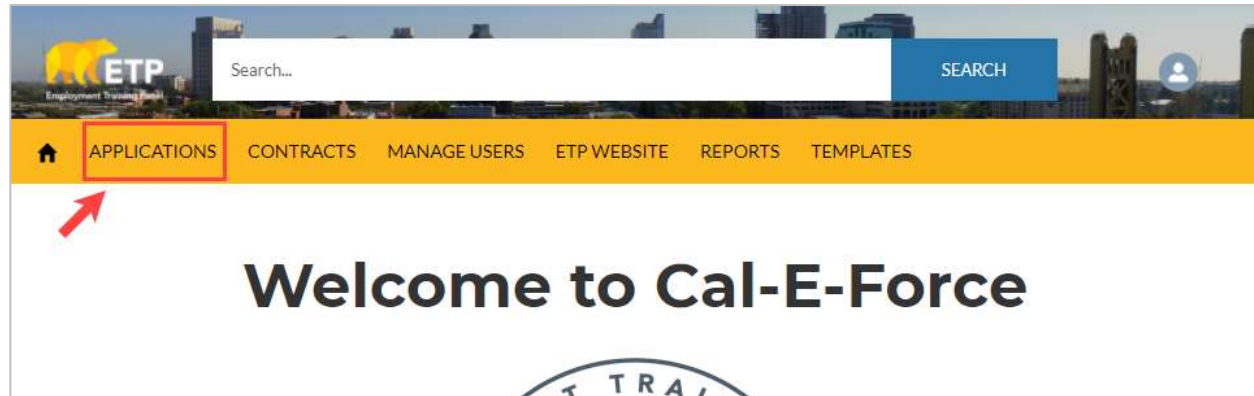


# CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

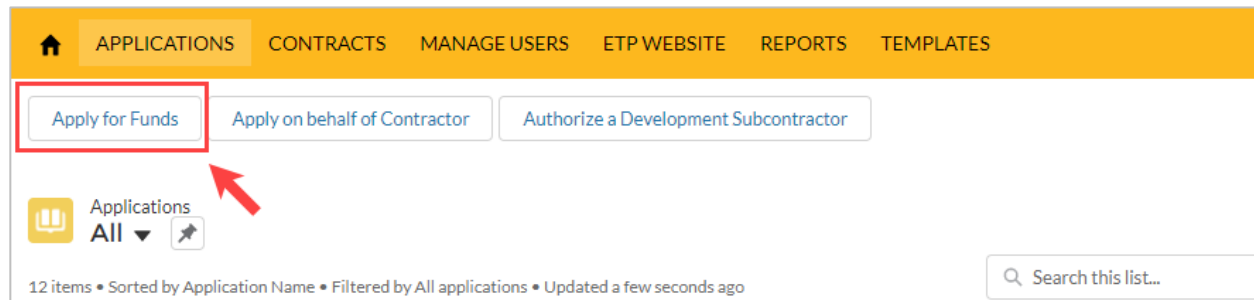
1. At the top of the landing page, select the **Applications** button on the navigation bar



2. Select the **Apply for funds** button

*Note: If you are a Development Subcontractor, select **Apply on behalf of Contractor***

*If needing to authorize a subcontractor to apply on your behalf, please see [Authorizing a Development Subcontractor](#) guide*



## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

3. Select the radio button for **Multiple Employer (MEC)**, and select your **MEC category**, and then select the **Next** button

*\*Note: The application saves a draft every time the next button is selected. You may exit and return to complete the application later. To save the information on the page you are currently on, select **Next** and then exit*

*\*Anytime there is an "i" in a circle like there is for California Employer Account Number – you can click on the symbol to view associated help text*

The screenshot shows a form with a progress bar at the top. The first step is selected, and the second step is active. The question is: "Will this be a Single Employer or a Multiple Employer Contract?" with an information icon (i) to its right. Below the question are two radio buttons: "Single Employer" and "Multiple Employer (MEC)". The "Multiple Employer (MEC)" button is selected. Below this is another question: "Choose the MEC category that applies:" with seven radio button options: "Professional Association (Chambers of Commerce)", "Trade Association", "Joint Apprenticeship Training Committee (JATC)/ Unilateral Apprenticeship Committee (UAC)", "Economic Development Corporation", "Public or Private Training Agency", "Workforce Development Board", and "Workforce Innovation & Opportunity Act (WIOA) Grant Recipient or WIOA Admin". The last option is selected. A red arrow points from the "Multiple Employer (MEC)" radio button to a help box on the right. The help box has a title bar with an 'X' icon and contains two sections: "Single Employer: an organization subject to the Unemployment Insurance tax and having a California Employer Account Number (CEAN) with a prefix of 699 or lower." and "Multiple Employer: a group of employers, training agency, or eligible contractor on behalf of multiple participating employers."

Will this be a Single Employer or a Multiple Employer Contract? ⓘ

☐ Single Employer

☒ Multiple Employer (MEC)

Choose the MEC category that applies:

☐ Professional Association (Chambers of Commerce)

☐ Trade Association

☐ Joint Apprenticeship Training Committee (JATC)/ Unilateral Apprenticeship Committee (UAC)

☐ Economic Development Corporation

☐ Public or Private Training Agency

☐ Workforce Development Board

☒ Workforce Innovation & Opportunity Act (WIOA) Grant Recipient or WIOA Admin

Single Employer: an organization subject to the Unemployment Insurance tax and having a California Employer Account Number (CEAN) with a prefix of 699 or lower.

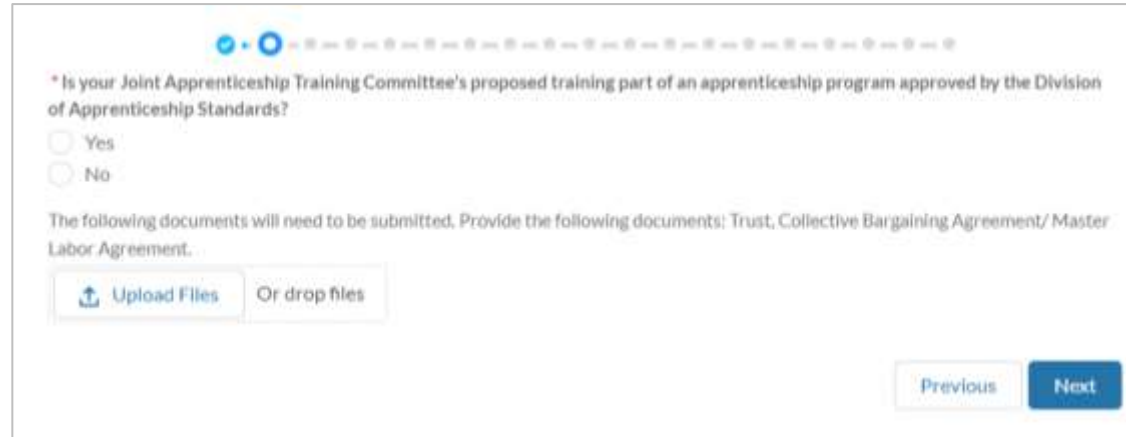
Multiple Employer: a group of employers, training agency, or eligible contractor on behalf of multiple participating employers.

# CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS

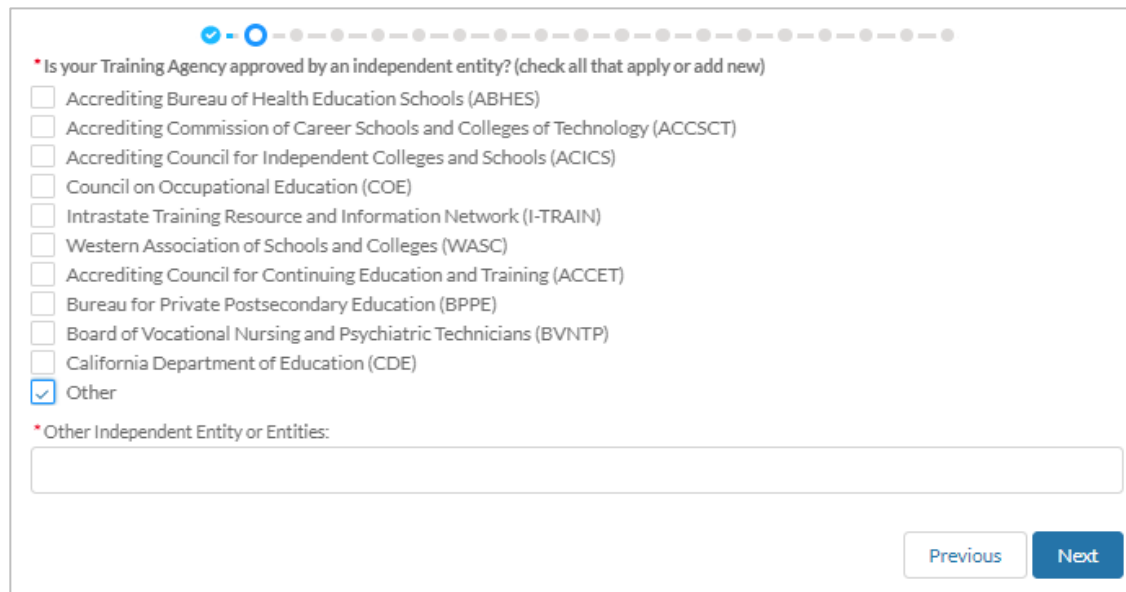
## MULTIPLE EMPLOYER

4. If Joint Apprenticeship Training Committee (JATC)/ Unilateral Apprenticeship Committee (UAC) or Public or Private Training Agency is selected as the MEC category, Page 2 will be additional questions related to that MEC entity

***\*For JATC only:** To upload a copy of the JATC Agreement, select the **Upload File** button on the form*



The screenshot shows the first question on the form: "Is your Joint Apprenticeship Training Committee's proposed training part of an apprenticeship program approved by the Division of Apprenticeship Standards?". It has two radio button options: "Yes" and "No". Below the options, it states: "The following documents will need to be submitted, Provide the following documents: Trust, Collective Bargaining Agreement/ Master Labor Agreement." There is an "Upload Files" button with a file icon and a text input field "Or drop files". At the bottom right are "Previous" and "Next" buttons.



The screenshot shows the second question on the form: "Is your Training Agency approved by an independent entity? (check all that apply or add new)". It lists several accrediting bodies with checkboxes: ABHES, ACCSCT, ACICS, COE, I-TRAIN, WASC, ACCET, BPPE, BVNTP, and CDE. The "Other" option is checked. Below the list is a text input field for "Other Independent Entity or Entities:". At the bottom right are "Previous" and "Next" buttons.

# CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

5. Fill out the required information (marked with a red asterisk) on Page 4 of the Application. Select the **Next** button when finished with this page

*\*Email, Contact Name, and Company will auto-populate, verify accuracy before moving on, edit if necessary*

*\*Address may prepopulate, if blank – enter in address information.*

*\*Phone Number should be entered in as numbers only (no special characters)*

1		2	
<b>Primary Contact Email</b> <input type="text" value="test.test@etp.ca.gov.invalid"/>		<b>Physical Address</b> * Street <input type="text" value="test"/>	
* Last Name <input type="text" value="Contact 1+"/>		* City <input type="text" value="test"/>	
* First Name <input type="text" value="test"/>		State CA	
* Title <input type="text" value="test"/>		* Zip/Postal Code <input type="text" value="95814"/>	
* Company or Entity Full Legal Name <input type="text" value="Account 1"/>		<b>Mailing Address</b>	
Doing Business As (DBA) <input type="text" value="Test 123"/>		* Street <input type="text" value="99, Winthrop Avenue, Apt - C"/>	
<b>Signatory Contact Details</b>		* City <input type="text" value="test"/>	
First Name <input type="text"/>		* State <input type="text" value="NY"/>	
Last Name <input type="text"/>		* Zip/Postal Code <input type="text" value="12203"/>	
Title <input type="text"/>		* Phone Number <input type="text" value="1234564567"/>	
Email <input type="text" value="you@example.com"/>		Company / Organization Website (eg: https://www.etp.ca.gov) <input type="text"/>	
		<input type="button" value="Previous"/> <input type="button" value="Next"/>	

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

6. Fill out the required information (*marked with a red asterisk*) on Page 5: **Company Information**. Select the **Next** button when finished with this page

[illegible]

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

7. Fill out any applicable information on Page 6: **Subcontractor Information**. Leave this page **blank** if not applicable.

To enter in any Training Subcontractor information, select **Add Training Subcontractor**. Fill out the information of the training subcontractor and click **Submit**. Do this for each Training Subcontractor.

Select the **Next** button when finished with this page

*\*Note: If you are a development subcontractor applying on behalf of a contractor, your company name will pre-populate in the Development Subcontractor field*

*If a subcontractor name is entered into the dev or admin subcontractor fields, three additional fields will appear. Cost of Services, Description of Services, and Yes/No option for adding secondary subcontractor*

The screenshot displays the 'Subcontractor Information' section of the application. It includes fields for 'Development Subcontractor' and 'Administrative Subcontractor'. A question asks if there will be any Training Subcontractor(s) assisting with training, with radio button options for 'Yes' (selected), 'No', and 'Unsure/To Be Determined'. Below this is a table for 'Training Subcontractor(s)' with columns for Subcontractor Name, City, State, and Cost of Service. A red arrow points from the '+ Add Training Subcontractor' button to a modal window titled 'New Training Subcontractor'. This modal contains fields for Application (pre-filled with APP-20214100), Subcontractor Name, City, State (a dropdown menu currently showing '--None--'), Estimated Cost of Service, and Description of Service. 'Cancel' and 'Submit' buttons are at the bottom right of the modal. The main form also has 'Previous' and 'Next' buttons at the bottom.


## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

8. Fill out the required information (marked with a red asterisk) on Page 7 of the application. Provide the **Estimated Number of Individuals** to be trained.

Upload the **Participating Employer Demand File** by selecting the **Upload Files** button

Check all industries that pertain to your application.


Select the **Next** button when finished with this page




\* Provide the estimated number of individuals to be trained:

**Participating Employer Demand - Upload**  
Please use the [template](#) provided by ETP and upload as a Microsoft Word file (.doc and .docx). This template can also be found in the [Cal-E-Force Templates Menu](#).

Participating Employer Demand Document

 Or drop files

**Industries**

Check all industries you plan to have participate with your core list of Participating Employers and enter any not listed here: 

- ☐ Accommodation and Food Services
- ☐ Administrative and Support and Waste Management and Remediation Services
- ☐ Agriculture, Forestry, Fishing and Hunting
- ☐ Arts, Entertainment, and Recreation
- ☐ Construction
- ☐ Finance and Insurance
- ☐ Health Care and Social Assistance
- ☐ Information
- ☐ Manufacturing
- ☐ Mining, Quarrying, and Oil and Gas Extraction
- ☐ Other Services (except Public Administration)
- ☐ Professional, Scientific, and Technical Services
- ☐ Transportation and Warehousing
- ☐ Utilities
- ☐ Wholesale Trade

[Previous](#) [Next](#)

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

- \*One conditional question appears on this screen: "Is there new equipment/technology related to training?" Based off the answer selected, additional required fields may appear*

Page 8 of 24



# CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

10. Fill out the required information (marked with a red asterisk) on Page 9: **Services and Resources**. Select the **Next** button when finished with this page

*\*One conditional question appears on this screen: "Will you be recruiting New Hire Trainees?" Based off the answer selected, additional required fields may appear*

*\*Not all questions appear in this screenshot, there are 25 total – make sure to scroll to the bottom of the page before selecting Next*

**Services and Resources**

\*Will you be recruiting New Hire Trainees  
☐ Yes  
☒ No

\*Provide local/regional occupational job outlook for training that will be provided.

\*How do you Market/Advertise your programs?  
☐ Flyers  
☐ E-mail  
☐ Trade Shows  
☐ Advertisements  
☐ Other

\*How did you customize the training to the needs of the participating employers?

\*Describe your plan for recruiting participating employers. ⓘ

\*Describe how you work with employer organizations and the name of those organizations.

\*Describe your prior history in providing incumbent worker training. ⓘ

\*Describe your plan for administering the project.

**1**

\*Will you be recruiting New Hire Trainees  
☒ Yes  
☐ No

\*Describe your plan for recruiting New Hire Trainees

\*Have you provided training and job placement services to unemployed individuals?

\*Please describe your services.

\*Describe (if any) current relationship with One-Stop Centers or other Unemployment Insurance referral sources.

\*How do you assess the trainees' skill level and what training they need? ⓘ

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

11. Fill out the required information (*marked with a red asterisk*) on Page 10: **Commitment to Training**. Select the **Next** button when finished with this page

[illegible]

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

12. Fill out the required information (marked with a red asterisk) on Page 11: **Special Categories** of the Application. Select the **Next** button when finished

*\*Three conditional questions appear on this screen: “Do you plan on training Apprentices, Journeyworkers, or Pre-Apprentices?”, “Do you plan on providing Literacy Skills training?” and “Do you plan on providing Safety Training?” Based off the answer selected, additional required fields may appear*

*\*Not all questions appear in this screenshot, there are 18 total – make sure to scroll to the bottom of the page before selecting Next*

**Special Categories**

\* Do you plan on providing Entrepreneurial training? ⓘ

☐ Yes

☐ No

\* Describe any barriers to employment that will qualify trainees ⓘ

\* Do you plan on providing CNA to LVN training? ⓘ

☐ Yes

☐ No

\* Do you plan on providing training to Ex-Offender/At-Risk Youth? ⓘ

☐ Yes

☐ No

\* Do you plan on providing training to Seasonal Workers? ⓘ

☐ Yes

☐ No

\* Do you plan on providing training to Temporary to Permanent Workers? ⓘ

☐ Yes

☐ No

\* Do you anticipate any participating employers having trainees in a Workshare program?

☐ Yes

☐ No

\* Do you plan on training Veterans?

☐ Yes

☐ No

\* Describe your plan for marketing training opportunities specifically to Veterans. Please include if you have a working relationship with any veterans organizations.



# CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS

## MULTIPLE EMPLOYER

14. Enter in the required information of the **New Occupation Form**. Select **Submit** when finished with this page

Repeat Steps 14-15 for each occupation needed to be added

*\*Note: Min and Max Wage are hourly wages*

*\*\*Note: One conditional question appears on the screen, "Are staff in this occupation represented by a collective bargaining agreement/union?" Based off the answer selected, additional required fields may appear*

*\*Not all questions appear in this screenshot, there are 17 total – make sure to scroll to the bottom of the page before selecting Next*

### New Occupation

* Occupation Name	* Estimated Number of Training Hours
<input type="text"/>	<input type="text"/>
* Min Wage	* Current hourly wage at enrollment
<input type="text"/>	<input type="text"/>
* Max Wage	* Estimated hourly wage at Retention end
<input type="text"/>	<input type="text"/>

### Wage Breakdown

For this particular occupation trainee population, please identify how many trainees for this occupation fall into each wage bracket below (if there are no trainees in this occupation in a particular wage bracket enter 0)

* Under \$15 Hourly Wage
<input type="text" value="0"/>
* \$15-\$20 Hourly Wage
<input type="text" value="0"/>
* \$20.01 to \$25 Hourly Wage
<input type="text" value="0"/>
* \$25.01 and above Hourly Wage
<input type="text" value="0"/>
* Estimated Number of Trainees
<input type="text" value="0"/>

### Union Information

Are staff in this occupation represented by a collective bargaining agreement/union?

### Other Wage Information

Employer-paid Hourly Health Benefits

\* Additional Compensation Per Hour

# CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

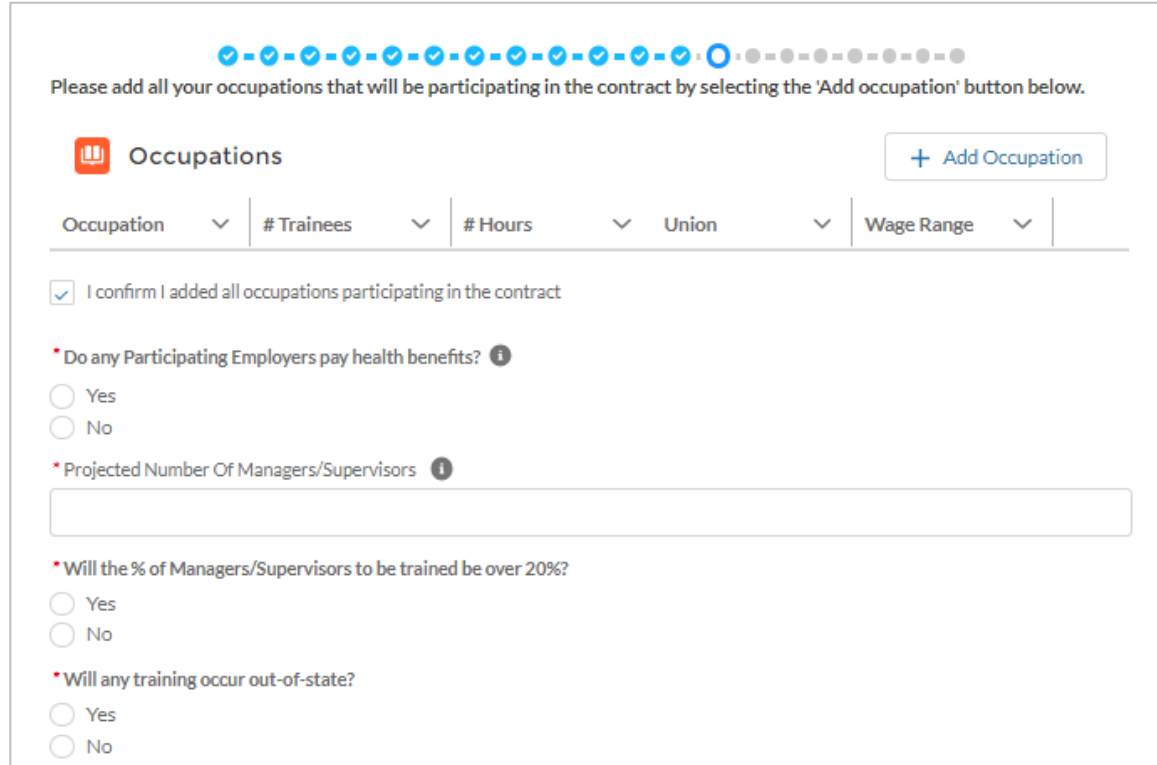
15. Confirm you have added all occupations that will be participating in the contract by selecting the required checkbox



☐ I confirm I added all occupations participating in the contract

16. Answer the remaining required fields (marked with a red asterisk) on Page 12: **Occupations**

*\*Three conditional questions appears on this screen: "Do any participating employers pay health benefits?", "Will the % of Managers/Supervisors to be trained be over 20%?" & "Will any training occur out-of-state?" Based off the answer selected, an additional justification field may appear*



Progress bar: 12 steps, step 12 is active.

Please add all your occupations that will be participating in the contract by selecting the 'Add occupation' button below.

**Occupations** + Add Occupation

Occupation	# Trainees	# Hours	Union	Wage Range
<input checked="" type="checkbox"/> I confirm I added all occupations participating in the contract				
* Do any Participating Employers pay health benefits? <span>i</span> <input type="radio"/> Yes <input type="radio"/> No				
* Projected Number Of Managers/Supervisors <span>i</span> <input type="text"/>				
* Will the % of Managers/Supervisors to be trained be over 20%? <input type="radio"/> Yes <input type="radio"/> No				
* Will any training occur out-of-state? <input type="radio"/> Yes <input type="radio"/> No				

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER


17. If one or more of the occupations have an associated union, select the **Upload Files** button to upload the required documents (Union Letter & Notice of Intent). Select the **Next** button when finished with this page


Please upload Union Letter & Notice of Intent document if any occupations added has a union trainee

For trainees covered by a collective bargaining agreement, submit signed Union Support Letter(s) on union letterhead. The Union Support letter is completed by the union to notify ETP that they agree with the proposed training project, that the union had the ability to participate in the project's development process, provide details on the occupations participating in the ETP project, and allow the union to include exceptions/limitations to allowable training in the ETP contract.

For trainees covered by a collective bargaining agreement, submit a Notice of Intent letter. The Notice of Intent letter notifies the relevant union of the proposed ETP application, provides the union details about the proposed training project, and allows the union the ability to participate in the project's development process.


Union Letter & Notice of Intent

 Upload Files Or drop files




Previous **Next**

18. On Page 13: **Training Plan**, click the **Add Training Plan** to add a training plan



Please add your training plan by selecting the 'Add Training Plan' button below

 **Training Plans**

**+ Add Training Plan**

Plan Type	Total # Hours	Rate	Est. Amount
-----------	---------------	------	-------------

Estimated Total Trainees: 0  
Estimated Total Amount: \$0.00  
(This Cost is an estimate based on the information your provided on the Training Plan(s), and is subject to ETP FY\$ caps and subject to change during the application development)

☐ I confirm I added training plans


Previous **Next**

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

19. Enter in the required information of the **New Training Plan Form**. Select **Submit** when finished with this page

Repeat Steps 19-20 for each training plan needed to be added

### New Training Plan

\* Application  
 APP-20210120 X

\* Training Plan Type  
--None-- ▼

\* Total Number of Trainees

\* Average Hours Per Trainee

Average Hours Per Trainee Justification ⓘ




## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

Confirm you have added all training plans and select the required checkbox

Select the **Next** button  
when finished with this  
page

Please add your training plan by selecting the 'Add Training Plan' button below

 **Training Plans**

[+ Add Training Plan](#)


Plan Type	Total # Hours	Rate	Est. Amount
Priority Industry N...	3,600	\$23.00	\$82,800.00

Estimated Total Trainees: 20  
Estimated Total Amount: \$82,800.00  
(This Cost is an estimate based on the information your provided on the Training Plan(s), and is subject to ETP FY\$ caps and subject to change during the application development)

☐ I confirm I added all training plans

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

21. Fill out the required information (marked with a red asterisk) on Page 14: **Employer in Kind Information**. Select the **Next** button when finished with this page



**Employer in Kind Information**


\* Trainee wages paid during training (\$) ⓘ

Other contributions to the training program in excess of ETP funding (\$):

MEC contribution – What additional services/ training not funded by ETP will be provided?

[Previous](#) [Next](#)

22. Fill out the required information (marked with a red asterisk) on Page 15: **Funding from Other Sources**. Select the **Next** button when finished with this page



**Funding from Other Sources**

\* Will you be receiving training funds from any other source?

☒ Yes  
☐ No

\* Explain other funding sources that will be received for this training program.


[Previous](#) [Next](#)

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

23. Fill out the required information (marked with a red asterisk) on Page 16: **Other Resources**. Select the **Next** button when finished with this page

**Other Resources**

\* Are you taking advantage of Enterprise Zones hiring tax credits, WIA funding, or other federal workforce incentives?

☐ Yes  ☐ No

\* Type of Funding

\* Amount of Funding (\$)

\* Are you taking advantage of Enterprise Zones hiring tax credits, WIA funding, or other federal workforce incentives?


☒ Yes ☐ No

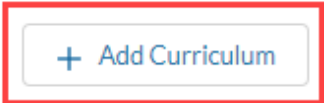
\* Give overview of any other applicable resources supporting the proposed training project.

Previous Next

24. On Page 17: **Curriculum**, click the **Add Curriculum** to add curriculum to the application

Please add your curriculum by selecting the 'Add Curriculum' button below.

 Curriculum

 + Add Curriculum

Delivery Method Training Type

☐ I confirm I added curriculum

Previous Next

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

25. Enter in the required information of the **New Curriculum Form**. Select **Submit** when finished with this page

Repeat Steps 25-26 for each delivery method/training type needed to be added

*\*When entering in CBT Class titles, include the standard number of hours for each class in parenthesis next to the class title*

*For Example: "CBT Class Title 1 (1.5 Hours)"*

### New Curriculum

\* Application

APP-20214100

\* Delivery Method

Classroom/Simulated Laboratory/E-Learning

\* Training Type

Business Skills

\* Class Titles ⓘ

Salesforce Sans

12

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class titles go here

\* Brief overview of this training

brief overview goes here

\* Select Occupations this training will be offered?

☐ Analyst

☐ Janitor

☐ Select All Occupations

Cancel

Submit

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

Additional Questions will appear below the curriculum table if CBT, Advanced Technology, or Productive Lab is chosen during curriculum entry. Answer all required fields

Select the **Next** button  
when finished with this  
page

Please add your curriculum by selecting the 'Add Curriculum' button below.

**Curriculum**

+ Add Curriculum

Delivery Method	Training Type	
Productive Laboratory	Business Skills	
Classroom/Simulated Laboratory	Computer Skills - Advanced Technology	
Computer Based Training (CBT)	Business Skills	

☐ I confirm I added curriculum

\* Provide the maximum hours of CBT training a trainee could take.

\* Higher Than Standard CBT Hours Justification:

\* Explain the need for productive laboratory (PL) training.

\* Describe the equipment/processes to be used in delivering PL training.

\* What is the Productive Lab Minimum class ratio trainer to trainees when more than one class.

1:1

Previous

Next

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

27. Fill out the required information (marked with a red asterisk) on Page 18: **Electronic Training Documentation**. Select the **Next** button when finished with this page

*\*If the question "Do you plan to use electronic training documentation to document ETP training hours" is Yes, 15 additional fields will appear on the screen below the initial question.*

*\*A Sample Trainee Record is required to be uploaded if planning to use Electronic Training Documentation for ETP hours*

Electronic Training Documentation

\* Do you currently use electronic training documentation?

☐ Yes  
☐ No

\* Do you plan to use electronic training documentation to document ETP training hours?

☒ Yes  
☐ No

\* What system(s) do you intend to use for ETP electronic record keeping purpose?

\* If only one system, is it used to document all training delivery methods for ETP purpose? If not, please identify all learning record systems used.

\* How long has the system been in use?

\* What is the name of the company that developed the software for your system?

\* Do you have a Sample Trainee Record that you can upload?

☒ Yes  
☐ No

Sample Trainee Record File

Or drop files

\* How does your system document the hours and dates of training?

\* Does your system document the full Course Title?

☐ Yes  
☐ No

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

28. Page 19 is a warning.  
Formally submit the application by clicking the **Next** button

*\*To go back to previous answers to view or edit, click **Previous***

*\*To exit and leave application In Draft status, exit the window*

Click Next to submit your application. Once submitted, you will not be able to edit your application.

Click Previous to go back through your application to review and edit prior to submission.

Previous

Next

29. Your application has been formally submitted and a reference number has been assigned. It will be reviewed on a first in, first out basis. Click the **Finish** button to exit.



You successfully submitted your application for funding to the Employment Training Panel. Your Reference Number is: 22-0456

ETP reviews applications according to the Panel's fiscal year funding priorities, and will process applications in the order they are received for each funding allocation.

Thank you for your interest in the Employment Training Panel.  
For status questions please contact [AAU\\_Status\\_Inquiry@etp.ca.gov](mailto:AAU_Status_Inquiry@etp.ca.gov).

Finish

## CAL-E-FORCE REFERENCE GUIDE: APPLYING FOR FUNDS MULTIPLE EMPLOYER

30. Once you select **Finish** you will be taken to the Application page as displayed

Application

APP-20213373

+ Follow

Edit Application

Printable View

Reference Number	Account	CEAN	Status
22-0884	<a href="#">Account 1</a>	999-9999	Submitted

▼ Application Type

Application Name	Status
APP-20213373	Submitted
Reference Number	Sub Status
22-0884	
Contract Type	Requested Funding
SE	CORE

31. Scrolling down you will be able to access a copy of your application in the **Notes & Attachment**

Files (0)

Upload Files

Upload Files

Or drop files

Notes & Attachments (1)

Upload Files

22-0884 Submitted Application.pdf

Feb 15, 2023 • Attachment

View All