

PREVIEW ONLY: EARN Maryland 2025 Summer Solicitation- Division of Workforce Development and Adult Learning

Before Applying

Applicants should carefully review the EARN Maryland solicitation before submitting the application. The solicitation outlines required program components and key terminology for this project.

In order to receive application materials, applicants must submit a notice of intent to mary.keller@maryland.gov.

Pre-Proposal Conference

Attendance at the Pre-Proposal Conference on **Wednesday, July 23, 2025**, at 1:00 p.m. is strongly encouraged. To RSVP for the conference, please email Mary Keller at mary.keller@maryland.gov. Questions regarding the application process may be submitted to Mary Keller at mary.keller@maryland.gov following the conference through **Friday, August 29, 2025**.

Required Documentation

The following documents are required as a part of the application.

1. Letter of Application
2. Application (Appendix A)
 - a. Cover page (Section 1)
 - b. Executive summary (Section 2)
 - c. Narrative (Section 3)
 - d. Assurances Section 4)
3. Strategic Industry Partnership Submission Requirements (Appendix B)

- a. Letter of Commitment from EVERY member of the SIP signed and on letterhead
 - b. Letter of Commitment from Community Quarterback signed and on letterhead (if seeking priority points for serving ENOUGH communities)
 - c. Proof of application to Maryland DHS to become a SNAP E&T vendor (if seeking priority points for serving SNAP E&T recipients)
 - d. Signed W9 Form for Lead Applicant
 - e. Certificate of Good Standing - required for Lead Applicant AND any Subrecipient
4. The most recent two years' Audited, Reviewed, or Complied Financial Statements for the Lead Applicant (Appendix C)
 5. Budget (Appendix D)

Preview of Application Questions:

SECTION 1: COVER PAGE

1. Proposed Name of Strategic Industry Partnership
2. Selected Tier (Applicants must select one tier refer to section 3.1.4 of solicitation)
 - a. Tier One
 - b. Tier Two
3. Target Industry
 - a. Aerospace
 - b. Cybersecurity/Information Technology
 - c. Finance and Insurance
 - d. Green/Clean
 - e. Energy
 - f. Life Sciences
 - g. Healthcare
 - h. Hospitality
 - i. Manufacturing
 - j. Skilled Trades
 - k. Transportation and Logistics
 - l. Other
4. What occupation(s) is the Strategic Industry Partnership targeting? Include the [SOC code](#) for each identified occupation.
5. Target Region, including U.S. Census tract(s) included in the Project Service Area (i.e., Census Tract GEOIDs)
6. Amount of EARN Funding Requested (*This amount should match the total award request included on the budget template*)
7. Total Leveraged Resources (In Kind & Cash)

8. Total Project Budget (Amount of EARN Funding Requested + Total Leveraged Resources)
9. Number of Participants to be Trained (*This should match the total listed in Section 10 of this application*)
10. Does the Strategic Industry Partnership intend to serve residents from ENOUGH jurisdictions? Select Yes or No. (See Section 3.1.8.5 of Solicitation)
11. Did the applicant or subrecipient(s) submit an application to become a SNAP E&T Vendor? Select Yes or No. (See Section 3.1.9.7 of Solicitation)

For questions 12 - 21, provide the requested information about the lead applicant organization.

12. Organization Name
13. Main Point of Contact
14. Main Point of Contact Phone Number
15. Main Point of Contact Email Address
16. Organization Street Address
17. Fiscal Agent Name (*If different than main point of contact*)
18. Fiscal Agent Phone Number
19. Fiscal Agent Email Address
20. Federal Tax ID
21. Is the Lead Applicant an I.R.C. 501(c)? Select Yes or No.

For questions 22 - 23, provide the requested information about the Strategic Industry Partnership. For each partner listed, there should be a corresponding Letter of Commitment.

22. List the Employer partners. (Five partners are required)
23. List the Diverse Entities. (Two partners are required)

For question 24, provide the requested information about any subrecipients. Please list any organization that will receive funding from Lead Applicant. (*Refer to 3.3 in the Solicitation for requirements of a Subrecipient*)

24. List all subrecipients by the organizational name and Federal Tax ID.

SECTION 2: EXECUTIVE SUMMARY

1. Provide a clear and concise outline of the Proposal that **does not exceed 400 words** in length.

SECTION 3: NARRATIVE

Please thoroughly review the Solicitation before completing Section 3.
Provide a response for every question.

1. Strategic Goals and Statement of Innovation

1A. Describe your Strategic Industry Partnership's overarching strategy and the main goals of the Workforce Training Plan. Please address how key programmatic components, including training and other project activities, work together and how this is an innovative approach to addressing the target industry's workforce challenges.

2. Strategic Industry Partnership (SIP)

2A. Who is the Lead Applicant for the SIP? Please provide a brief profile of the Lead Applicant, how they were selected, and any experience they have convening partners and leading projects of similar type and scope.

2B. Please identify each Employer Partner included in the SIP. Please note each entity included below must submit a Letter of Commitment and should be listed in Section 1 - Cover Page (Question 22).

- Name of Employer
- Target Industry
- Number of Current Openings for Occupation
- Number of Openings for Occupation Expected Over Life of Grant
- Average Hourly Wage for Target Occupation at Entry
- Commitment to Grant (curriculum development, hiring, tours, mock interviews, Interviews, etc.)
- Has a Letter of Commitment been included with the Application (Yes/No)

2C. Identify each Diverse Entity included in the SIP.

Please note each entity included below must submit a Letter of Commitment and should be listed in Section 1 - Cover Page – Question .

- Name of Organization
- Organization Type (non-profit, higher education, LWDB)
- Commitment to grant (recruitment screening, training, job development)
- Has a letter of commitment been included with the application (Yes/No)

2D. Briefly describe the projected role, if any, of the local workforce board and/or any regional or local economic development entities. Please insert N/A if not applicable.

2E. Describe how the SIP will work together if awarded funding. This

should be inclusive of all members of the SIP, including the lead applicant, employers, and diverse entities.

3: Industry Engagement and Assessment of Critical Workforce Needs

3A. Describe how employer and industry partners have participated in defining the actual and projected critical workforce and skills shortages of the target industry (e.g. focus groups, surveys, data collection, facilitated workgroup sessions with groups of employers).

3B. Describe how the SIP will engage employer and industry partners to provide feedback on:

- Continuing or additional critical workforce needs and skills
- The success of training in terms of participants having industry-identified skills
- The value of training and the partnership generally

3C. Describe any plans to add employer and industry partners and/or collect additional data on employer's workforce needs.

3D. Outline the critical workforce and skills needs which will be addressed through the Workforce Training Plan (WTP), as defined by employer and industry partners. This may also include:

- Human resources issues (better aligning occupation descriptions with actual skills, competencies, and knowledge)
- Individual and structural barriers preventing prospective employees from obtaining employment in the target industry (job readiness programming, transportation barriers)
- Demographic challenges facing the industry, such as replacing an aging workforce, working with populations with English as a Second Language

3E. The WTP must be both data and experience-driven. Please list all data sources, in proper citation format, that were used to support the development of the WTP. This should include published studies, reports, and similar research. For unpublished data sources, including those compiled by the SIP, clearly explain the source and/or data collection process. This may include Labor Market Information described in Section 4 below.

4: Identification of Target Region

4A. Identify the target region and provide basic industry and labor market analysis that supports the importance of the industry sector to the region. Include the rationale for selecting the specific region.

Note: Applicants targeting ENOUGH communities and provide a Letter of Commitment for a Community Quarterback will receive additional points.

5: Recruitment, Assessment, and Selection

5A. Describe any target groups identified for training (unemployed/underemployed individuals, veterans, returning citizens, SNAP recipients, long-term unemployed, incumbent workers). Include an explanation of why your chosen population is appropriate for the target occupations selected.

5B. Which organizations in your SIP will be responsible for recruitment? What methods will be utilized (community-based organizations, social media, information sessions, etc.)? The recruitment strategy should align with the target groups the SIP intends to serve.

5C. If the SIP intends to train SNAP recipients (see Section 3.1.9.7 of the Solicitation), please describe any plans the SIP has developed to successfully serve these participants with EARN funding. This may include recruitment strategies and partners, an estimate of how many SNAP recipients could be served over the two year grant, and how the SIP would use the 50% reimbursement if intending to become a SNAP E&T vendor. If not applicable, please input N/A.

5D. Describe the assessment, screening, and selection process. What criteria will be used to determine candidates' readiness and fit with the proposed program and target occupation (interviews, TABE test, for incumbent workers – supervisor recommendation, etc.)?

5E. Describe how employers will be involved in designing and/or implementing the assessment and selection processes to promote alignment with the requirements of the targeted occupation.

6: Training

6A. Who is the training provider? Please provide a brief profile of their experience implementing the proposed or similar training.

6B. Briefly describe the major topics/components of each training

offered and any industry-recognized credential that participants will be prepared to earn as a result of training. List the name of the training, major topics/components, name of industry-recognized credential, length of training (in hours), and provide a description of the training.

6C. How will the SIP monitor and assess participant and program progress?

6D. Describe how employer partners will be involved in providing input and regular feedback about the training and education components to ensure they are aligned with the technical and non-technical job requirements and lead to successful job placement or advancement in the targeted occupation(s).

6E. How will essential skills and job readiness training be incorporated into the curriculum?

