

Virginia Maritime & Nuclear Workforce Accelerator

Employer Interest Form

Purpose of This Form

This form is intended to **identify employers interested** in participating in the Virginia Maritime & Nuclear Workforce Accelerator. Submission of this form **does not guarantee funding**.

Information collected will help Virginia Works:

- Confirm basic eligibility
- Understand employer workforce needs
- Initiate the employer needs assessment process

Section 1: Employer Information

Legal Business Name:

Doing Business As (if applicable):

Unique Entity ID (UEI) Number (Please go to [SAM.gov](https://sam.gov) for more information and to register your entity or get a Unique Entity ID):

Primary Business Address

Street Address:

City:

State:

ZIP Code:

Training Site Location(s), if known:

Section 2: Primary Point of Contact

Primary Contact Name:

Title / Role:

Email Address:

Phone Number:

Alternate Contact (optional):

Name, email, phone

Section 3: Business & Industry Information

Which best describes your organization?

- ☐ Shipbuilding
- ☐ Nuclear Energy
- ☐ General Manufacturing (supply chain or related)
- ☐ Other (please specify):

Number of employees at Virginia locations

- ☐ Fewer than 50
- ☐ 50–249
- ☐ 250–999
- ☐ 1,000 or more

Section 4: Workforce & Training Interest

What types of roles are you interested in training or upskilling? Approximately how many workers might be trained by the training program(s)?

(Specific occupations are not required at this stage, unless available)

Which of the following, if any, currently exist for the roles you described?

(Select all that apply; documentation is *not* required at this stage.)

- ☐ Written job descriptions
- ☐ Informal or on-the-job skill expectations
- ☐ Documented competencies or skill frameworks
- ☐ Defined career paths or progression criteria
- ☐ Training materials or curricula
- ☐ None of the above

Which best describes the workers you are seeking to train?

- ☐ New hires
- ☐ Incumbent workers
- ☐ Both new hires and incumbent workers

Which training approaches are you most interested in exploring?

(Select all that apply)

- ☐ Short-term credential or certification programs
- ☐ Customized or modular training
- ☐ Registered Apprenticeship or apprenticeship-aligned training
- ☐ On-the-job training
- ☐ Not sure / open to recommendations

When would you anticipate training beginning?

- ☐ Spring 2026
- ☐ Summer 2026
- ☐ Fall 2026
- ☐ Not sure

Section 5: Additional Information (Optional)

Is there anything else you would like Virginia Works to know about your workforce needs or interest in this initiative?

Section 6: Program Understanding & Acknowledgements

Please review and acknowledge the following:

- ☐ I understand that submission of this interest form **does not guarantee funding**.
- ☐ I understand that participation in the program requires engagement in a **needs assessment process**.
- ☐ I understand that this is a **phased project**. Phase 1 is the employer interest form and needs assessment process. Phase 2 is the employer training model selection and funding application. Phase 3 is training implementation and employer reimbursement.
- ☐ I understand that any future funding is **performance-based**, tied to training completion and job retention outcomes.
- ☐ I understand that **program funds may not be used to cover wages or salaries for trainees** and are limited to eligible training costs.
- ☐ I understand that participation requires **minimum data reporting** on training participants to meet federal funding requirements.

By submitting, you are agreeing to receive regular communications from Virginia Works.

Signature:

Date:

Submission & Next Steps

After submitting this form:

- Virginia Works will review your information to confirm basic eligibility.
- A representative may contact you to initiate the employer needs assessment. Virginia Works may request existing role descriptions or training materials during the needs assessment process to better understand your current state and training needs. These materials will not be evaluated for quality or completeness.
- Additional guidance will be provided regarding training options, reporting requirements, and next steps.

Questions may be directed to: grantapplications@viriniaworks.gov