



DAS Use Only	
Proposal No.	

DAS Apprenticeship Expansion, Equity, and Innovation (SAEEI) Grant PY 2021-25					
Funding					
Requested Funding \$			Total Project Amount: \$		
Amount of Match (Optional) - Cash or in/kind match)*: \$					
Organization (applicant) Name					
Address					
City & Zip Code					
County					
Designated Contact Person and Title			☐ Mr. or ☐ Ms.		
Telephone		Fax		E-mail	
Type of Organization (Check One)	☐ Local Workforce Development Board		☐ Private for Profit		☐ Private Non- Profit
	☐ Education Agency		☐ Other (Describe)		
IRS Tax ID Number		California Tax ID Number			
DUNS Number					
Proposal Title:					
Regions Served:					
Approval of Authorized Representative (Submit two original signature copies)					
Name:					
Title:			Signature		Date