

**Eligible Training Provider Certification**

### Purpose:

The purpose of the policy is to provide eligibility criteria for providers of training, information and procedures for implementing the Eligible Training Provider (ETP) requirements in the Workforce Innovation and Opportunity Act of 2014. This policy is applicable to providers of occupational skills training services for adults, dislocated workers and other populations as defined in WIOA, Title 1-B.

The Quality Assurance Committee of the West Piedmont Workforce Development Board (WPFDB) has the responsibility for receiving, reviewing and approving training providers and their programs. The WPFDB must also ensure that data elements related to initial application, continued eligibility and performance information regarding approved providers and programs are entered into the supported state system.

Approval by the WPFDB places the provider and the program on the state Eligible Training Provider List (ETPL) but does not guarantee a local area will fund the approved training activity through the issuance of an Individual Training Account (ITA). In order for a training program to be funded through an ITA, the program must be related to the regional demand occupations, must have sufficient funds available and the training must support the individual in meeting their career objectives and employment.

The WPFDB must identify at least one employee that shall serve as the primary staff responsible for updating the ETP information within VaWC. In addition, this person will also serve as the Local VaWC System Administrator.

### Policy:

There are five (5) categories of providers who may apply at the local level for consideration to be included on the state Eligible Training Provider list:

1. A postsecondary educational institution that is eligible to receive federal funds under Title IV of the Higher Education Act of 1965 and that provides a program that leads to certification or license or college certificate, associate degree or baccalaureate degree,
2. A postsecondary school that offers formal instructional programs with curricula designed primarily for students who have completed the requirements for a high school diploma or its equivalent. Such schools include academic-vocational, vocational, and continuing professional education that may lead to a certification or licensure. This category excludes avocational and adult basic education programs,
3. An entity that carries out related instruction under the National Apprenticeship Act that is recognized by the Virginia Department of Labor and Industry,
4. A provider of a program of occupational training services that under Section 23-

276.2 of the Code of Virginia is exempt from certification as a postsecondary school such as a professional or occupational training program regulated by another state or federal governmental agency other than the State Council of Higher Education

for Virginia (SCHEV), any school, institute, or course of instruction offered by any trade association or any nonprofit affiliation of a trade association on subjects related to the trade, business, or profession represented by such association, or

1. A provider of adult education and literacy under Title II of WIOA, if these activities are provided in combination with occupational skills training.

Programs and providers under ***CATEGORIES 1 and 2*** must provide evidence of active certification by the appropriate state agency to operate or must have program approval from an applicable state agency in order to be considered for approval by the WPFDB to offer training services to WIOA customers through the ITA method.

Programs and providers under ***CATEGORY 3*** will be granted approval, if requested, following confirmation by the Virginia Department of Labor and Industry (DOLI) that the sponsoring employer and apprenticeship related instruction have been recognized by the state and are active and in good standing.

Programs and providers who are exempt from the certification requirements are listed on ATTACHMENT A. A list of certifying agencies is provided as ATTACHMENT B.

Training providers applying for inclusion on the ETPL must provide information using the common statewide application (See ATTACHMENT C). The following must be documented:

* Description of each program of training services to be offered;
* Information regarding student outcomes, as described in WIOA sec 116 (b)(2)(A)(i)(I)-(IV);
* Information on cost of attendance, including tuition and fees;
* Whether the training program leads to an industry-recognized certificate or credential, including recognized post-secondary credentials;
* Whether the certificate or credential can be stacked with other credentials over time as part of a sequence to move an individual along a career pathway or up a career ladder;
* Whether the provider has developed the training in partnership with business (a description of the partnership(s) and the name of the business(es));
* Which in-demand industry sectors and occupations best fit with the training program; and
* Average wages for the primary target occupation for which the training prepares the individual, as published by the Virginia Employment Commission, for the state and local area where they are pursuing application;
* A description of the prerequisites or skills and knowledge required prior to the commencement of training;
* Description of how the provider will ensure access to training services throughout the State, including rural areas and through the use of technology; and
* Description of how the training provider will work with the local board to serve individuals with barriers.
* Qualifications to receive WIOA Title I-B funds to train adult and dislocated workers, including those with disabilities by certifying ADA accessibility for locations and programs.

Training providers applying for initial program eligibility must submit the State ETPL Training Provider and Training Program Application to the WPFDB. In accordance with WIOA Labor Final Rules and Regulations Subpart D-Eligible Training Providers and VBWD

Policy #15-02, initial training provider program applications must also provide information addressing factors related to the performance indicators, as described in WIOA Section 116(b)(2)(A)(i)(I-IV) and Attachment B WIOA Periods for Reporting Outcomes:

* The percentage of program participants who are in unsubsidized employment during the second quarter after exit from the program;
* The percentage of program participants who are in unsubsidized employment during the fourth quarter after exit from the program;
* The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from the program; and
* The percentage of program participants who obtain a recognized post-secondary credential, or a secondary school diploma or its recognized equivalent during participation in or within one year after exit from the program.

If the training provider is not able to provide program performance information related to the factors listed above, the training provider must submit a plan describing how they will work with the WPFDB to collect and report on this information for continued eligibility.

Upon initial eligibility approval, the training provider must work with the WPFDB to develop a plan to begin tracking and reporting these factors.

After initial applications are approved, training provider programs will be placed on the ETPL by the WPFDB and will remain eligible to receive WIOA Title I funds for one year. Online Providers/Programs

WIOA funds may be used for programs that are conducted in a completely online format. Online providers may apply and be considered for inclusion on the state ETPL and are required to meet the same eligibility and performance criteria established for classroom- based instructional providers.

Out of State Providers/Programs

WIOA funds may also be used for approved programs from other states. Approved programs and providers based in other states are not required to complete an application for approval in Virginia. In order for an eligible customer to obtain training through an out- of-state provider, the training provider must be listed on a state maintained ETPL from another state. ETPL from other states can be found at: [http://www.servicelocator.org/program\_search.asp?prgcat=1&officeType\_1=0&frd=true](http://www.servicelocator.org/program_search.asp?prgcat=1&amp;officeType_1=0&amp;frd=true)

To receive funding through the WPFDB, all providers and programs recognized by other states must meet Virginia’s state criteria established for initial eligibility and performance criteria established by this policy must be met. The Virginia Community College System (VCCS), as the Administrator of Title I funding will establish, maintain and periodically review reciprocity agreements with neighboring (bordering) states.

Informed Customer Choice Requirement

Occupational skills training shall be provide in a manner that ensures informed customer choice in the selection of training for regionally in-demand occupations and prudent use of public funds in the selection of such providers.

Accessibility

Training programs must certify that the training services are physically and programmatically accessible for individuals who are employed and individual with barriers to employment, including individuals with disabilities. An ADA accessibility survey by WPFDB or other trained staff may occur to verify certification.

Continued Eligibility and Program Performance Requirements

After one full year of eligibility, approved Eligible Training Providers will be required annually to provide basic information for continued eligibility and will submit performance information for participants whose activities were funding through WIOA with an Individual Training Account (ITA). The information will be reviewed by the Employment Enhancement Committee and recommendations for renewal will be forwarded to the WPFDB for action using the standard statewide template and procedures.

The provided data must be entered by the WPFDB into the state reporting system to ensure transparency and support informed customer choice in the evaluation and selection of training providers. The approval or denial data must be entered into the stae system of record (VaWC) Training providers who fail to provide the verification and performance information within 90 days of request will be removed from the state ETPL.

If a training provider is not recertified for continued eligibility, participants already enrolled in training may remain in the program until completion.

A recognized apprenticeship program may remain on the ETPL as long as it remains registered and recognized by the Virginia DOLI.

