  |
| ☐ Ontario University  |  |  |
| Ontario Provincial School Board   |  |  |
| ☐ The application was submitted to a service provider that is greater than 35km away from the employer and there are other service providers located in closer proximity. |  |  |
| Have any of the above triage list options been "checked"?   |  |  |
| $\square$ Yes, full assessment required – Please complete the following sections of the checklist   |  |  |
| ☐ No, full assessment is not required   |  |  |
| Application reviewed by:  |  |  |
| Application review date:  |  |  |
| Signature   |  |  |

## **SECTION 1 – VALUE FOR MONEY**

| 1) | If three training provider quotes are required, please verify the following for the second and third choice training provider? Please check that:  |
|----|--|
|    | ☐ The training providers training information (course content, cost, etc) are not publicly listed on-line – Obtain a rationale from the employer on why the selected training providers information is not publicly available  |
|    | ☐ The training offered by second and third choice trainers is not similar in content and duration to the first choice training provider content and duration — Obtain a rationale from the employer on why the second and third choice trainers are not similar in content or duration to the first choice training provider |
|    | ☐ The second and third choice training providers are not active training providers (verify through email, phone call, business address, employer website) — Application should not be considered for funding   |
|    | □ N/A – employer is not required to provide three quotes, proceed to question 3  |
|    | Employer Rationale:  |
|    | Does rationale provided by employer justify application issue?  — Yes – Continue to the next question  |
|    | ☐ No – Application <u>should not</u> be considered for funding   |
| 2) | If the selected training provider is not the least expensive training option of the three quotes provided, please review the employer rationale for following:   |
|    | ☐ Unique or more comprehensive learning content  |
|    | $\square$ Training provider location is a superior choice for the employer   |
|    | Skill level of the trainer is significantly higher than other available trainers   |
|    | Training provider selected has training equipment not available at other trainers  |
|    | Other – Please provide the details in the employer rationale section below   |
|    | ☐ N/A, employer is not required to provide three quotes – Proceed to the next question   |
|    | Employer Rationale:  |

|    | Does rationale provided by employer justify application issue?   |
|----|--|
|    | $\square$ Yes, the employer justifies selection of the higher cost trainer – Proceed to the next question  |
|    | ☐ No, does not justify why the higher cost training was selected as the training provider of choice – Application should not be considered for funding   |
| 3) | If the cost of the training is over \$500 per day per participant or more than \$2,500 per participant in total, and the participants receives a salary equal or less than \$15 per hour, has the employer justified this level of investment?                               |
|    | ☐ Investment will allow employer to move trainee into a higher skilled and/or higher wage position   |
|    | ☐ Employer is attempting to avoid a downsizing through this training   |
|    | ☐ Trainees will gain recognized industry skill   |
|    | □ N/A – This question is not applicable to the participant/s wages or the training cost  |
| 4) | Does the first choice training provider publicly post the cost and description of their own training courses?  |
|    | ☐ Yes – Please provide further details below   |
|    | ☐ No – Proceed to the next question  |
|    | If Yes, are the publicly posted courses comparable in price to the amount being charged to the employer? (please note that most trainers will charge double the cost for training being purchased by employers as opposed to the same course targeted at the general public) |
|    | Yes, course selected is no more than 100% more expensive than similar courses publicly posted by the selected training provider – Proceed to the next question   |
|    | ☐ No, course selected is more than 100% more expensive than similar courses publicly posted<br>by the selected training provider –Application should not be considered for funding   |
|    | SECTION 2 – APPLICATION VALIDATION   |
| 5) | Has the employer requested any participant training material supports? If Yes, please verify the following:  |
|    | $\Box$ Cost per Participant does not exceed \$500 for textbooks, software and other required materials.  |
|    | $\square$ Material support cost will be used only for training support purposes only   |
|    | ☐ Training supports cost is not being combined to support larger equipment purchases (e.g., combining the maximum \$500 in support for three trainees to purchase a \$1,500 piece of equipment).   |
|    | If the employer is contradicting any of these parameters then the application <u>should not</u> be considered for funding or should be renegotiated to align with these parameters.  |
|    | If the employer is unable to provide supporting documentation, the application <u>should not</u> be considered for funding.  |

