Application and Recommendation Form

Application Intake Process

• The Skills Strategy Equipment Enhancement Fund (SSEEF) Application and Recommendation Form can be completed electronically and submitted as an electronic form. Do not attempt to complete the form in a web browser as doing so will limit the functionality of the form. Download the application form to your digital device and complete it using Adobe Acrobat Reader. A free copy of Adobe Acrobat Reader can be downloaded at https://get.adobe.com/reader/.

For further assistance with completing the form and including electronic signatures, see <u>Steps for Completing</u> and <u>Submitting the Form</u>.

- This form has targeted questions with limited space for answers, allowing for a streamlined and concise response.
- Please limit one (1) application per program or cluster with one (1) to three (3) equipment requests per application.
- Please complete a new form for each request. Do not re-use old applications, or copy and paste from other applications.
- Incomplete SSEEF applications will not be processed.
- Schools are to submit completed and signed SSEEF applications to their respective school divisions for review and recommendation.
- Each SSEEF application must include three (3) certified quotes from each supplier or company for equipment purchases and installation (where applicable); quotes from website links will not be accepted. Please indicate the preferred quote on the application form.

Application Submission Instructions

School divisions are being asked to

- · review applications submitted by your schools
- prioritize the applications
- recommend up to a maximum of five (5) applications which meet the *Application Criteria and Guidelines* document by submitting them, along with the certified quotes as separate attachments, **by email to tve@gov.mb.ca**
- notify your schools regarding which applications were and were not recommended and submitted to Manitoba Education and Early Childhood Learning
- submit SSEEF application(s) by June 18, 2025

Larger school divisions offering more than ten (10) full Technical Vocational Education clusters may contact the Senior Years Technology Education Program Unit (contact information below), if they wish to discuss the five (5) application limit.

For information about Apprenticeship or to set up an assessment to ensure your trades program will meet accreditation requirements, please contact Yvonne Hansen, Accreditation Coordinator, Apprenticeship Manitoba, at yvonne.hansen@gov.mb.ca, at 204-945-1837 or, toll-free, at 1-866-332-5077, request extension 1837, or at apprenticeship@gov.mb.ca.

For additional information or assistance in preparing your SSEEF application, please contact the Senior Years Technology Education Program Unit at 204-945-1857 or, toll-free, at 1-800-282-8069, request extension 1857, or at tve@gov.mb.ca.

2025/2026 Skills Strategy Equipment Enhancement Fund School Division Application and Recommendation Form



All applications must be recommended and submitted by school divisions (maximum of five [5]). Please complete all fields and include three (3) quotes for each item. Incomplete submissions will not be processed.

For office use only
Application Reference: # _____

Applications should be completed and submitted electronically.

School Division Information	
School Division	
Contact Person	Title
Telephone	Email
School Information	
School	
Principal	
Telephone	Email
Project Proposal (One application per program or cluster with	no more than three equipment items per application.)
Choose Approved Program (IA or TVE):	Equipment Requested: (Request one to three items below.)
Industrial Arts	Item 1:
OR	
Technical Ventional	Item 2:
Vocational	Item 3:
Program Contact	
Position	Total Amount Requested
Email	(Canadian funds, including applicable taxes and additional costs)

Equipment Requested—Please list equipment requests below.

Submit three (3) certified quotes for each item, along with your application, by email. *Quotes from website links will not be accepted.* Costs identified on this form and on quotes must be in **Canadian funds** and include all applicable taxes.

Please list items in order of priority with your preferred quote first.

Item (Priority #1)	Name of Equipment
, ,	1 1

Supplier Quotes (listed in order of preference)	Cost—Including Taxes (Canadian funds only)	Name of Item on Quote	Indicate delivery/installation date based on order date and when equipment will be used for instruction.

Item (Priority #2)	Name of Equipment

	Supplier Quotes (listed in order of preference)	Cost—Including Taxes (Canadian funds only)	Name of Item on Quote	Indicate delivery/installation date based on order date and when equipment will be used for instruction.
L				

Item (Priority	/ #3)
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Name of Equipment _____

Supplier Quotes (listed in order of preference)	Cost—Including Taxes (Canadian funds only)	Name of Item on Quote	Indicate delivery/installation date based on order date and when equipment will be used for instruction.

