Application Instructions for Idaho WIOA Eligible Training Providers

Revised February 2026

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Best Practices

1   Maintain an "active account status" by logging in at least every 180 days.

2   Annually review the accuracy of each approved program's details (especially cost changes).
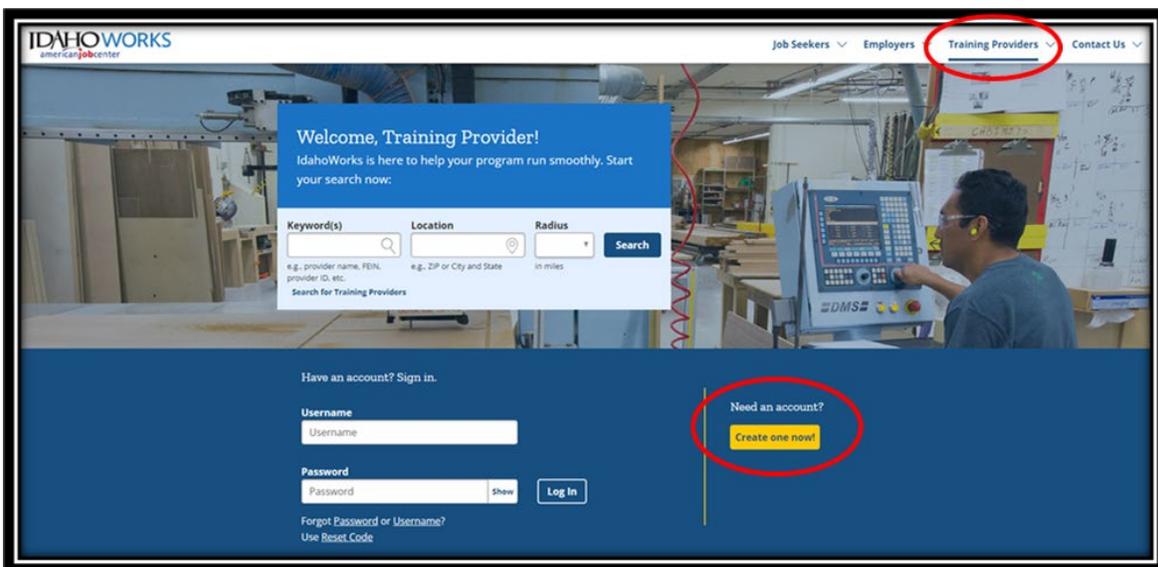
Checklist for Applying

Step 1   Review the following documents
1. [Idaho WIOA ETP Policy and Appendix A](#)
2. [Idaho In-Demand Careers List](#)

Step 2   Gather the required following documents*
1. Certificate of Registration: copy of an Idaho authorization document (ex: registration with the Idaho Board of Education)
2. Provider's Grievance Policy
3. Provider's Refund Policy
4. Letters of Recommendation (3)

*More information about the Required Documents is in the [ETP Policy](#).

Step 3   Complete and sign Attachment I – Data Submission Agreement

Step 4   Complete Attachment II – Eligible Training Provider Supplemental Questions for Initial Eligibility

Step 5   Complete Attachment III – Equal Opportunity Questionnaire

Step 6   Follow and complete Application Instructions
1. Create User Account
2. Update or Enter Provider Information
3. Register Training Program
4. Enter Program Performance Information
5. Upload Required Documents

Step 7   Wait for the determination and communicate with IDOL as requested

Step 8   After approval, enter additional programs using the instructions to [Add a Provider Program](#).

Create User Account from Existing FEIN

Note – all information submitted to *IdahoWorks* except for User Profile and Provider Contact fields are publicly published under the training provider's *IdahoWorks* record.

1. Go to https://idahoworks.gov and click the **Training Providers** tab at the top right of the page.

2. In the *Training Provider login* section, click on **Create one now!** to create a new account.

3. Before you can create a new account, you must determine if there is already a record for your training identity. Enter your entity's Federal Employer Identification Number (FEIN) and click **Search**.

If the entity is a US Department of Labor (USDOL) Registered Apprenticeship (RA) program, enter the RA Number on the *Apprenticeship Sponsor* tab.

4. If the FEIN entered matches an existing training provider, the next screen will show the associated training provider's information including the name, city, and phone number.* Select the **entity name** to create a user account. If no entity appears for that FEIN, continue to [Create a New Provider Account](#).

   *If entity information returned for the FEIN is NOT correct, do NOT click Add a New Provider. Instead, please email WIOAETP@labor.idaho.gov to discuss correcting the information.

5. Review the information on the *Eligible Training Provider-Assurances* page that displays.

IdahoWorks - Eligible Training Provider - Assurances

ℹ Please review the information below.

The Workforce Innovation and Opportunity Act of 2014 (WIOA) requires that states approve and maintain a list of training providers before WIOA funds can be used to pay for occupational training for WIOA participants. To become a WIOA eligible training provider (ETP), all training providers must complete this application, agree to program requirements and certify the assurances below. Idaho Department of Labor staff will review your application and determine approval on behalf of the Governor's Workforce Development Council (WDC).

If the entity assures compliance, select **Accept** to continue. If the entity cannot assure compliance, click **Decline** to terminate the application process and return to the Home page – compliance is required.

6. Complete the *Create Training Provider Account* page and click **Continue**.
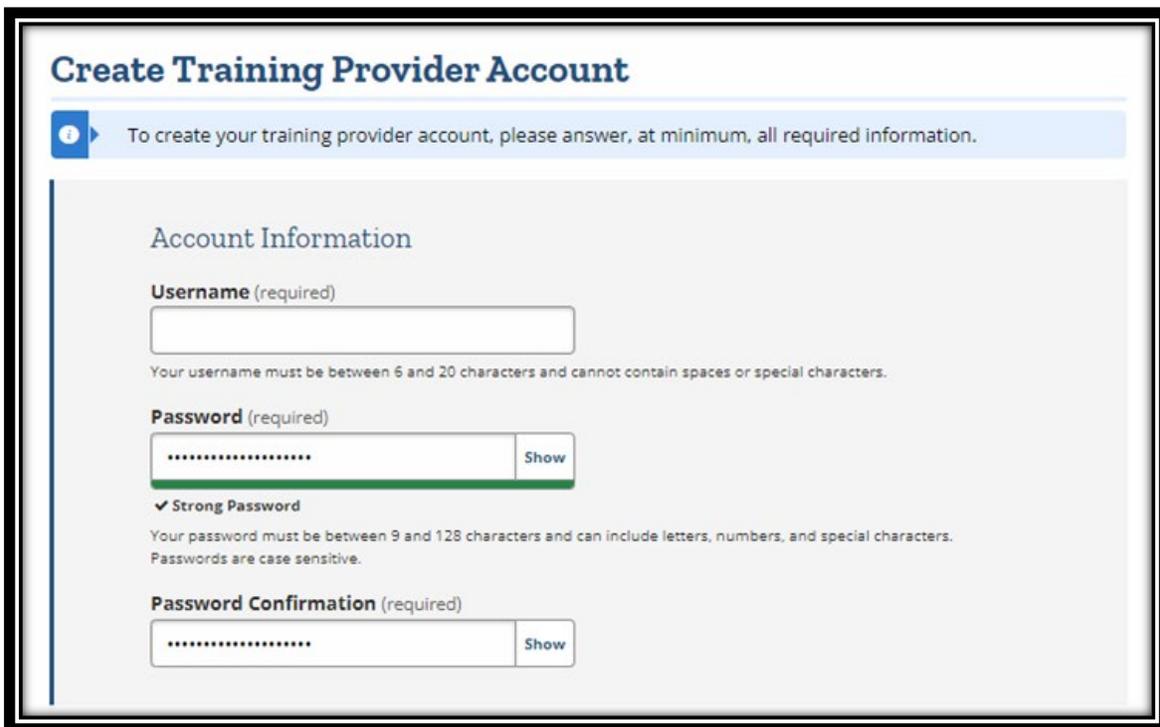
Create Training Provider Account

ℹ To create your training provider account, please answer, at minimum, all required information.

Account Information

Username (required)

Your username must be between 6 and 20 characters and cannot contain spaces or special characters.

Password (required)

Show

✔ Strong Password

Your password must be between 9 and 128 characters and can include letters, numbers, and special characters. Passwords are case sensitive.

Password Confirmation (required)

Show

7. After your account has been approved, ensure required documents are uploaded to *Supplementary Documents* section of the *IdahoWorks Provider Profile*. Click **File** to select the document from your computer and then click **Upload**.
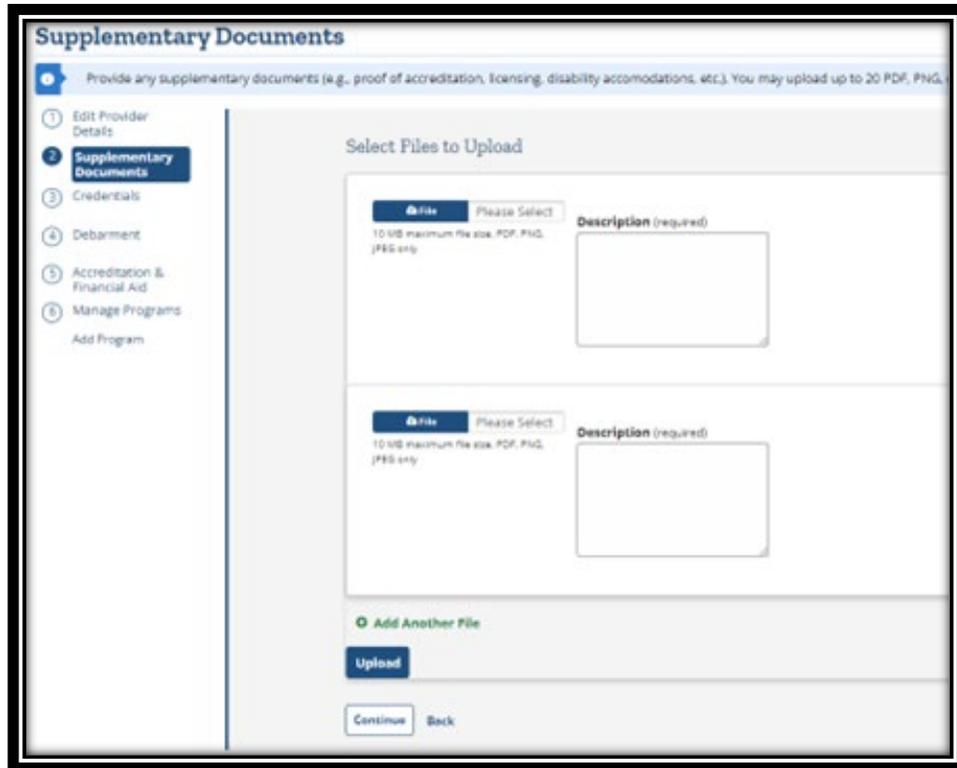
Required documents:*
   a. Certificate of Registration: copy of entity's registration with the Idaho State Board of Education or other authorizing state government agency
   b. Attachment I – Data Submission Agreement
   c. Attachment II – Eligible Training Provider Supplemental Questions for Initial Eligibility
   d. Attachment III – Equal Opportunity Questionnaire
   e. Letters of Recommendation (3)
   f. Provider's Grievance Policy
   g. Provider's Refund Policy

*See the ETP Policy for details about required documents.

8. After approval, log in using the username and password established when the account was created and follow the Add a Provider Program instructions.

Create a New Provider Account

Note – All information entered into *IdahoWorks* except for the *User Profile* and *Provider Contact* fields are publicly published under the training provider's *IdahoWorks* record.

1. Go to https://idahoworks.gov and click the **Training Providers** tab at the top right of the page.

2. In the Training Provider login section, click on **Create one now!** to create a new account.

3. Before you can create a new account, you must determine if there is already a record for your training identity. Enter your entity's Federal Employer Identification Number (FEIN) and click **Search**.

