# Minnesota Dual Training Grant

# Application Document B**Training Provider Selection**

Applicant Name (Employer or Organization):

## Step 1: Outline criteria for selecting training provider(s) for related instruction.

Directions (delete before submitting): Applicant determines criteria. Some examples may include competencies, cost, location, and format of delivery).

## Step 2: List quotes or bids from training providers.

 Directions (delete before submitting): Must submit at least three verbal quotes from training providers or targeted vendors.

1. [Related Instruction Training Provider]
2. [Date of Quote]
3. [Mode of Communication]
4. [Ability to meet Criteria]
5. [Other Notes]
6. [Related Instruction Training Provider]
7. [Date of Quote]
8. [Mode of Communication]
9. [Ability to meet Criteria]
10. [Other Notes]
11. [Related Instruction Training Provider]
12. [Date of Quote]
13. [Mode of Communication]
14. [Ability to meet Criteria]
15. [Other Notes]

## Step 3 (Part I): List two or more people who were part of the decision-making group for reviewing quotes and contributing to the final decision.

1. [Name]
2. [Title]
3. [Name]
4. [Title]

## Step 3 (Part II): List the final selection of training providers.

1. [Training Provider]
	1. [Industry]: [Occupation]