Skills Training Grants (STG) User Guide

Submitting Employer Training Grant (ETG) Completion Reports

Last Updated: 15 January 2025

1. Log into the <u>Skills Training Grants page</u> with your BCeID.
2. Scroll down the page to your ETG application, then click "Continue". The application's status must be "<mark>**Report Completion**</mark>".

Your applications and claims

A list of your grant application files and their status is shown below.

2254141 test (start date 2022-03-23)

B.C. Employer Training Grant – C19 Impacted Worker Training

REPORT COMPLETION   Continue

3. Click "Report Completion". **Note:** You can only submit a completion report on or after your applications Term End Date.

◂ Home

1956170 BB Glow (start date 2019-03-26)

B.C. Employer Training Grant

✔ A payment will be processed for your reimbursement.
You may view the details of your claim assessment by clicking on it below.

Claim Status

CLAIM APPROVED
Approved on

Links

View Application
View Agreement
View Participant List

Claim	Submitted	Assessed	Status	Amount	Payment ID
View Claim Assessment	2019-07-03	2019-07-09	Payment Requested	$2,195.20	ETG1956170-01

Completion Report	Due: **2019-04-25**	**NOT STARTED**	**Report Completion**

4. Fill out Page 1 of the Completion Report. If any of your participants didn't finish the program, click the "No" radial button, tick the checkboxes beside any participants that didn't finish, and select a reason from the "Reason" dropdown. Click "Continue" when done.

Completion Report

1 of 4

Participant Completion

Please report completion for your participants below. Your completion report helps the Ministry measure program effectiveness and your satisfaction for program planning and improvement. Not reporting completion may impact your ability to use the Community Workforce Response Grant again.

* INFORMATION MUST BE PROVIDED

Have all participants completed the training? *
○ Yes ◉ No

1: If any participants haven't finished, select "No".

Please select the participants that did not complete the training and the reason for not completing.

Show [10 ▼] entries   Search:

^ Select All ☐	⁞ Name of participant	⁞ Reason*
☑	Firstname Lastname	Please select a reason ▼

Dropdown options:
Please select a reason
Medical
Job-related
Attend School
Family Reasons
Move/Changed Jobs
Other (specify)

3: Pick a reason from the dropdown list.

Showing 1 to 1 of 1 e...

2: Tick the checkbox beside anybody that didn't finish.

[Cancel]   [Continue]

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5. Fill out Page 2 of the Completion Report. If any of your participants weren't employed by you at the end of the program, click the "No" radial button, tick the checkboxes beside any participants that weren't employed, and select a reason from the "Reason" dropdown. Click "Continue" when done.

Completion Report

Step 2 of 4

Participant Employment

* INFORMATION MUST BE PROVIDED

Were all participants employed by you at the end of training? *
○ Yes ◉ No

1: If any participants weren't employed by end of training, select "No".

Please select the participants that were not employed by you at the end of training and the reason.

Show [10 ▼] entries   Search:

^ Select All ☐	⁞ Name of participant	⁞ Reason
☑	Firstname Lastname	Please select a reason ▼

Dropdown options:
Please select a reason
Participant was laid off (due to lack of work)
Participant was dismissed from the job (fired)
Participant quit the job
Participant found a job elsewhere
Participant moved away
Participant returned to school
Participant left for personal reasons
Other (specify)

3: Pick a reason from the dropdown list.

Showing 1 to 1 of 1...   ...ous [1] Next

2: Tick the checkbox beside anybody that wasn't employed.

[Cancel]   [Back]   [Continue]

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6. Fill out Page 3 of the Completion Report. If all participants had the same outcome, choose an option from the "If the same for all participants" dropdown list. Otherwise, choose reasons for each participant from their dropdown lists. Click "Continue" when done.

Completion Report

Step 3 of 4
Training Outcomes
* INFORMATION MUST BE PROVIDED

What were the important outcomes of this training for participants?

Please select the important outcomes of the training. *

If all participants had the same outcome, pick a reason from the "all participants" dropdown. You won't need to pick individual reasons for each participant.

If the same for all participants: (optional)

| Select a reason | ▼ |

Show 10 ▼ entries   Search: [   ]

▲ Name of participant	◦ Most important reason*	◦ Second most important reason	◦ Third most important reason
Firstname Lastname	Hired (new hire) ▼	Select a reason ▼	Select a reason ▼

Showing 1 to 1 of 1 entries   Previous   1   Next

| Cancel | | Back | Continue |

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7. Fill out Page 4 of the Completion Report. Respond to the survey question and click "Submit Completion Report" when done. Your completion report is now finished, and your application status will update to "**Closed**".

NOTE: you will not be able to click "Submit Completion Report" until you have entered your answer into the text box.

B.C. Employer Training Grant

Completion Report

Step 4 of 4
Employer Survey

* INFORMATION MUST BE PROVIDED

Please take a few minutes to complete the survey question. Your response will help improve future services provided by the Employer Training Grant program:

Opportunity to Provide Feedback

Do you have any suggestions on how we could improve the Employer Training Grant Program?
For example, was the website clear; was the online application easy to complete and submit; was the Eligibility Criteria clear and easy to follow? *

Write your response here!

1975 chars left

Write your answer in the provided text box up to 2000 characters.

| Cancel | | Back | **Submit Completion Report** |