(Today’s date)

Re: (Client name)

Dear (Employer name):

Thank you for agreeing to work with Nebraska VR in an On-the-Job Training (OJT).

This training as a (Job title) will be based on the duties and expectation in your business. At the end of the training, (Client name) will be expected to have the knowledge and production rate comparable to that of a typical (Job title). The objective of the training is to provide (Client name) with skills in the following areas. (List skills)

(Client name) will be hired by your business and put on your payroll starting on (Date). Compliance with Federal and State tax procedure, Workers’ Compensation rules and other employment laws is your responsibility as with your other employees. A training fee will not be paid for days when (Client name) does not work such as holidays or sick days.

The following are the terms of the OJT:

Wages You Pay to Employee: $ (Wage) per hour

Training Fee Paid to You: $ (Fee paid) (this amount includes FICA)

Starting Date: (Start date)

Ending Date: (End date)

To initiate reimbursement from our agency, please submit an invoice with attached time sheet(s). You may invoice at intervals throughout the training or wait until the end of the training, whichever you prefer. All invoices and time sheets are to be completed by the immediate supervisor. Both you and (Client name) will need to sign the invoices and the business’s time sheets before sending in for payment.

Please note that Nebraska VR will not pay a training fee for any hours worked over 40 hours per week.

I will be contacting you regarding (Client’s name) performance. I will be asking for feedback on attendance, grooming, following instructions, completing assignments and additional work behaviors that you can provide. This information will be used to assess (Client’s Name) progress during the training period and will be shared with the individual. Please feel free to call me anytime to update me on performance related issues or to discuss any areas of concern.

Please contact me if you have any questions. I can be reached at (Office Phone Number). Thank you for your assistance.

Sincerely:

(Specialist name), Employment Specialist

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Section 5