

WIOA Incumbent Worker Training Program

Employer Application

SECTION 1. Business Information			
Business Name: JTEKT North America - Richland			
Authorized Business Representative: Alan Simmons			Title: Training Administrator
Phone: 843 609 4061	Ext. Click or tap here to enter text.		Fax:
Email: Alan.Simmons@jtekt.com		Company Website Address: www.jtekt-na.com	
Street/Mailing Address: 1006 Northpoint Blvd			
City: Blythewood	ZIP: 29016	County: Richland	
If there are multiple business locations, please indicate the location for which training is requested: Richland			
Date of Inception: 5/15/1995		Years in Business: 31	
Total Number of Full-time Employees: 6,000		Total Number of Part-time Employees: <100	
Total Number of Full-time Employees at this Business Location: 500		Total Number of Part-time Employees at this Business Location: 0	
Legal Structure of Business:	☐ Sole Proprietor	☐ Partnership	☒ Corporation (Designation: Click or tap here to enter text.)
Employer's Federal ID #: 27-1052746		Unemployment Comp ID #: 512768	
South Carolina Sales Tax Reg. #: 040896085		NAICS Code: 339999	
Is your business current on all State of South Carolina tax obligations?		☒ YES	☐ NO
Has your business received IWT, RRIWT, or other state or federal funding before?		☒ YES	☒ NO
If yes, please indicate the type of funding (e.g. Incumbent Worker Training), amount, and year: Incumbent Worker Training Most recent was January – October 2018 Also in 2017			
Is your business currently receiving/applying for other public training/consulting funds?		☒ YES	☐ NO
If yes, please identify the funding source and type of training/consulting services: Click or tap here to enter text. Apprenticeship SC Tax Credit			
Has there been a layoff at this site within the last 12 months?		☐ YES	☒ NO
If yes:	☐ Temporary Layoff Number affected: Click or tap here to enter text.	☐ Permanent Layoff Number affected: Click or tap here to enter text.	
Has the business or part of the business relocated operations within the last 120 days?		☐ YES	☒ NO
If yes:	Relocated from: Click or tap here to enter text.	Relocated to: Click or tap here to enter text.	Date of Relocation: Click or tap here to enter text.
Does your business use SC Works services?		☒ YES	☐ NO

SECTION 1. Business Information**If yes, please check all applicable services:**

- ☐ List Job Openings
☒ Job Fairs
☒ Testing & Assessment

- ☐ Mass Hires
☐ Candidate Search
☐ Other:

- ☐ On-the-Job Training (OJT)
Please note: employees cannot participate in both WIOA funded OJT and IWT simultaneously.

Please describe the business's product(s) and/or service(s):

Click or tap here to enter text.

This location manufactures wheel hub assemblies for the automotive industry. These include passenger car, light truck, SUV, and van applications.

Is the business minority owned? If yes, please check one of the boxes below:

- | | |
|--|--|
| ☐ Women owned | ☒ Asian/American owned |
| ☐ African/American owned | ☐ Native/American owned |
| ☐ Hispanic/American owned | ☐ Other minority owned (specify): |

Amount of Funding Requested: Click or tap here to enter text.**Number of Individual Trainees:** 2**Anticipated Start Date:****Anticipated End Date:** Click or tap here to enter text.**SECTION 2. Eligibility Criteria****Please thoroughly answer all questions. Attach additional sheets if necessary.****Do business circumstances point to probable layoffs?**☐ YES ☒ NO

If yes, please describe the business's circumstances.

Click or tap here to enter text.

The requested training will:

- | | |
|--|--|
| ☒ Increase employee skills | ☐ Save jobs within our business
(How many? Click or tap here to enter text.) |
| ☐ Address changing skill requirements | ☒ Result in a credential(s) |
| ☒ Result in wage/pay increases | ☐ Help prevent business relocation or closure |

SECTION 2. Eligibility Criteria

Please thoroughly answer all questions. Attach additional sheets if necessary.

Explain how the training will improve employee skills, resulting in a more competitive workforce and/or improve overall business circumstances.

Associates who are being trained are expected to be promoted from line operator to maintenance. While we cannot predict if this will help fill all of the positions, it is a long-term strategy to provide a continual stream of trained technicians to backfill a retiring labor base. The associates are being enrolled in a two-year apprenticeship program that has a stepped wage increase component of the program.

List the credentials expected to result from the IWT program.

Total Industries Maintenance Technician (from MTC) which includes Industrial Mechanical and Electrical Maintenance Courses.

Is the business committed to retaining employees?

☒ YES

☐ NO

SECTION 3. Training Project Information

Up to six (6) training programs may be requested on each application. Training descriptions for each program requested must be attached to the application.

