

On-the-Job Training Invoice
Training Period

Employer Name		Employer Address	
Trainee Name:			
Training Period:	Begin Date	and End Date	

Training Invoice Date Please submit invoice within 30 days of the Training Period end date.		
Gross Wages		\$
Gross wages are the wages paid to Trainee for work performed during the Training Period		
Training Payment Requested		\$
Payment requested is equal to one-fourth of the Gross Wages amount or \$2,500, whichever is less.		

I certify that the above-named Trainee has completed Training, is still employed, is expected to work at least thirty (30) hours each week, and has been paid wages owed.

Employer Signature: _____

Date:

Type/Print Name:
Title:

For Office Use Only

Gross wages and training completion have been documented by _____ by (check all that apply):

- ☐ Completed Training Plan
☐ Time sheets
☐ Payroll records

- ☐ Paycheck stubs
☐ Other (list):

Signature: _____ Date:

Organization Name:
Type/Print Name:
Title: