**WIOA Adult and Dislocated Worker Program**

**On-the-Job-Training (OJT) Skill Gap Analysis (SGA)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employer: |  | | | | |
| Address: |  | | | | |
| City: |  | State: |  | Zip: |  |

|  |  |
| --- | --- |
| OJT Participant Name: |  |
| Has this Participant worked previously for this Employer?  No  Yes (Explain below)  List Position, Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Is this participant related to the employer or other employees?  No  Yes (Explain below)  List Relative(s) Position(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Job Title: |  | Occupation: | |  | | |
| Job Zone: |  | Hours: |  | | Status: |  |

**Directions:** Complete the table below with the following information:

1. Enter the specific and minimum required skills identified for the training plan.
2. Assess and check the appropriate skill level.
3. Attach the following required source documentation to the Skills Gap Analysis for training plan support:
   1. A current resume;
   2. Print out of the O\*NET occupation summary; to include the job zone.

|  |  |
| --- | --- |
| **Required Skills** | **Skills Level** |
|  | **Beginning**  **Intermediate**  **Skilled** |
|  | **Beginning**  **Intermediate**  **Skilled** |
|  | **Beginning**  **Intermediate**  **Skilled** |
|  | **Beginning**  **Intermediate**  **Skilled** |
|  | **Beginning**  **Intermediate**  **Skilled** |
|  | **Beginning**  **Intermediate**  **Skilled** |