



Sandusky County

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Fremont, OH 43420
(419)332-2169

Sandusky County OJT Checklist

1. Business Name, Address, and Contact Information (a business card may be attached):

2. How long have you been in business in Sandusky County? _____
Is the business being sold or merging with another company? ☐ Yes ☐ No

3. What is your chief product or service? _____

4. How many full-time employees do you have? _____
How many new hires do you anticipate in the next two (2) years? _____
What job titles/job descriptions will need to be filled? (Attach job descriptions if available) _____

5. Do you use a "temporary" or staffing agency? ☐ Yes ☐ No
If so, which one? _____
Will all jobs transition to regular employment with your firm prior to the end of the OJT training period? ☐ Yes ☐ No

6. What are your turnover patterns/causes and could we do anything to help lower turnover? _____

7. What skills will your employees acquire to be fully productive over the next few years? _____

8. Are jobs expected to last a year or more? ☐ Yes ☐ No

9. Which fringe benefits are provided to regular employees? _____
When are these benefits made available? _____

10. Do any jobs pay based upon commissions, tips, or incentives? ☐ Yes ☐ No
If so, what entry earnings may be expected for each job? _____

11. Do you have sufficient resources to provide necessary training? ☐ Yes ☐ No

12. How many hours per week are Trainees expected to work? _____
What are the expected shift times and days? _____

13. What licenses or entry qualifications do your workers need? (An attached job description may suffice) _____

REQUIRED INFORMATION

Assurances and Compliance Items

14. Are any employees on layoff currently? (Cannot write OJT if training is for a same or similar job) ☐ Yes ☐ No

15. Are any of these jobs covered by a collective bargaining agreement? ☐ Yes ☐ No
If so, obtain and attach a "concurrence letter" from the union(s).

16. Do you have a payroll system which records all paychecks and amounts? ☐ Yes ☐ No
Can the County verify wage payments quickly onsite? ☐ Yes ☐ No
Verification Method: _____

17. What is your Worker's Compensation carrier (or equivalent)? _____
Are all employees covered? ☐ Yes ☐ No

18. Are there any outstanding wage and hour, health and safety, or discrimination complaints or adverse decisions? ☐ Yes ☐ No

19. Has your company relocated from another labor market area in the U.S. within the last 120 days, leaving any workers behind? (If yes, OJTs or customized training may not be written.) ☐ Yes ☐ No

20. How many previous Sandusky County Trainees, over the last two (2) years, have completed training and been retained by your firm? # of OJT's: _____; # retained _____; % retained _____ If the retention % is below 90%, what improvements are planned?

21. Are any of the jobs considered for an OJT "independent contractors", or employed by your firm or a staffing agency during the entire training period? ☐ Yes ☐ No

I certify that the above information is, to the best of my knowledge, true and correct:

Employer:	County : Sandusky
Authorized Signature Date	Authorized Signature Date
Print Name and Title	Print Name and Title

(Revised 1-18)