



206 West State St. Trenton, NJ 08608
Phone: 609-394-6730 800.LBA.0076
Fax: 609-394-6732

2017 Grant Training Registration Form
Please complete this form and send back to NJLBA

Training Class: TAM () English Serv Safe () Spanish Serv Safe () Challenges Facing Today Licensees ()

First Choice Date: _____ Time: _____ Second Choice Date: _____ Time: _____

Current Active NJLBA Membership Yes _____ No _____ (If no please call (609) 394-6730)

Corporate Name t/a: _____

License Address: _____

County: _____

Number of Employees: _____ Years and Months in Business: Yrs ____ MM ____

Average Percentage Employee Turnover Rate _____% (estimate)

Contact Name/ Title: _____

Contacts Email: _____

*Tax ID No.# (FEIN): _____ *Liquor License No: _____ - _____ - _____

*Number of Attendees: _____ Classes with less than 10 attendees will be canceled

Class Location if not License Premise: _____

Phone Number: () _____ - _____

You must be TAX cleared prior to training

As a requirement of the New Jersey Department of Labor the job title and hourly wage including tips form attached is required to be submitted prior to taking any grant training classes.

Please return these forms via email at RoyceSaunders@njlba.org or fax to 609-394-6732. Contact Royce Saunders at 609-394-6730 with any questions.

*Free Training is available for all NJLBA members through Department of Labor Grant.
A requirement of the NJ Department of Labor all employees must be paid when they attend any training classes under this grant.*

**Required Field*