If the entity is a US Department of Labor (USDOL) Registered Apprenticeship (RA) program, enter the RA Number on the *Apprenticeship Sponsor* tab.

4. If the FEIN entered matches an existing training provider, the next screen will show the associated training provider's information including the name, city, and phone number. Please refer to step 4 of [Create User Account from Existing FEIN](#) instructions (pg. 5).

5. If no FEIN match is found, or if the correct entity is not listed, click **+Add a New Provider**.
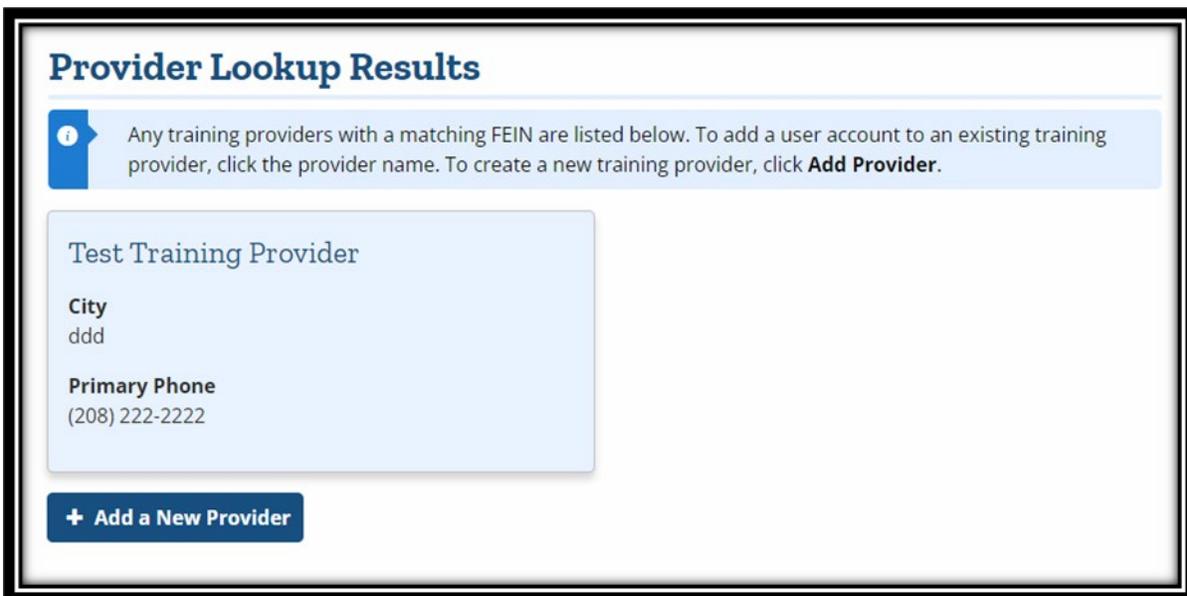
Provider Lookup Results

Any training providers with a matching FEIN are listed below. To add a user account to an existing training provider, click the provider name. To create a new training provider, click **Add Provider**.

There are currently no training providers with this FEIN.

+ Add a New Provider

6. Review the information on the *Eligible Training Provider-Assurances* page that displays.

IdahoWorks - Eligible Training Provider - Assurances

Please review the information below.

The Workforce Innovation and Opportunity Act of 2014 (WIOA) requires that states approve and maintain a list of training providers before WIOA funds can be used to pay for occupational training for WIOA participants. To become a WIOA eligible training provider (ETP), all training providers must complete this application, agree to program requirements and certify the assurances below. Idaho Department of Labor staff will review your application and determine approval on behalf of the Governor's Workforce Development Council (WDC).

If the entity assures compliance, select **Accept** to continue. If the entity cannot assure compliance, click **Decline** to terminate the application process and return to the Home page – compliance is required.