New Equipment

Will the new equipment be used to **upgrade** or **expand** the existing program?

Please specify what will happen to the old equipment from your program (check all that apply).

Upgrade Existing Program

Expand Existing Program

Old Equipment Use (If upgrading, check all that apply.)

Old equipment will support other programs		
CIA BAHIAMBAH WIII SHAAAH AHABI AKAATAMS		

Which program(s)? _____

Old equipment will remain in program

Other

Please specify (e.g., disposal) _____

Additional Costs Associated with Equipment Requested

Additional costs associated with equipment requests such as delivery charges, installation costs, and set-up costs (congruent with safety and building code requirements; i.e., Canadian Standard Association approved, Manitoba Hydro requirements, ventilation requirements, etc.) may or may not be covered through SSEEF. **The extra costs must be clearly identified in the quotes chart below and are required.** Consumable operating costs are not eligible for support.

To ensure divisional support is in place, I acknowledge by signing on the line that additional costs associated with the purchase of this equipment may or may not be covered through SSEEF and the school division will take responsibility for these costs. For assistance with electronic signatures, see Steps for Completing and Submitting the Form.

Principal's Signature	School Division Contact	ct Person's Signature	
Additional Equipment/Cost Description		Additional Costs	Quote Included
1.			
2.			
3.			
Other:			

Program Impacts
Describe the impacts that this equipment will have on your program. For example, describe what your students will learn by using this equipment and how they will assist students' awareness of emerging technology. List the most relevant general learning outcomes (GLOs) and/or specific learning outcomes (SLOs) from the curriculum. Next to each one (maximum of 5), describe how this equipment will be used for learning experiences.
Demonstrated Educational Need
Provide evidence of proposed equipment need(s) to support program currency, relevance, enrolment, regional labour market needs. Is this equipment currently used in the industry? If yes, how?

Describe any consultation that you have conducted with industry, business, or post-secondary partners to determine the need for this new equipment. Indicate if the program has an advisory committee. Partnerships Describe any industry, business, and/or post-secondary program partnerships, including the High School Apprenticeship Program (HSAP). If your program is a trade, please state whether it is accredited by Apprenticeship Manitoba for Level 1.
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Coherence
Indicate any relationship between this programming and other on-site or divisional programming or interdisciplinary activities.
Additional Comments
Provide any additional relevant program information.

School Recommendation (Principal) I hereby recommend this submission and application for consideration for the 2025/2026 Skills Strategy Equipment Enhancement Fund. For assistance with electronic signatures, see Steps for Completing and Submitting the Form .	
Ciamatura	
Signature	Title
School Division Recommendation (Superintendent or S	ecretary-Treasurer)
School divisions are limited to recommending a maximum of five (5) Education and Early Childhood Learning for additional submissions.	
I hereby recommend this submission and application for consistence with electronic signatures, see Steps for Commons.	deration for the 2025/2026 Skills Strategy Equipment Enhancement pleting and Submitting the Form.
Additional Comments or Notes:	
Signature	Title

Checklist

Please review your application for any omissions prior to submission. A checklist has been provided for reference.

To submit, attach the application form and certified quotes separately in an email to tve@gov.mb.ca.

If you have any questions or require assistance with completing the application, please contact the Senior Years Technology Education Program Unit at 204-945-1857, or toll-free at 1-800-282-8069, request extension 1857, or at tve@gov.mb.ca.

Include the following:	Complete
School Division Information	
School Information	
Project Proposal	
Equipment Requested (with Quotes)	
New Equipment	
Old Equipment Use	
Additional Costs Associated with Equipment Requested (with Quotes)	
School Principal and School Division Signatures	
Program Impacts	
Demonstrated Educational Need	
Consultation	
Partnerships	
Coherence	
Additional Comments	
School Recommendation and Signature	
School Division Recommendation and Signature	