

POLICY - Requirements for Initial Eligibility and Continued Eligibility of Training Providers and Training Programs under WIOA Title I

A Training Provider must utilize the following guidance when applying for initial eligibility or continued eligibility of a training program. Only eligible training providers may submit an application for training programs. It is the local workforce innovation area's (LWIOA) responsibility to inform and assist training providers in completing these steps to ensure they properly complete the application for eligibility.

- A. Once the LWIOA has provided the training provider with the web address to the Illinois Workforce Development System (IWDS) (<http://iwds.state.il.us>), a user ID for the primary contact of the training provider and a temporary password will be emailed to the contact listed on the training provider. The training provider must then log into the system to begin adding additional locations, additional contacts, and/or training programs
- B. The LWIOA must verify that the training provider has entered all of the required data elements for each training program for which they are applying. Data elements are entered on the "Training Program Basic Information" record in IWDS. The following data elements must be verified:

(Note: Items with * are mandatory items, items with ** are mandatory items that prompt an automatic eligibility determination if changed.)

- 1. Program Name should match the name found in a course catalog for the training provider, if published.
 - a. Program Description (detail should be provided to assist the LWIOA in determining the proper classification of Instruction Program Code (CIP));
 - b. 6-digit CIP code;
 - c. O*Net code(s) that identifies the occupation the eligible training program leads to;
 - d. Website link to additional program information
- 2. Is this a credit hour program? If yes, how many credit hours for program completion? What is the curriculum code for this program (if one exists)?
- 3. What is the curriculum code for this program (if one exists)?
- 4. How many weeks does it typically take to complete the program?
- 5. What are the total hours of instruction/classroom/lab time?
- 6. Other than employment, what is the primary goal of the program?(i.e., Associates Degree, Bachelors Degree, etc.) If other than listed, specify.
- 7. If Certification, License, or Registration, what is the name of the certifying, licensing, or registering body?
- 8. Identify up to two occupations for which the individual will be qualified to immediately hold after completing this program.
- 9. What are the program offerings? (check all that apply)

Full-Time Enrollment	Part-Time Enrollment	Internships
Non-English Instruction	Classroom Instruction	Labs
Weekend Classes	Night Classes	Day Classes
Internet Instruction	Open Entry/Exit	Other (Specify)

10. What are the entry level requirements of the program? (check all that apply)

- | | |
|------------------------|-------------------------|
| Drug/Alcohol Screening | Language (Specify) |
| HS Diploma/GED | Writing (Specify) |
| Physical Exam | Prerequisites (Specify) |
| Math (Specify) | Other (Specify) |
| Other (Specify) | |

11. What is the total cost of this program (round to the nearest dollar amount)

- Tuition Books
- Fees Tests
- Other Expenses (Materials, Supplies, Tools, Uniforms, etc.)

TOTAL COST

Ensure the "Calculate Totals" field is selected to update the total cost of the training program.

12. Types of financial aid available (check all that apply)

- | | |
|--------------------------------------|---------------------------------|
| Pell Grants | Illinois Monetary Award Program |
| Federal Loans (Stafford, PLUS, etc.) | Institutional Scholarships |
| Other (Specify) | |

13. What year was the program established?

a. Put a check in the box of each location where this training program is offered.

If all locations for which the training program are not listed, use the "Add Location" field to add additional locations.

Note: Before adding a new location, the LWIOA must ensure the location does not currently exist in IWDS. The LWIOA should check variations of the location name when verifying this.

14. Has the provider given assurance and certification that their agency fully complied with the nondiscrimination, equal opportunity, and disability provisions of the Workforce Innovation and Opportunity Act?

(This must be answered with a Yes to be determined eligible.)

15. Is this facility and programs accessible to all people with a disability? (29 CFR 32.3)

(This must be answered with a Yes to be determined eligible.)

16. Please describe the application procedure for this program. Include in this description any documents or materials that the customer should bring when applying for this program.

