EMPLOYERS' TRAINING RESOURCE

Date:

To: ETPL Analyst
Employers' Training Resource
2001 28th Street
Bakersfield, CA 93301-1924

Fax: (661) 336-6858
Email: whitakerk@co.kern.ca.us

Re: Program Cost Description Form

Provider Name:
Program Name:
Effective Date:

Total hours: Total Program Cost: $

(If using as an electronic form use TAB key or arrows)

Tuition $		Fees $		Expenses $	
Item	Amount	Item	Amount	Item	Amount
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$
	$		$		$

Grants/loans/stipends $
Please provide a description on how this is applied to the client's total cost.