7. Enter information on the *Create Training Provider Account* page noting these important details:
   a. **Email Address** – A contact email address is required and will be used by the EPTL Administrator to contact the institution regarding WIOA eligibility or other correspondence.
   b. **Provider Name** – An institution can have more than one record. Take care to use the name consistently.
   c. **Address** –This information is used by the public to get directions to an office or location that is available for students to meet with staff in-person as required or requested.

Create Training Provider Account

To create your training provider account, please answer, at minimum, all required information.

Account Information

Username (required)

Your username must be between 6 and 20 characters and cannot contain spaces or special characters.

Password (required)

[Show]

✔ Strong Password

Your password must be between 9 and 128 characters and can include letters, numbers, and special characters. Passwords are case sensitive.

Password Confirmation (required)

[Show]

---

8. When complete click **Continue**.

9. Complete the *Supplementary Documents* section. Click **File** to select the document from your computer and then click **Upload**.

Required documents:*
- a. Certificate of Registration: copy of entity's registration with the Idaho State Board of Education or other authorizing state government agency
- b. Attachment I – Data Submission Agreement
- c. Attachment II – Eligible Training Provider Supplemental Questions for Initial Eligibility
- d. Attachment III – Equal Opportunity Questionnaire
- e. Letters of Recommendation (3)
- f. Provider's Grievance Policy
- g. Provider's Refund Policy

*See the ETP Policy for details about required documents.

10. When complete click **Continue**.

11. Complete the *Credentials* section. Answer questions related to the type of training provider and credentials offered, and then click **Save** to continue.

12. Complete the *Debarment* section and click **Save** to continue.

13. Complete the *Accreditation & Financial Aid* section. This information will be viewable by the public – please complete any fields you wish to display with your school's information and click **Save** to continue.

At this stage of the account creation process the Provider Status is *Pending Approval.*

14. Complete the *Manage Programs* section. You may add one program when creating a new Provider Account as part of the registration process. See Add a Provider Program instructions starting with step 2.

15. Click **Save**. The new provider record is now complete. After your user account is approved, you can return to the *My Programs* page and enter additional programs.

Add a Provider Program

1. On the left menu, click **My Programs**. The *Manage Programs* page will display. Click **Add Program**.
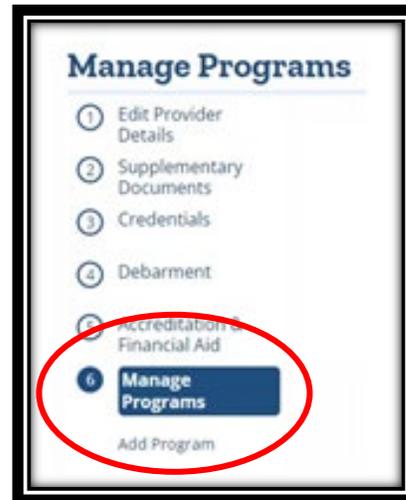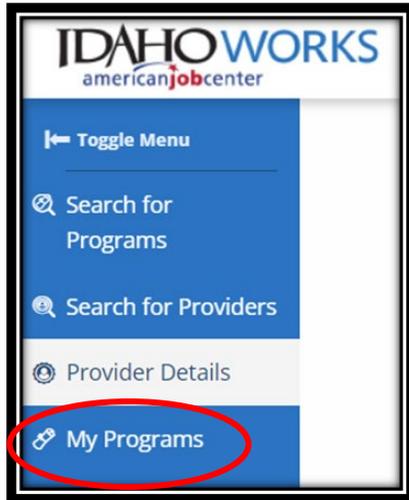
2. Enter information for the training program noting these important details:

   a. **Single Course or Set of Courses**

If multiple courses are required to obtain a single credential, do not list any of the courses as a single course/class. This applies even when a WIOA participant is only required to take a single course to obtain the credential.

Test preparation courses must be included as part of a training program of multiple courses.