Beginning in the Program Year 2017, in order to remain on the ETPL, all eligible training providers and programs who receive funding through an ITA must annually provide information on the following four outcomes for WIOA Title I participants:

1. Training Completion Rate
2. Credential Attainment Rate
3. Entered Employment Rate
4. Post Training Earnings

Outcomes 1 and 2 will be used to evaluate inclusion on the ETPL. The performance levels required to remain on the ETPL are as follows and should be calculated separately for Adults and Dislocated Workers:

1. Training Completion Rate must meet or exceed 50%-the number of participants during a Program Year (July 1 – June 30) who were enrolled in a Title I funded training service who successfully met all of the requirements of the training activity. To calculate the outcome, the number of participants who successfully completed the ITA (Service Code 300) during the program year divided by the total number of participants who were actively engaged in an ITA during the program year.
2. Credential Attainment Rate must meet or exceed 65%-of those who completed Service Code 300 during the Program Year or within one year after exit from the program, the number who attained credentials during that same period. To calculate the outcome, the number of participants who successfully completed a Service Code 300 activity and attained an occupational certificate during the program year or within one year after program exit divided by the number of participants who complete a service code 300 activity and exited during the program reporting year.
3. Entered Employment Rates-will be reported as 1) the number of participants who received an ITA and who are employed in the second quarter after the exit quarter and 2) the number of participants who received an ITA and who are employed in the fourth quarter after the exit quarter.
4. Post Training Earnings-will be reported as the median earnings for those participants who received an ITA and who have earning during the second quarter after exit.

The following additional information beyond 1-4 above must be collected and reported to the public through the public access portion of the VaWC:

1. Information on recognized postsecondary credentials received by program participants (type of recognized credential);
2. Information on cost of attendance, including costs of tuition and fees, for program participants; and
3. Completion rate.

State apprenticeship programs are not subject to the state performance requirements. Any apprenticeship program may remain on the ETPL as long as it remains registered and recognized in good standing by the Virginia DOLI.

If a provider or program failed to meet the criteria established above, they will be removed from the state ETPL. A letter informing them of that removal will be issued by the WPFDB (for those that were originally reviewed and accepted by WPFDB). Training providers who are removed from the state list may appeal.

\*\*\* Completion and credential attainment rates may be impacted by multiple factors and each local board will adopt a policy that describes the factors that will be evaluated during the appeals process…..

Accuracy of Information and Appeals Process

The Commonwealth of Virginia has the responsibility for maintaining the statewide ETPL and as such, will have final responsibility to ensure that the list is accurate and is an honest reflection of the training opportunities in Virginia.

1. Accuracy of Information-If after consultation with the WPFDB, it is determined that an eligible provider or individual supplying information on behalf of the provider intentionally supplies inaccurate information, the Commonwealth may terminate the eligibility of the provider or program to receive WIOA funds for any program for a period of time that is not less than 2 years.
2. Noncompliance-If the Commonwealth, or the WPFDB working with the Commonwealth, determines that an eligible provider substantially violates any requirement under this Act, the Commonwealth, or the WPFDB working with the Commonwealth, may terminate the eligibility of such provider or individual program to receive WIOA funds for the program involved or take such other action as the Commonwealth or WPFDB determines to be appropriate.
3. Repayment-A provider whose eligibility is terminated under paragraph (1) or (2) for a program shall be liable for repayment of all WIOA funds received for the program during any period of noncompliance. The WPFDB will make reasonable efforts to collect funds.
4. Construction-These penalties shall be construed to provide remedies and penalties that supplement, but do not supplant, other civil and criminal remedies and penalties.

Appeals Process

1. The provider shall have thirty (30) calendar days from the date the denial or removal notification was given to file a request for reconsideration to the WPFDB. The appeal request must be submitted in writing and signed. At a minimum, the appeal must identify the training program and location(s) denied or removed and must clearly state the reason for the appeal.
2. Within sixty (60) calendar days of receipt of the request for reconsideration, the WPFDB shall review the request and issue a written decision that either upholds or reverses the original decision. Instances for a reversal may include, but shall not be limited to, an administrative oversight or instances where additional information submitted by the training provider changes the basis on which the original decision was issued.
3. If the WPFDB or its Executive Committee fails to act on the appeal request during the 60-day time period described above, the initial decision shall automatically be reversed.
4. If the WPFDB upholds its original decision, the applicant shall be entitled to pursue a state-level appeal as outlined in State Policy 404-01.