| 6) | Please verify from EOIS-CaMS and on-line research whether any of the following apply?  |
|----|--|
|    | ☐ The employer has chosen a service provider that is greater than 35 km away and there is a local service provider/ministry office in close proximity  |
|    | $\square$ The employer has submitted applications to multiple service providers  |
|    | $\square$ The employer has submitted applications in more than one region of the province  |
|    | $\square$ There is a high application denial or withdrawal rate for past COJG applications   |
|    | If any of the above questions are selected, then the application is deemed to be of high risk.   |
|    | If the application is deemed high risk, please obtain a rationale from the employer for the issue that has been identified   |
|    | Employer Rationale:  |
|    |  |
|    |  |
|    | Descriptionals are sided by anythrough tratify application issue?  |
|    | Does rationale provided by employer justify application issue?   |
|    | ☐ Yes – Proceed to the next question   |
|    | ☐ No – Application <u>should not</u> be considered for funding   |
| 7) | Please verify from EOIS-CaMS and on-line research whether any of the following apply?  |
|    |  |
|    | ☐ The employer operates under more than one business name or are they operating another business number from the same location   |
|    |  |
|    | business number from the same location   |
|    | business number from the same location  The total number of trainees is 90% or more of the total employees of the company  |
|    | business number from the same location  ☐ The total number of trainees is 90% or more of the total employees of the company ☐ Postal codes and telephone numbers of trainers are out of province ☐ Distance between training provider and employer is more than 35 km and there are closer training  |
|    | <ul> <li>business number from the same location</li> <li>☐ The total number of trainees is 90% or more of the total employees of the company</li> <li>☐ Postal codes and telephone numbers of trainers are out of province</li> <li>☐ Distance between training provider and employer is more than 35 km and there are closer training options available</li> </ul>  |
|    | business number from the same location  ☐ The total number of trainees is 90% or more of the total employees of the company ☐ Postal codes and telephone numbers of trainers are out of province ☐ Distance between training provider and employer is more than 35 km and there are closer training options available  If Yes is selected for any of the above questions, then the application is deemed to be of high risk.  If the application is deemed high risk please obtain a rationale from the employer for the pattern that  |
|    | <ul> <li>business number from the same location</li> <li>☐ The total number of trainees is 90% or more of the total employees of the company</li> <li>☐ Postal codes and telephone numbers of trainers are out of province</li> <li>☐ Distance between training provider and employer is more than 35 km and there are closer training options available</li> <li>If Yes is selected for any of the above questions, then the application is deemed to be of high risk.</li> <li>If the application is deemed high risk please obtain a rationale from the employer for the pattern that has been identified.</li> </ul> |
|    | <ul> <li>business number from the same location</li> <li>☐ The total number of trainees is 90% or more of the total employees of the company</li> <li>☐ Postal codes and telephone numbers of trainers are out of province</li> <li>☐ Distance between training provider and employer is more than 35 km and there are closer training options available</li> <li>If Yes is selected for any of the above questions, then the application is deemed to be of high risk.</li> <li>If the application is deemed high risk please obtain a rationale from the employer for the pattern that has been identified.</li> </ul> |
|    | <ul> <li>business number from the same location</li> <li>☐ The total number of trainees is 90% or more of the total employees of the company</li> <li>☐ Postal codes and telephone numbers of trainers are out of province</li> <li>☐ Distance between training provider and employer is more than 35 km and there are closer training options available</li> <li>If Yes is selected for any of the above questions, then the application is deemed to be of high risk.</li> <li>If the application is deemed high risk please obtain a rationale from the employer for the pattern that has been identified.</li> </ul> |
|    | business number from the same location  The total number of trainees is 90% or more of the total employees of the company  Postal codes and telephone numbers of trainers are out of province  Distance between training provider and employer is more than 35 km and there are closer training options available  If Yes is selected for any of the above questions, then the application is deemed to be of high risk.  If the application is deemed high risk please obtain a rationale from the employer for the pattern that has been identified.  Employer Rationale:  |

## **SECTION 3 – TRAINING VALIDATION**

| 8)  | Is there a clear relationship between the training and the employer's business?  |
|-----|--|
|     | <ul> <li>☐ Yes, the training relates to the employers business – Continue to the next question</li> <li>☐ No, the training does not relate to the employer's business – Application should not be considered for funding.</li> </ul>   |
| 9)  | Is there a clear relationship between the training and the employees' current/future role?   |
|     | <ul> <li>☐ Yes, the training relates the employees' current and/or future role – Continue to the next question</li> <li>☐ No, the training does not relate to the employees current or future role – Application should not be considered for funding</li> </ul>   |
| 10) | On the training provider's web site does it indicate that the training provider provides both consulting and training services? (Note that consulting services are ineligible for support through COJG)  |
|     | Yes – Please provider further details below  |
|     | □ No – Continue to the next question   |
|     | If Yes, has the employer provided clear information on training details, learning outcomes and other aspects of the training that validate that this is training and not consulting services for the employer?   |
|     | ☐ Yes, training details support that there are no consulting services being supported through this application – Continue to the next question   |
|     | $\square$ No, training details show that there are consulting services being supported through this application. Application should not be considered for funding  |
| 11) | If the selected training provider is a "Product Vendor", please verify the Training Provider Type in the Employer/Consortium application and EOIS-CaMS is properly categorized as per the Ministry's definition.   |
|     | For the purpose of the COJG, product vendor training is defined as any application where the vendor is involved in the creation/sale of the product and is also conducting the training in how to use that particular product. "Product" refers to business-related materials (e.g. technology/equipment, software, or proprietary process) purchased by the employer. |
|     | Product vendors are <b>ineligible</b> to deliver training on how to use the product or service.  |
|     | Product vendors are only <b>eligible</b> to deliver training that is unrelated to basic operations of the product or service.  |

