



## Covid-19 Co-op Wage Subsidy Program Application

### Applicant Information:

Name of Business:

Contact Name:

Title:

Email:

Name of Person Who will be Submitting Claims:

Email:

Mailing Address:

City:

Province:

Postal Code:

Telephone:

URL:

### Funding Criteria:

Type of Organization:

Private

Non-Profit

Government/Public

Industry Sector:

Work term Location:

Yes No Is the student being hired an immediate family member?

Yes No Is the work term student replacing regular employees or employees on lay-off?

Yes No Is the position being funded through other provincial government sources?

If yes, how much will you receive?

### Work Term Information:

Funding will be used during the following semester:

Spring

Fall

202\_

Expected length of work term:

12wks

13wks

14wks

15wks

16wks

Expected hours per week:

35 hrs /wk (min)

37.5 hrs/wk

40 hrs/wk (max)

Expected hourly wage:

Please identify the co-program(s) from which you propose to hire:

Agriculture Technician

Computing Systems

Environmental

Mechanical (Manufacturing)

Chemical Process

Electrical (Power & Control)

Geomatics/Surveying

Petroleum

Civil

Electronic Systems

Industrial

Software Development

Programmer/Analyst

Number of students you wish to hire:

### Funding Details and Eligibility:

1 The Covid-19 Co-op Funding is a one time program by the Department of Immigration, Skills and Labour. Employers operating in Newfoundland and Labrador, who hire a Co-operative Education student from CNA may be eligible to receive funding of 75% of the student wage up to a maximum total subsidy of \$8000

2. Normally, companies hiring immediate family members will be ineligible.

3. Funding can be stacked with federal wage subsidy programs but not exceeding 100% of total wage funding.

4. Mandatory Employer Related Costs (MERC) are the responsibility of the employer.

***I confirm that the information contained in this application is correct, may be verified and can be shared with The Government of Newfoundland and Labrador in compliance with this funding agreement. I acknowledge that all mandatory employment related costs including vacation pay, employment insurance, workers compensation and CPP costs are understood to be the responsibility of the employer.)***

***I also confirm that all activities associated with this funding agreement will be in compliance with all Special Measures Orders on safety protocols from the Government of Newfoundland and Labrador, its Regional Health Authorities and the Chief Medical Officer for the Province, and in particular as it relates to COVID-19, the direction found at this website <https://www.gov.nl.ca/covid-19/information-sheets-for-businesses-and-workplaces/>***