ATTACHMENT A-Training Providers/Programs Exempt from Certification as a Postsecondary School

§23-276.2 of the Code of Virginia allows for the following exemptions from certification:

1. Public institutions of higher education in Virginia
2. Educational offerings or activities that meet the following:
	1. A nursing education program or curriculum regulated by the Board of Nursing;
	2. A professional or occupational training program regulated by another state or federal governmental agency;
	3. Those courses or programs of instruction given by or approved by any professional body that are principally for continuing or professional education and for which no degree credit is awarded;
	4. Those courses or programs offered through approved multistate compacts, including, but not limited to the Southern Regional Education Board’s Electronic Campus;
	5. Those courses offered and delivered by a postsecondary school that is accredited by an entity recognized by the U. S. Department of

Education for accrediting purposes, if such courses are provided, solely on a contractual basis for which no individual is charged tuition and for which there is no advertising for open enrollment;

* 1. Any school, institute or course of instruction offered by any trade association or any nonprofit affiliate of a trade association on subjects related to the trade, business or profession represented by such association;
	2. Any public or private high school accredited or recognized by the Board of Education;
	3. Tutorial instruction delivered and designed to supplement regular classes for students enrolled in any public or private school or to prepare an individual for an examination for professional practice or higher education;
	4. Religious institutions whose primary purpose is to provide religious or theological education.

§23-276.4 C of the Code of Virginia states that institutions of higher education are not required to obtain further certification if they (i) were formed, chartered or established in the Commonwealth; (ii) have maintained a main campus continuously in the Commonwealth for at least 20 calendar years under their current ownership; (iii) were continuously approved or authorized to confer or grant academic or professional degrees by the Council during those 20 years; and (iv) are fully accredited by an accrediting agency that is recognized by the U. S. Department of Education.

Postsecondary institutions that do not meet the requirements of §23-276.2 or §23-276.4 © above are required to obtain certification in accordance with Attachment B.

Attachment B-List of Certifying State Agencies (This is not an all-inclusive list)

The following State agencies can provide approval for Occupational Skills Training programs:

* Criminal Justice Services Department
* Department of Health Professions (DHP
* Department of Medical Assistance Services (DMAS)
* Department of Motor Vehicles
* Department of Professional and Occupational Regulation (DPOR)
	+ Board for Barbers and Cosmetology
	+ Board for Contractors
	+ Fair Housing Board
	+ Real Estate Board
	+ Real Estate Appraisers Board
	+ Tradesmen
	+ Board for Waste Management Facility Operators
	+ Board for Waterworks and Wastewater Works Operators and Onsite Sewage System Professionals
* State Council of Higher Education in Virginia (SCHEV)
* Virginia Board of Pharmacy

Attachment C



Training Provider Application

|  |  |
| --- | --- |
| 1. Name of Training Organization | 2. Federal Tax ID# |
| 3. Mailing Address | 4. City | 5. State | 6. Zip |
| 7. Physical Address | 8. City | 9. State | 10. Zip |
| 11. Name & Title of Contact Person: |
| 12. Email Address of Contact Person: | 13. Phone Number of Contact Person: |
| 14. Mailing Address of Contact Person (if different from above) |
| 15. Year Established | 16. Website Address: |
| 17. Type of Entity Other, not listedOther (please Describe)  |
| 18. Does your organization provide job search assistance or placement services? Yes No (if yes, please describe) |
| 19. What types of financial aid are available to students? |
| 20. Does your organization have a tuition refund policy? Yes No(if yes, please attach the policy including time frames and percentage of reimbursement) |
| 21. Name of Financial Aid Contact Person | 22. Email Address of Financial Aid Contact Person |

Training Provider Application

|  |
| --- |
| 23. Please provide three customer references including contact information: |
| 1. |
| 2. |
| 3. |

SUPPLEMENTAL INFORMATION

In addition to the attachments associated with the previous sections of this application, copies of the following documents **MUST** be included:

* Copy of Virginia oversight documentation(SCHEV, VA School of Nursing, etc)
* Copy of License to Conduct Business in Virginia
* Copy of Training Provider Grievance Procedure for individuals with complaints on issues, such as discrimination, accessibility, etc.
* ADA Facilities Accessibility Checklist (included in packet)
* Suspension/Debarment Certification (included in packet)
* Anti-Discrimination Certification (included in packet)
* For each training program, fill out training program application (included in packet) and provide documentation which includes
	+ Training Program description, 2) Outline of the Program, 3) Skills to be obtained.