"Submit" should then be selected to submit the application for approval. "Save, but don't submit" should be selected if additional information needs to be entered before the application is sent for approval.

C. The LWIOA must verify that the training provider has entered all of the locally required data elements for each training program for which they are applying. Data elements are entered on the "Training Program Local Information" record in IWDS. Local workforce innovation boards (LWIB) have the discretion of requesting additional information on training programs in addition to the required information found in Section B. above.

D. Once all information has been verified by the LWIOA, they must submit it to the LWIB for review and approval.

- E. Once approval has been given by the LWIB, the LWIOA must return to the Training Program Basic Information record and complete the following fields:
- a. *Initial Criteria Status* - Should be changed to "Accept".
 - b. *Program Status* - Should be changed from "Pending" to "Approved".
 - c. *Initial Eligibility Date* - Should be the date the LWIB approved the program.
 - d. *Last Eligibility Date* - This is a system generated field and will be the date the program was provided continued eligibility by the LWIB (for new programs, same as Initial Eligibility Date).
 - e. *Next Eligibility Date* - Should be the next date for continued eligibility in agreement with LWIB, LWIOA, and training provider, but in no case more than one (1) year from the initial eligibility date or two (2) years from the continued eligibility date recorded for the training program.
NOTE: Under the Transition Policy, the expiration date was extended until June 30, 2016 for all current training providers and training programs that were determined eligible or certified under WIOA.

- F. The LWIOA must produce a periodic report of eligible training programs and check their status. If any training programs' status is listed as "Pending Continued Eligibility", the training program must be reviewed and sent for continued eligibility. This may occur because the training provider changed information within the "Training Program Basic Information" record that prompts a new eligibility determination (as outlined in Section B above) or the training program's eligibility date has passed.

The LWIOA should produce the report frequently enough to:

- a. Ensure they identify ALL programs needing continued eligibility prior to their continued eligibility date;
 - b. Provide the training provider with a notice of any upcoming training programs requiring continued eligibility (and update of information, if necessary); and
 - c. Ensure they provide sufficient time to:
 - Review the training program information to ensure it is current;
 - Send the training program to the LWIB for review and approval; andThe LWIOA can update the "Training Program Basic Information" record prior to the system automatically removing it from the list of approved training programs.
- G. The LWIOA must send ALL training programs with a "Pending Continued Eligibility" status to the LWIB (or the committee of two (2) or more individuals as designated by the LWIB) for review and approval.



Workforce Investment Board of Will County New Training Provider Application Form

Date Submitted:

Provider Information

Provider Name:

Provider Address:

Provider Phone:

Provider FEIN:

WIOA Contact Information

Primary Contact:

Contact Phone:

Contact E-mail:

Organizational Details

What year did the organization begin operating as a training provider?

Is the organization that is seeking WIOA certification currently approved or accredited under an existing process recognized by the State of Illinois? If yes, please check all types of accreditation and approval that apply:

- Illinois Board of Education Illinois Department of Public Health
 Illinois Community College Board North Central Association
 Other nationally recognized industry association

Type of Organization:

- | | |
|---|---|
| <input type="checkbox"/> Proprietary School Community | <input type="checkbox"/> Community College |
| <input type="checkbox"/> Community Based Organization | <input type="checkbox"/> Apprenticeship |
| <input type="checkbox"/> Adult Education/Vocational/Technical | <input type="checkbox"/> Business/Private Corporation |
| <input type="checkbox"/> College/University | <input type="checkbox"/> Other |

Are all facilities ADA Compliant? Yes No

Has the provider given assurance and certifications that their agency fully complied with the nondiscrimination, equal opportunity, and disability provisions of the Workforce Investment Act of 1998? Yes No

Attachment Check List. Please ensure that the following items are attached to your application:

- Copy of Accreditation
- Copies of Relevant Certifications
- Program Catalog

Program Information

Please list all programs in which you are applying for certification. Please note the following: All programs must lead to a certification or licensure, or completion of a degree or certificate. You must submit a New Program Application Form for each program listed below.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.