TRAINING #1

Name of Training: Electrical Fundamentals III

Training Description: Complete the study of Electrical Fundamentals learning about 3-Phase Circuits, Circuit Impedance, including Single Phase and three-phase Transformers, Three Phase Wye and Delta connections, DC Generators, DC Motors, Three Phase Alternators, Single and Three Phase Motors Students must achieve a minimum course grade of 70% to successfully complete the course. Students must achieve a minimal course grade of 70% and meet a 75% attendance requirement for successful completion of the course.

Name of Training Provider: Midlands Technical College

Provider Federal ID #: 57-0427788

Name of Training Provider Representative: Chris White

Address: 1260 Lexington Dr

City: West Columbia

State: SC

Zip: 29170

Phone: 803-691-3885

Fax:

Anticipated training dates: 11-18-2026 thru 12-17-2026

**Projected Number of Hours
of Training:**

42

Number of Trainees: 2

Job Title(s) and Length(s) of Employment:

Maintenance Apprentice 3yrs, Maintenance Apprentice 8.5 yrs

Certification Earned:

TRAINING #1		
BUDGET	Instructor Wages/Tuition: 2098.00	*Materials/Supplies/Textbooks: Included
	*Other Costs: Click or tap here to enter text.	TOTAL COST: 2098.00
*Please itemize costs related to materials, supplies, textbooks, and other costs here: Click or tap here to enter text.		

TRAINING #2		
Name of Training: General Electrical Safety		
Training Description: Students will be introduced to general workplace electrical safety practices, including lockout/tagout, personal protective equipment (PPE), National Electrical Code (NEC) and arc flash guidelines. Curriculum includes: What is OSHA? , Safe Work Environments, Electrical Safety guidelines, Lock Out/Tag Out, Personal Protective Equipment (PPE), National Electrical Code (NEC) guidelines, Arc Flash guideline		
Students must achieve a minimal course grade of 70% and meet a 75% attendance requirement for successful completion of the course.		
Name of Training Provider: Midlands Technical College		Provider Federal ID #: 57-0427788
Name of Training Provider Representative: Chris White		
Address: 1260 Lexington Dr		
City: West Columbia	State: SC	Zip: 29170
Phone: 803-691-3885		Fax: Click or tap here to enter text.
Anticipated training dates: Click or tap here to enter text.		
Projected Number of Hours of Training: 16		Number of Trainees: 2
Job Title(s) and Length(s) of Employment: Maintenance Apprentice 3yrs, Maintenance Apprentice 4 yrs		
Certification Earned: Click or tap here to enter text.		
BUDGET	Instructor Wages/Tuition: \$630.00	*Materials/Supplies/Textbooks: Click or tap here to enter text.
	*Other Costs: Click or tap here to enter text.	TOTAL COST: \$630.00
*Please itemize costs related to materials, supplies, textbooks, and other costs here: Click or tap here to enter text.		

TRAINING #3		
Name of Training: Electrical Print Reading		
Training Description: The basic principles and concepts of electrical print reading introduce the participant to single-line, wiring, and elementary diagrams. Emphasis is placed on basic print reading techniques from the standpoint of using electrical diagrams together with their specific symbols, components and applications. Upon completion of this course, the participant should be able to: learn and interpret print symbols and abbreviations, identify one-line, wiring, & elementary diagrams, and discover troubleshooting techniques applying schematic diagrams. Course Content: Introduction, Electrical Drawing Fundamentals, , Electrical Components (Symbols), Single-Line Diagrams, Elementary Diagrams, , Wiring Diagrams, Functional Control Diagrams, Final Test		
Name of Training Provider: Midlands Technical College		Provider Federal ID #: 57-0427788
Name of Training Provider Representative: Chris White		
Address: 1260 Lexington Dr		
City: West Columbia	State: SC	Zip: 29170
Phone: 803-691-3885		Fax: Click or tap here to enter text.
Anticipated training dates: 1-19-2027 thru 1-27-2027		
Projected Number of Hours of Training: 18		Number of Trainees: 2 Click or tap here to enter text.
Job Title(s) and Length(s) of Employment: Maintenance Apprentice 3yrs, Maintenance Apprentice 4yrs		
Certification Earned: Click or tap here to enter text.		
BUDGET	Instructor Wages/Tuition: 838.00	*Materials/Supplies/Textbooks: Click or tap here to enter text.
	*Other Costs: Click or tap here to enter text.	TOTAL COST: 838.00
*Please itemize costs related to materials, supplies, textbooks, and other costs here: Click or tap here to enter text.		

TRAINING #4		
Name of Training:		
Training Description:		
Name of Training Provider:		Provider Federal ID #:
Name of Training Provider Representative:		
Address: 1260 Lexington Dr		
City: West Columbia	State: SC	Zip:
Phone: Click or tap here to enter text.		Fax: Click or tap here to enter text.
Anticipated training dates: Click or tap here to enter text.		
Projected Number of Hours of Training:		Number of Trainees: Click or tap here to enter text.
Job Title(s) and Length(s) of Employment: Click or tap here to enter text.		
Certification Earned: Click or tap here to enter text.		
BUDGET	Instructor Wages/Tuition: Click or tap here to enter text.	*Materials/Supplies/Textbooks: Click or tap here to enter text.
	*Other Costs: Click or tap here to enter text.	TOTAL COST: Click or tap here to enter text.