**Training Provider**

**ADA (Americans with Disabilities Act) Facilities Accessibility Self-Attestation Form**

Based on the ADA Facilities Checklist provided with this document, I have reviewed the parking lots, walks, entrances, exits, stairs and facility interiors and have completed the attached checklist. I certify that my organization is ADA compliant and meets the requirements as specified on the ADA checklist. If there are requirements that were not met, I will provide reasonable accommodations as described below.

**Organization: Authorized Signature: Printed Name and Title:**

**Date:**

**Description of Accommodations and Effective Date (***if more space is needed, please attach additional pages***):**

**Training Provider**

**ADA FACILITIES ACCESSIBILITY CHECKLIST**

Training Provider

Training Location

Checklist Completed by:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | n/a |
| **Parking Lots** |
| Are designated accessible parking spaces located near the facility? |  |  |  |
| Are these spaces at least 12 feet wide? |  |  |  |
| Do they allow a person to get out of vehicles on a level and smooth surface (no sand, gravel, etc.)? |  |  |  |
| Can a person using these spaces reach walks or doors to the building without walking or wheeling behind parked vehicles? |  |  |  |
| **Walks** |
| Are walks at least 48” wide? |  |  |  |
| Are walks in good repair and reasonable free of abrupt changes in surface level? |  |  |  |
| Are drop-offs on sides or differences in terrain near walks marked by fences or rails? |  |  |  |
| When crossing other walks, driveways, or parking lots, do walks blend to a common level? |  |  |  |
| **Entrances, Exits, and Stairs** |
| Are primary entrances and exits ramped to allow persons using wheelchairs or crutches access to the facility? |  |  |  |
| If there are ramps: |
| a. Are they sloped gently? |  |  |  |
| b. Are the ramps in good repair including handrails? |  |  |  |
| c. Is the surface of the ramp “non-slip”? |  |  |  |
| Do doors have clear openings of no less than 32” when open? |  |  |  |
| Can doors be opened or closed by a single effort? |  |  |  |
| Are door sills free of extreme slopes or abrupt changes in surface level? |  |  |  |
| If the building has elevators, are they on the same level as accessible entrances? |  |  |  |
| Are stair surfaces “non-slip”? |  |  |  |
| Do stairs have handrails? |  |  |  |
| **Facility Interiors** |
| Do floors have “non-slip” surfaces? |  |  |  |
| Are floors on each story at a common level or connected by ramps? |  |  |  |
| Are hallways free of protruding objects (coat racks, hanging signs, etc.) that interfere with pedestrian traffic? |  |  |  |
| Are restroom facilities accessible and usable by persons in wheelchairs? |  |  |  |
| Are public telephones equipped for use by persons with hearing impairments? |  |  |  |
| Are public telephones accessible to persons in wheelchairs? |  |  |  |
| Are elevators accessible and usable by mobile disabled persons? |  |  |  |
| Do fire alarms utilize both sight and sound systems? |  |  |  |
| Are water fountains usable by persons in wheelchairs? |  |  |  |

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION—LOWER TIER COVERED TRANSACTIONS**

* The prospective lower tier subcontract proposer certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
* Where the prospective lower tier subcontract proposer is unable to certify to any of the statements in this certification, such prospective subcontract proposer shall attach an explanation to this proposal.

