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| **Attachment A: Intent to Apply** | | | | |
| Eligible applicants wishing to apply must submit a **non-binding** notification of intent to apply by **October 1, 2015** to: [JTED-SNAP@illinoisworknet.com](mailto:JTED-SNAP@illinoisworknet.com). | | | | |
| 1. | **Legal Name of Applicant/Organization** |  | | |
| 2. | **Mailing Address of Applicant**  *(Street Address)*  *(City, State Zip)*  *(Please include 9 digit zip code)* |  | | |
| 3. | **Organization Contact Information:** | Phone: |  | |
| Fax: |  | |
| Email: |  | |
| 3. | **Chief Contact:** | Name: |  | |
| Phone: |  | |
| Title: |  | |
| Address: |  | |
| City, State Zip: |  | |
| Fax: |  | |
| Email: |  | |
| 4. | **Phone Number:**  *(Please include ext. # if applicable)* |  | | |
| 5. | **Fax Number:** |  | | |
| 6. | **FEIN Number:** |  | | |
| 7. | **Geographic Region Served:** |  | | |
| 8. | **Estimated Funding Request** |  | | |
| 9. | **Estimated Number of Recipients to Receive**  **JTED-SNAP Services:** |  | | |
| 10. | **Estimated Expenditures**  **Per-Participant on**  **Work-Experience:** |  | | |
| 11. | **Estimated Expenditures**  **Per-Participant on Training Services:** |  | | |
| 12. | **Targeted Sector(s):**  *(Select all that apply)* | Agriculture  Architecture/Construction  Energy  Finance  Health Care  Information Technology | | Manufacturing  Transportation & Logistics  Research & Development  Hospitality  Administrative Support  Other: |
| 13. | **Targeted Participants:**  *(Select all that apply)* | Category 1A  Category 1B  Category 2 | | |
| Please submit any questions about this form to: [https://www2.illinoisworknet.com/partners/JTED-SNAP/Pages/JTED-SNAP\_FAQ.aspx](https://www.illinoisworknet.com/partners/EPIC/Pages/JTED-SNAP_FAQ.aspx) | | | | |