[Date]

[Participant Name]  
[Participant Address]

[Participant City, State, Zip Code]

Dear [Participant Name],

Unfortunately, our program is unable to offer you acceptance into the Illinois Works Pre-apprenticeship program at [Provider Name].

***[For eligibility that cannot be changed – i.e., no GED or License and unwilling to get these etc. OR alternate reason – i.e., low scores on standardized interview]***

Based on your application you are presently unable to meet the eligibility requirements for the program. However, we would like to refer you to [referral partner or Illinois workNet] for alternate programs and services.

***[For eligibility that can be changed – i.e., no GED but willing to get this]***

Based on your application you are presently unable to meet the eligibility requirements for the program due to [insert eligibility requirement]. However, our organization provided you with information for [referral partner].   
  
Through [referral partner]’s program you have the opportunity to become eligible for our program. We will maintain your information and follow up with you periodically to determine your interest in reapplying for our program. Please find [referral partner]’s information listed below.

[Referral Partner Name]  
[Referral Partner Address]  
[Referral Partner Phone Number]  
[Referral Partner Website]  
   
If our team can be of additional assistance, please feel free to reach out to me or any member of our team.

Sincerely,

[Program Contact Signature]

[Program Contact Typed Name]  
[Program Contact Email]  
[Program Contact Phone Number]

*This document was developed by the Office of Illinois Works for the use by Illinois Works Pre-apprenticeship Program grantees.*