TRAINING #4

***Please itemize costs related to materials, supplies, textbooks, and other costs here:** Click or tap here to enter text.

TRAINING #5 – N/A

Name of Training: Click or tap here to enter text.

Training Description: Click or tap here to enter text.

Name of Training Provider: Click or tap here to enter text.

Provider Federal ID #: Click or tap here to enter text.

Name of Training Provider Representative: Click or tap here to enter text.

Address: Click or tap here to enter text.

City: Click or tap here to enter text.

State: Click or tap here to enter text.

Zip: Click or tap here to enter text.

Phone: Click or tap here to enter text.

Fax: Click or tap here to enter text.

Anticipated training dates: Click or tap here to enter text.

Projected Number of Hours of Training: Click or tap here to enter text.

Number of Trainees: Click or tap here to enter text.

Job Title(s) and Length(s) of Employment:
Click or tap here to enter text.

Certification Earned: Click or tap here to enter text.

BUDGET **Instructor Wages/Tuition:** Click or tap here to enter text.

***Materials/Supplies/Textbooks:** Click or tap here to enter text.

***Other Costs:** Click or tap here to enter text.

TOTAL COST: Click or tap here to enter text.

***Please itemize costs related to materials, supplies, textbooks, and other costs here:** Click or tap here to enter text.

TRAINING #6 – N/A

Name of Training: Click or tap here to enter text.

Training Description: Click or tap here to enter text.

Name of Training Provider: Click or tap here to enter text.

Provider Federal ID #: Click or tap here to enter text.

Name of Training Provider Representative: Click or tap here to enter text.

Address: Click or tap here to enter text.

City: Click or tap here to enter text.

State: Click or tap here to enter text.

Zip: Click or tap here to enter text.

Phone: Click or tap here to enter text.

Fax: Click or tap here to enter text.

Anticipated training dates: Click or tap here to enter text.

Projected Number of Hours of Training: Click or tap here to enter text.

Number of Trainees: Click or tap here to enter text.

Job Title(s) and Length(s) of Employment:
Click or tap here to enter text.

Certification Earned: Click or tap here to enter text.

BUDGET **Instructor Wages/Tuition:** Click or tap here to enter text.

***Materials/Supplies/Textbooks:** Click or tap here to enter text.

***Other Costs:** Click or tap here to enter text.

TOTAL COST: Click or tap here to enter text.

***Please itemize costs related to materials, supplies, textbooks, and other costs here:** Click or tap here to enter text.

SECTION 4. Training Budget

Businesses/consortia must contribute to the cost of the IWT project, with a minimum contribution of:

- 10 percent of the cost for business locations or consortia with no more than 50 employees
- 25 percent of the cost for business locations or consortia with more than 50 employees, but no more than 100 employees
- 50 percent of the costs for a business location or consortia with more than 100 employees

BUDGET	IWT FUNDING PROVIDED BY WIOA	BUSINESS SHARE/ CONTRIBUTION*
TUITION/COURSE REGISTRATION	1783.00	1783.00
TEXTBOOKS/MANUALS	Click or tap here to enter text.	Click or tap here to enter text.
TRAINING MATERIAL/ SUPPLIES	Click or tap here to enter text.	Click or tap here to enter text.
TOTAL COST OF TRAINING**	1783.00	1783.00

**Wages paid to employees while attending training may be used as the business's/training consortium's contribution to the cost of training.*

***The total of funding provided by WIOA and the business share should equal the total cost of training as reflected in the business application and training plan.*

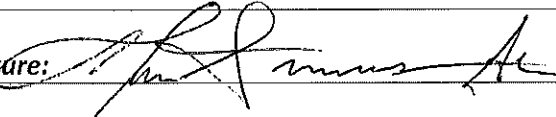
Source of Business Share/Contribution:

- ☒ Cash
- ☐ Employee wages paid during training
- ☐ In-kind

SECTION 5. Certification by Authorized Business Representative

I hereby certify that I am an authorized representative of the business named above, with the authority to commit the business to legally binding contracts and agreements. I further certify that the information given as part of and attached to this application is true and accurate. I am aware that any false information or intended omissions may subject me to civil or criminal penalties for filing of false public records and/or forfeiture of any funds approved through this program.

This application does not constitute a contractual agreement. If any portion of the application is approved, a formal agreement between parties will be executed to obligate funds for the approved training. Training may not start prior to the effective date of the agreement.

Signature: 	Title: Senior Trainer
Print Name: Alan Simmons	Date: 9/9/2026