



**WIOA Title I ADW and Youth Programs
On-the-Job-Training (OJT) Skill Gap Analysis (SGA)**

Employer/Business Name:			
Address:			
City:	State:	Zip:	
OJT Participant Name:			
Has this Participant worked previously for this Employer? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain below)			
List Position, Dates: _____			
Is this participant related to the employer or other employees? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain below)			
List Relative(s) Position(s): _____			

Directions: Complete the table below with the following information

Job Title:		Occupation:	
Job Zone:		Hours:	Status:

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:
 - a. A current resume;
 - b. Print out of the O*NET occupation summary; to include the job zone.

Required Skills	Skills Level
	<input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Skilled
	<input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Skilled
	<input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Skilled
	<input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Skilled
	<input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Skilled
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