



2017-18 Custom Fit Training Agreement

Business Name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip

Contact Name \_\_\_\_\_ Title \_\_\_\_\_

e-mail \_\_\_\_\_ Tel \_\_\_\_\_ Fax \_\_\_\_\_

Company Owners and/or Employees Receiving Training:

Name \_\_\_\_\_ SSN (Last 4): \_\_\_\_\_  
Please Print First & Last Name

Name \_\_\_\_\_ SSN (Last 4): \_\_\_\_\_  
Please Print First & Last Name

Name \_\_\_\_\_ SSN (Last 4): \_\_\_\_\_  
Please Print First & Last Name

Name \_\_\_\_\_ SSN (Last 4): \_\_\_\_\_  
Please Print First & Last Name

TRAINING NEEDS AND/OR REQUESTS:

St. George Area Small Business Summit: June 13, 2018

(Training workshops: Cybersecurity, Marketing, Building a Website, Active Shooter Training, Emergency Preparedness, HR, Taxes/Law, Quickbooks)

Total Cost: \$ 75.00 per person

Custom Fit will provide: \$ 30.00 per person

Company will provide: \$ 45.00 per person

PURPOSE OF TRAINING (SELECT ONE)

☐ Expand or Prepare for Growth ☐ Enhance Productivity ☐ Maintain Competitive Edge

This agreement is between Dixie Technical College and its Custom Fit Training Program, to coordinate training for "Employer" as provided herein. To qualify for Custom Fit funding you must be a for profit business operating in Washington County. This agreement is contingent on participating Employee(s) providing their last 4 digits of their social security number, for State reporting purposes. The "Employer" will contribute to the training cost as agreed, and will provide any additional information as required by Custom Fit staff, which may include training attendance records and evaluations. This agreement will close on or before June 30, 2018.

X \_\_\_\_\_ X \_\_\_\_\_  
Employer Representative Custom Fit Representative

\_\_\_\_\_ April 25, 2018  
Date Date