Organization

Authorized Signature Date

Printed Name and Title

**ANTI-DISCRIMINATION CERTIFICATION**

The Contractor certifies to the Commonwealth that they will conform to the provisions of the Federal Civil Rights Act of 1964, as amended, as well as the Virginia Fair Employment Contracting Act of 1975, as amended, where applicable, the Virginians With Disabilities Act, the Americans With Disabilities Act and Section 11-51 of the Virginia Public Procurement Act which provides:

In every contract over $10,000 the provisions in (a) and (b) below apply:

1. During the performance of this contract, the Contractor agrees as follows:
	* The Contractor will not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, or disabilities, except where religion, sex or national origin is a bona fide occupational qualification reasonably necessary to the normal operation of the Contractor. The Contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.
	* The Contractor, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, will state that such Contractor is an equal opportunity employer.
	* Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of this section.
	* The Contractor will include the provisions of (a) above in every subcontract or purchase order over $10,000, so that the provisions will be binding upon each subcontractor or vendor.

Organization

Authorized Signature

**Certification and Representation**

I, (Name) as (Title) of

 (Applicant Agency), hereby certify and represent the following:

* That the information contained in this application and all attachments is true and correct to the best of my knowledge and belief; and
* That (Applicant Entity) will permit representatives of the Workforce Development Board and the Commonwealth of Virginia access to its facilities, staff, and records for the purpose of verifying information contained in this application and for collecting any additional information related to its qualifications as a provider of training services under the WIOA.
* I understand that approval by a LWDB places the provider and program on the state Eligible Training Provider List but does not guarantee a local area will fund the approved training activity through the issuances of an ITA. That determination is further based on local policy which must include, at minimum, relevance of training to demand occupations that are in demand regionally, availability of local funds, and likelihood that training will support the individual in meeting their career objectives and employment. The selection of a training provider is based on participant choice.

*Signed this day of ,*

 \_ Signature

 *\_ \_ \_ Telephone Number and Email address*

|  |
| --- |
| **FOR LWDB OFFICE USE ONLY** |
| Date Received by /WDB | Date Approved by /WDB | Date /WDB Submitted to State | Authorized /WDB Signature |
|  |  |  |  |
|  |  |  |  |



Training Program Application

*A separate application form must be completed for each training program or occupational skills course of study.*

|  |
| --- |
| 1. Training Organization |
| 2. Contact Person – Name & Title |
| 3. Training Program or stand-alone course name |
| 4. Program or course description |
| 5. Year Program Established |  | 6. Total Credit or Curriculum Hours | 7. Number of training weeks or hours |  |  | 8. Minimum Class Size |
| 9. Is curriculum certified by an accrediting agency or similar national standardization program:Yes *(if yes specify)* No |
|  |
| 10. Description of training and skills to be obtained – *Attach training program description, include an outline of what is covered in the program and what skills are to be obtained.* |
| 11. Which in-demand industry sectors and occupations best fit with the training program; and the average wage for the primary target occupation for which the training prepares the individual , as published by the VirginiaEmployment Commission, for the local area. If the in-demand sectors & occupation differ from what is defined by the region, please provide LMI Information to support the sector & occupation. |
| 12. Does training lead to an industry recognized credential, diploma, license, or degree? *If yes, indicate which.*Yes No |
|  |
| 13. Is this a stackable credential, part of a sequence to move an individual along a career pathway or up a career ladder? Yes No |
|  |
|  |
| 14. Was this training developed in partnership with a business? Yes NoIf yes, Name of Business(s): |

15. List Businesses that support this training program:

|  |
| --- |
|  |
| 16. Describe how you will ensure access to training services throughout the state, including rural areas and through the use of technology: |
| 17. Describe how you will work with the local board to serve individuals with barriers: |
| **Program Cost** |
| 18. **Registration/Pre-screening/Admissions Fees** | $ |
| 19. **Tuition** (check all items included in Tuition) | $ |
| Books | $ |
| Required Supplies(Tools, uniforms, etc. | $ |
| Testing/Exam Cost | $ |
| Licensure/Certification Cost(s) | $ |
| Other Required Fees | $ |
| 20. **Total Cost to Complete Curriculum/Course** | **$** |
| **Criteria for Admission** |
| 21. Describe the prerequisites or skills and knowledge required prior to the commencement of training: |
|  |
| 22. Is a High School Diploma or GED required: Yes No |
|  |  |