

On-The-Job Training Agreement

This agreement is made between the Vermont Division of Vocational Rehabilitation (DVR) and

_____ (EIN: _____)
employer

_____ to provide training and employment to
employer address

_____ .
employee

DVR agrees to pay the employer \$ _____ for _____ hours of training

between the dates of _____ and _____ .

The employee will be trained as a _____ .

The employer will provide the training to the employee in the tasks specified on the reverse side of this document. The employee will be employed as any other employee and will receive the same benefits and compensation as other workers in the same position. The employer will withhold all applicable payroll taxes and will provide Workers' Compensation coverage.

The employer will report progress to DVR regularly _____ .

If the employee performs satisfactorily, she/he will be retained as a regular employee. If the employee performs unsatisfactorily, she/he will be provided reasonable opportunity for improvement prior to a decision to terminate.

The employer will submit bills to: Name: _____

Division of Vocational Rehabilitation

Address: _____

My signature below indicates that I have read and agree to the form and content of the above.

	DVR	Employer	Employee
Print Name	_____	_____	_____
Signature	_____	_____	_____
Title	_____	_____	_____
Date	_____	_____	_____

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TRAINING OUTLINE

Job Title _____

Brief description of job duties in which employee will be trained: