

## 2023 TOOL GRANT PROGRAM for New Service Technicians



### GUIDELINES AND TECHNICIAN QUALIFICATIONS:

- **ONE PER DEALERSHIP ROOFTOP, PER YEAR** - one tool grant per new CT franchised car or truck dealership rooftop, identifiable by a separate street address, per calendar year.
- **MINIMUM 90 DAYS EMPLOYMENT, NOT LONGER THAN ONE YEAR** - New technician must be employed for at least 90 days before applying, must have started on or after January 1, 2022, and this must be the first-time the technician is employed by a franchised automotive dealership.
- **APPLICATIONS MUST BE SUBMITTED TO CARA BY DEALERSHIP MANAGEMENT** -Service Manager or Dealership Management must approve the technician and submit the application to CARA.
- **TOOL CHOICE AND OWNERSHIP** - Technician has choice of tool brand. The tools will be identified by the dealership and an itemized receipt submitted to CARA. If technician leaves employment in less than two years the tools will stay with the dealership - if technician leaves after two years, they retain ownership of tools.

MAXIMUM NUMBER OF TOOL GRANTS MAY VARY PER YEAR  
AND ARE AWARDED ON A FIRST RECEIVED, FIRST AWARDED BASIS

### SECTION ONE: Must be Completed by Technician

#### TECHNICIAN INFORMATION

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Primary Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Name of High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Are you a student or graduate of a technician-training school/program?\* Check one: ☐ Yes ☐ No

If yes, name of school/program and grad date: \_\_\_\_\_

\*Being a graduate of a technician training school/program is not a requirement of the CARA Tool Grant Program

Signature: (typed signature is acceptable) \_\_\_\_\_

**Signature acknowledges that tech will complete a W-9 and receive a 1099 for tax purposes, if a tool grant is awarded.**

## SECTION TWO: Must be Completed by Service Manager or other Dealership Management

### DEALERSHIP INFORMATION

Technician Date of Hire: \_\_\_\_\_

Name of Dealership: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date Application Completed: \_\_\_\_\_

### EMPLOYMENT VERIFICATION

I verify that \_\_\_\_\_ (Technician's Name)  
has completed 90 days of full-time employment as a technician, at \_\_\_\_\_  
\_\_\_\_\_ (Dealership Name) and I recommend this  
technician as a qualified applicant for the CARA \$1,000 Tool Grant Program.

Service Manager or Management Printed Name: \_\_\_\_\_

Signature: *(signature may be typed)* \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Technician's Tool Preference - Check One: ☐ Tool Truck ☐ Retail Store Gift Card

#### **REQUIRED INFORMATION, IF TOOL TRUCK:**

- Brand of Tools \_\_\_\_\_
- Name of Tool Truck Owner \_\_\_\_\_
- Address of Tool Truck Owner \_\_\_\_\_

#### **REQUIRED INFORMATION, IF RETAIL STORE GIFT CARD - CHECK ONE:**

☐ Amazon ☐ Harbor Freight ☐ Home Depot ☐ Lowe's

### APPLICATION SUBMISSION:

***Applications MUST be submitted by  
Service Manager or other Dealership Management***

- Complete fillable pdf by typing information in highlighted boxes, then save and email to [amunley@ctcar.org](mailto:amunley@ctcar.org)  
-OR-
- Print document, handwritten information, then scan and email to [amunley@ctcar.org](mailto:amunley@ctcar.org)

