



# Special Projects Program

**Guidelines &  
application for  
employers**

**Employment Development Agency**  
548 Main Street  
PO Box 1180  
Montague, PE C0A 1R0  
[www.princeedwardisland.ca](http://www.princeedwardisland.ca)

Tel: (902) 838-0910  
Fax: (902) 838-0975  
Toll-free: 1-877-407-0187

# Special Projects Program

## Guidelines for Applicants

### Introduction

The Special Projects Program assists to create innovative employment and training opportunities for targeted, unemployed Islanders. The Program is funded by the Government of Prince Edward Island and it is administered by its' Employment Development Agency.

### Objective:

- \* To provide employment to targeted, unemployed Islanders in projects not likely to occur without the Program's assistance;
- \* To enhance the employment skills of unemployed Islanders;
- \* To provide assistance to community groups to enable them to carry out projects that benefit the local community;
- \* To provide assistance to eligible organizations to stimulate long-term employment opportunities for Islanders.

### Who Can Apply?

All non-profit groups registered in Prince Edward Island, municipal governments and Provincial departments and agencies.

### Project Eligibility

All types of proposals will be considered; however, preference will be given to projects which contribute to long-term community development, and/or provide an opportunity for the client to gain permanent employment. Projects should promote skills development for its workers.

Projects previously funded under this or any other federal or provincial employment programs will be reconsidered on their past performance.

### Project Duration

Projects can begin at anytime but, must conclude by March 31 of the fiscal year approved. Positions can have varying start dates and are normally 12-15 consecutive weeks, depending on geographic region.

### Employee Eligibility and Selection

Targeted age group for the program is 30+ years of age and employees must be unemployed, exhausted or about to exhaust their Employment Insurance, have difficulty securing employment in the private sector and demonstrate need. Employees may be required to provide documentation to demonstrate need.

Employees must be residents of Prince Edward Island, eligible to work in Canada and registered with the Jobs Registry of the Employment Development Agency.

### Application Process

Proposals will be assessed against the Program's criteria. Projects will be funded pending the availability of funds and proportional to regional social dependency rates. Final approval is vested with the Agency.

**Note: Projects cannot begin prior to approval nor can positions be filled or refilled without prior permission.**

### Funding

Each approved position will be funded at the PEI minimum hourly wage rate plus 4% vacation pay for up to 40 hours per week.

Project supervisors receive an additional 5.56 percent per hour plus 4% vacation pay for up to 40 hours per week.

Project sponsors may "top-up" the hourly wage rates paid to its' employees using their own resources.

Funding assistance at the above rates will normally be provided for 12-15 consecutive weeks, depending on geographic region.

**The Program will provide for the cost of the employer's share of employee benefits, such as; EI, CPP and Workers' Compensation premiums. The Program does not provide for non-wage related costs, such as; materials, supplies, rentals, travel or telephone.**

### Claim Procedure

Projects receive 80% of approved funds at the beginning. At completion, the remaining 20% is calculated and released upon the Employment Development Agency's receipt of the following:

- Employee payroll records;
- Workers' Compensation coverage;
- Record of Employment/other acceptable method of payment;
- Employee evaluation report; and
- Project summary report.

### Application Forms

An application accompanies these guidelines. Additional employer guidelines and applications are available from:

**PEI Employment Development Agency,  
548 Main Street, PO Box 1180,  
Montague, PEI C0A 1R0  
Tel: 902-838-0910 Fax: 902-838-0975  
Toll-free: 1-877-407-0187  
Or online at [www.princeedwardisland.ca](http://www.princeedwardisland.ca)**

Forms are also available at the following Access PEI locations:

Employees are selected from referrals provided by the Employment Development Agency. The Employment Development Agency may refer workers in greatest need who meet the eligibility criteria. Employees are normally eligible for one placement per fiscal year.

	(902)		(902)
Alberton	853-8622	Souris	687-7000
Charlottetown	368-5200	Summerside	888-8000
Montague	838-0600	Tignish	882-7351
O'Leary	859-8800	Wellington	854-7250

# Application for Special Projects Program or Job Creation Program

Date Received

Project #: \_\_\_\_\_

District #: \_\_\_\_\_

SPP  JCP

**Please read the guidelines before completing this application. This application can also be completed online or downloaded as a PDF form at [www.princeedwardisland.ca](http://www.princeedwardisland.ca).**

Personal information on this form is collected under section 31(c) of the Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c. F-15.01 as it relates directly to and is necessary for the administration of the PEI Employment Development Agency's programs and will be used for determining program eligibility and maintaining program data for statistical purposes. If you have any questions about this collection of personal information, you may contact the Director of the PEI Employment Development Agency, 548 Main Street, PO Box 1180, Montague, PE, C0A 1R0, Telephone (902) 838-0910.

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*Above line is for office use.*

## PART I – APPLICANT INFORMATION

Are you interested in having an Employer account created for you on WorkPEI.ca on your behalf?  Yes  No  Already a Member

(If 'Yes', your account will be confirmed via email. Please ensure your email address is listed below.)

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Civic Address \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Revenue Canada Payroll # \_\_\_\_\_ Business Name Registry # \_\_\_\_\_ WCB # \_\_\_\_\_

Contact Name (Primary) \_\_\_\_\_ Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Contact Name (Alternate) \_\_\_\_\_ Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

## PART II – PROJECT DESCRIPTION

A. State the name of your project. (40 characters maximum)

\_\_\_\_\_

B. State the objective(s) or anticipated results of your proposal.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. Outline the activities planned to meet the objective(s).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. When will your project operate: Start Date \_\_\_\_\_mm/dd/yy Finish Date \_\_\_\_\_mm/dd/yy

\* Payroll operates from Sunday to Saturday. Normally you would start on Monday and finish on Friday.

E. List position(s) required to carry out the project by position title, start and finish dates and duration.

Position Title	Start Date mm/dd/yy	Finish Date mm/dd/yy	Weeks	THIS COLUMN FOR OFFICE USE ONLY
1.				
2.				
3.				
4.				
5.				
6.				
<b>Total Number of Position Weeks:</b>				

F. State the preferred education/skill/work experience for each position above.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

G. Is your project a new initiative? If not, explain why the project is being revived.

\_\_\_\_\_

H. Was your project proposal previously funded through a government program? If so, indicate the name of the program and attach a project summary of activities carried out.

\_\_\_\_\_  
\_\_\_\_\_

I. What long-term benefits will be derived from your proposed project?

\_\_\_\_\_  
\_\_\_\_\_

J. Please calculate the amount of funds your project will require.

Total Number of Position Weeks	X	X	=	
(From Section E)		(Minimum wage + 4% Vacation Pay)		(Funds Requested)
(Hours/Week)				
(Funds Requested)				
Total Number of Position Weeks (Supervisor)	X	X	=	
(From Section E)		(Minimum wage + 5.56%+4% Vac. Pay)		(Funds Requested)
(Hours/Week)				
(Funds Requested)				

Add: Workers Compensation and Employer's share of wage expenses (10.5%) = \_\_\_\_\_

Total Funding Requested = \_\_\_\_\_

**PART III – DECLARATION**

I have read and fully understand the conditions of this application under the Special Projects Program. I certify that the statements contained in this application and any attachments are to the best of my knowledge true and correct.

Employer's Signature	Name (please print)	Position	Date
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