# 

# **(Your Organization’s Letterhead)**

# **TRAINING JOB DESCRIPTION TEMPLATE**

**Name of Business Providing Training Worksite:** Click or tap here to enter text.

**Type of Business/Organization:** Click or tap here to enter text.

**Contact Name:** Click or tap here to enter text.

**Contact Telephone:** Click or tap here to enter text.

**Contact Email Address:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**City:** Click or tap here to enter text. **Zip Code:** Click or tap here to enter text.

**Job Title:** Click or tap here to enter text.

**Worksite Location (where the work will take place):** Click or tap here to enter text.

**Number of Interns:** Click or tap here to enter text.

**Name of Supervisor:** Click or tap here to enter text.

**Contact e-mail:** Click or tap here to enter text.

**Name of Alternate Supervisor:** Click or tap here to enter text.

**Contact phone(s) during work hours:** Click or tap here to enter text.

**Contact e-mail:** Click or tap here to enter text.

**JOB DESCRIPTION**

General – *a brief description of what the work will accomplish:* Click or tap here to enter text.

**WORK SCHEDULE** – *estimated schedule* - Days / Hours per Day: Click or tap here to enter text.

Start Date: Click or tap to enter a date. End Date: Click or tap to enter a date.

**DUTIES AND RESPONSIBILITIES** – *List the specific duties and tasks which will be the regular function and responsibility of the Trainee:* Click or tap here to enter text.

**REQUIREMENTS:** Click or tap here to enter text.

**OCCUPATIONAL SKILLS**– *List the minimum occupational qualifications initially required to do the work (e.g., keyboarding -20 words/minute; lifting 30 lbs., etc.) type :* Click or tap here to enter text.

**List the specific workforce and occupational skills which will be learned**: Click or tap here to enter text.

1. *Using the* [**Workforce Skill Standards** *document*](https://www.nwdawn.org/intranet/documents/232/3305/Workforce_Skill_Standards_English_FNL.pdf), *please check off the Workforce Skill Standards which you expect to be achieved during the training,*
2. O\*Net ([www.onetonline.org](http://www.onetonline.org)*) can be used as a reference for identifying occupational skills.*

**DRESS CODE** *- Indicate appropriate attire including any safety gear required for the worksite*: Click or tap here to enter text.

**MATERIALS** - *List the materials supplied by you; materials needed*: Click or tap here to enter text.

**EQUIPMENT PROVIDED** – *Describe any applicable equipment, tools, and machinery the Intern will use, and applicable safety procedures for your workplace:* Click or tap here to enter text.

**JOB SITE TRANSPORTATION NEEDED** – *Explain what transportation, if any, will be necessary; vehicles provided and estimated miles round trip:* Click or tap here to enter text.

**CONTINGENCY PLANS** – Briefly outline your alternate plans for the trainee when conditions prevent work from proceeding, e.g.: weather conditions, accelerated completion, etc.

Click or tap here to enter text.

**ON SITE TRAINING AND FORMAL TRAINING** – *Describe the training, instruction, and other related activities to be provided which will acquaint participants with technical skills, upgrade skills and enhance their employability; both on-site and/or formal training your place of business will provide or arrange for, including training to make trainee aware of the Training site’s procedures for the prevention of the transmission of the COVID-19 virus:*

Click or tap here to enter text.

**ADDITIONAL PROVISIONS** – *List any work-enabling clothing/protective gear, licenses, etc. that are required to perform job duties.*

Click or tap here to enter text.

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| --- |
| Authorized Signature: |
| Print Name: Click or tap here to enter text. |
| Date: Click or tap to enter a date. |
| Title: Click or tap here to enter text. |
| Contact Email Address: Click or tap here to enter text. |