|     | No, trainer is not a "Product Vendor" – Please adjust the "Training Provider Type" field in EOIS-<br>CaMS and proceed to the next question                            |
|-----|---|
|     | ☐ Yes, trainer is a "Product Vendor" – Please answer below to confirm the eligibility of the training   |
|     | ☐ Funding request is to train the participants on the use of the product – Training is not eligible, application should not be considered for funding                 |
|     | $\Box$ Training request is to teach participants a skill set outside of the use of the product – Continue to the next question.                                       |
|     | Example:  |
|     | X An example of ineligible training would be 3D Manufacturer or Seller training participants how to operate the product.  |
|     | ✓ Eligible training example would consist of 3D Manufacturer or Seller teaching participants 3D design principles   |
| 12) | Is there a conflict of interest between the training provider, product vendor or employer?  |
|     | ☐ Product vendor mandates a single specific trainer that should be used for all training related to their products – Application should not be considered for funding |
|     | ☐ Employer/Product Vendor has ownership stake in the training provider – Application <u>should not</u> be considered for funding                                      |
|     | ☐ Trainer is certified by the product manufacturer but has no relationship with the manufacturer – Application can be considered for funding                          |
|     | ☐ Other – Please provider details below   |
|     | Details of Conflict of Interest:  |
|     |   |
|     | Is there any other conflict of interest between the training provider, product vendor or employer?  |
|     | ☐ Yes – Application should not be considered for funding  |
|     | □ No − Proceed to the next question   |
|     |   |
| 13) | Has the employer received COJG funded training in the past 12 months? If Yes, please confirm the past training outcome:   |
|     | ☐ Yes – Please confirm the details of the employers past application history  |
|     | ☐ No, employer`s first application – Proceed to the next question   |
|     | •   |

| If Yes, please confirm the following:   |
|---|
| ☐ There is reasonable alignment between application details and outcomes of training in terms of the number of new hires, wage increases, notice of lay off retained and training outcomes OR employer has provided a rationale that justifies the variances between the application and the outcomes —Application can be supported |
| ☐ No, there is not a reasonable alignment between application details and outcomes of training in terms of the number of new hires, wage increases, notice of lay off retained and training outcomes – Please request employer to provide a rationale for the variation between stated and actual outcomes in the past application  |
| ☐ Previous COJG funded training is still in progress – No further action required   |
| ☐ No follow up data available and the previous funded training has been completed – Please confirm with the employer if the stated outcomes have been achieved for the previous COJG funded training.   |
| If there is a significant variation between what employer indicated in previous application(s) and actual outcomes then application $\underline{\text{should not}}$ be supported.   |
| If employer has provided a rationale to justify variances between previous application(s) and outcomes please document it below.  |
| Employer Rationale:   |
|   |
| RECOMMENDATION  |
| ***All supporting documentation and a copy of this Checklist <u>must</u> be placed in file for auditing, monitoring and follow-up purposes.   |
| $\hfill \square$ Yes, the application meets all of the criteria of the COJG Reasonability Checklist and can be assessed against the Tiers Criteria for potential funding  |
|   |
| ☐ No, the application <u>is not</u> recommended for approval due to the following reasons:  |
| <ul> <li>□ No, the application <u>is not</u> recommended for approval due to the following reasons:</li> <li>□ The application does not represent good value for money</li> </ul>   |
| <u> </u>  |
| ☐ The application does not represent good value for money   |
| ☐ The application does not represent good value for money ☐ The employer provided false and/or misleading information   |
| ☐ The application does not represent good value for money ☐ The employer provided false and/or misleading information ☐ The employer failed to provide requested additional information   |
| <ul> <li>☐ The application does not represent good value for money</li> <li>☐ The employer provided false and/or misleading information</li> <li>☐ The employer failed to provide requested additional information</li> <li>☐ Other</li> </ul>  |