7: Supportive Services

7A. Which organizations in your SIP will be responsible for providing supportive services and coaching to participants?

7B. Which supports will be made available to participants, particularly those with barriers to employment, to help them overcome personal and structural barriers to successful completion and employment/advancement? If question 7A lists multiple organizations, please indicate which entity will be responsible for providing the stated supportive service.

8: Job Placement, Retention, and Advancement Strategies

8A. Describe your planned job search, job development, and job placement/advancement activities and which organization(s) in your SIP will be responsible for those activities.

8B. How will the skill level of training participants be assessed upon completion of training?

8C. How will employers be engaged as part of the job placement process?

8D. What services will be available to participants/graduates after they have been hired/promoted to promote retention? Include any specific strategies to help graduates take advantage of specific opportunities for

advancement within the target sector?

9: Past Performance

9A. Has this training, or similar training been offered before by the Lead Applicant or Training Provider? If so, please provide information about the funding source (if applicable) and the dates the program was offered. If this training or a similar training has not been offered, please insert N/A.

9B. Please list below to document past performance on the organization's most-recent grant. If not applicable, please insert N/A.

- Number to enroll
- Number to complete
- Number to earn an industry-recognized credential or certification
- Number to be placed into unsubsidized employment
- Average starting wage
- If serving incumbents, number to earn a wage increase or title promotion

9C. In reviewing the data provided above, as well as other performance metrics, did you consider the program successful? If yes, why? If no, why, and what steps will be taken to mitigate any challenges experienced that hindered success?

10: Expected Outcomes

10A. Provide the following outcomes for your project below.

- Number of individuals training
 - Unemployed/Underemployed
 - Incumbent workers
- Number of Individuals to complete
 - Unemployed/Underemployed
 - Incumbent workers
- Number of individuals to earn an industry-recognized certification or credential
- Number of individuals to obtain a new employment position
- Average Starting Wage
- Number of incumbent workers to earn a wage increase
- Number of incumbent workers to earn a title promotion
- Any other deliverables the partnership will track

11: Timeline

11A. Please include a detailed timeline of all activities related to implementation of the Workforce Training Plan. This should include, but is not limited to planning, recruitment efforts, training schedules, and follow-up activities.

12: Equity

12A. Please describe how your SIP will infuse and advance equity in the implementation of the project.

13: Sustainability

13A. Please describe how the SIP will remain sustainable in the absence of state funding.

SECTION 4: ASSURANCES

The Lead Applicant hereby affirms and certifies that it will comply with all applicable regulations, policies, guidelines, and requirements of the MD Labor and the State of Maryland as they relate to the application, acceptance, and use of Maryland Employment Advancement Right Now (EARN) funding in this project. The Lead Applicant further affirms and certifies that:

1. It possesses legal authority to apply for the grant, i.e., an official act of the Lead Applicant's governing body has been duly adopted or passed, authorizing filing of the application, including all understandings and assurances contained therein and directing and authorizing the person identified as the official representative of the Lead Applicant and to provide such additional information as may be required.
2. It will comply with applicable federal, State, and local laws regarding discrimination and equal opportunity in employment, and credit practices, including:
 - a. Titles VI and VII of the Civil Rights Act of 1964;
 - b. Title VIII of the Civil Rights Act of 1968, as amended;
 - c. The Americans with Disabilities Act of 1990; and
 - d. Maryland Annotated Code, State Government Article, § 20-601 et seq.
3. It will expend funds to supplement new and/or existing funds and not use these funds to supplant non-grant funds.
4. It will participate in any statewide assessment program or other evaluation program as required by MD Labor.
5. It will give MD Labor, or an authorized representative, the right of

access to, and the right to examine all records, books, papers, or documents related to the grant.

6. It will assure that quarterly status reports will be submitted to MD Labor, as required.
7. It will comply with all requirements imposed by MD Labor concerning special requirements of law and other administrative requirements.
8. The Fiscal Agent acts on behalf of the Lead Applicant by performing all financial management duties of the grant and accepting responsibility for the proper use of grant funds. The Fiscal Agent is responsible for maintaining separate records of disbursements made on the Applicant's behalf and disbursing those funds in accordance with the restrictions related to the grant. The Fiscal Agent takes full responsibility for managing and documenting grant expenditures, as well as submitting financial reports for the grant.

The Fiscal Agent is responsible for receiving and safeguarding grant funds. Furthermore, the Fiscal Agent is legally obligated to:

- Maintain separate records of disbursements related to the grant;
- Keep receipts for at least three years following closing of the grant;
- Make financial records available to the State of Maryland and its representatives upon request;
- Disburse funds in accordance with the purpose of the grant application; and
- File the final financial report at the conclusion of the grant.

Applicants must sign, print name, and date application.