



Sto:lo Aboriginal Skills & Employment Training (SASET)
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TARGETED WAGE SUBSIDY APPLICATION FORM

Office Use Only:	Original <input type="checkbox"/>	Date Received: _____	File #: _____
	Amendment #: _____	Date Reviewed: _____	P.O.: _____

Project Name: _____ **Activity Period From:** _____ **To:** _____

Name of Employer: _____

Legal Name of Employer: _____

Contact Person: _____ **Email:** _____

Mailing Address: _____

Telephone Number: _____ **Fax Number:** _____

SASET CONTRIBUTIONS REQUESTED

Participant Job Title	① # of Weeks	② Hrs per Week	①X②=③ Total Hrs.	④ Wage Per Hour	⑤ Subsidy Requested	⑥ Sponsor Contribution per Hour	③X⑤=⑦ Total

⑧ **Total SASET Wages Requested**

For CPP & EI use Online deductions calculator (ODC); WCB Sponsor/Community rate; Vacation Pay = 4%
<https://www.canada.ca/en/revenue-agency/services/e-services/e-services-businesses/payroll-deductions-online-calculator.html>

CPP:	\$	WCB:	\$	EI:	\$	VP:	4%	(EI+CPP+WCB+Vac. Pay) = Mandatory Employment Related Costs (MERCs)
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• **Training Costs (itemize) – use separate sheet if necessary**

• **Special Costs (itemize) – use separate sheet if necessary**

Total SASET Contributions

SPONSOR CONTRIBUTIONS – use separate sheet if necessary

Participant top-up wages: _____

Mandatory Employment Related Costs (MERCs): _____

Total Sponsor Contributions

PARTNER CONTRIBUTIONS – use separate sheet if necessary

Total Partner Contributions

TOTAL CONTRIBUTIONS

SASET Requested _____

Sponsor: _____

Partner 1: _____

Partner 2: _____

Total Contributions

 Sponsor Signature Position Date

OBJECTIVES & ACTIVITIES

Organization Background:

Statement of Need:

Project Background/Objective:

Training Plan:
(Include dates/time frames/activities/costs/work experience)

Job Description:

Expected Results:

- Please remember to include the following:**
 - Cover letter
 - Band Council Resolution (BCR) or Board motion (if applicable)
 - Job Description for TWS participant