Single courses are only allowed in the following circumstances:
   i. An occupation-specific credential may be obtained at the conclusion of the course;
   ii. A skills assessment demonstrating competency is conducted at the

end of the course; OR

    iii. An employer certifies that the course provides skilled workers ready for immediate employment.

b. Program Name

The system only displays the program name to the public, so programs with different outcomes look like duplicates. If your entity provides multiple programs with the same name but different completion credentials, use one of the following methods to report the Program Name:

    i. Enter the name of the program and the completion credential into the *Program Name* field. For example, if a university submits both undergraduate and graduate programs for Social Work, they should list the programs as "Social Work BSW" and "Social Work MSW."

    ii. If a single program provides multiple options for a credential, enter the program once into the system and list each of the credentials in the *Program Synopsis*. Example: "This program results in an AA or AS degree."

c. Total Credit/Curriculum Hours

Enter clock hours here instead. For academic credits, use the institution's standard conversion where 1 semester credit hour = 30 – 37.5 clock hours. A program with 128 credit hours would be approximately 3,840 clock hours.

d. Total Number of Training Weeks
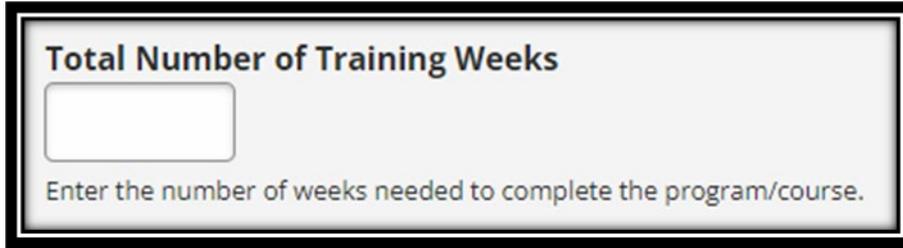
Total Number of Training Weeks

Enter the number of weeks needed to complete the program/course.

Record the length of the program in weeks as if completed by a full-time student. If the program is less than one week, enter 1.

e. Type of Credential
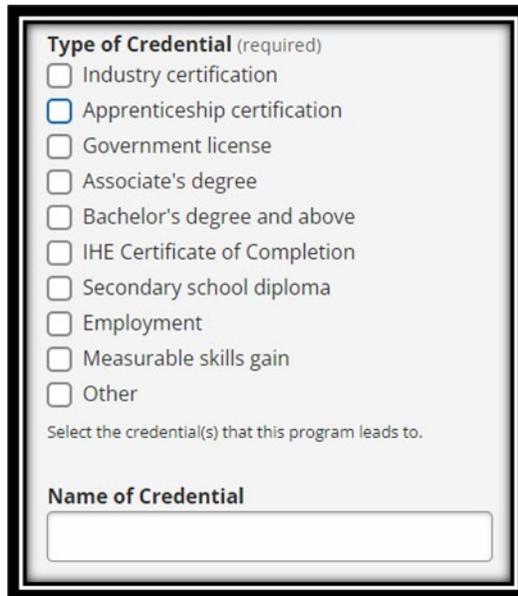
Type of Credential (required)
- ☐ Industry certification
- ☐ Apprenticeship certification
- ☐ Government license
- ☐ Associate's degree
- ☐ Bachelor's degree and above
- ☐ IHE Certificate of Completion
- ☐ Secondary school diploma
- ☐ Employment
- ☐ Measurable skills gain
- ☐ Other

Select the credential(s) that this program leads to.

Name of Credential

   i. **Industry certification** – A professional, industry, or employer organization or product manufacturer or developer using a valid and reliable assessment of an individual's knowledge, skills, and abilities.

  ii. **Apprenticeship certification** – Certificate of completion of the educational component of an industry-recognized or Registered Apprenticeship.

 iii. **Government license** – Credential awarded by a public regulatory agency based on fulfillment of educational, work experience, or skill requirements that are legally necessary for an individual to use an occupational or professional title or to practice an occupation or profession. (ex: FAA Aviation Mechanic License, or CNA)

iv. **Associate's degree** – Academic award for completion of educational requirements for an Associate of Art, Associate of Science, or Associate of Applied Science awarded by an institution of higher education.

v. **Bachelor's degree and above** – Academic award for completion of educational requirements for a bachelor's or advanced degree awarded by a college or university. Note – WIOA Title I-B does not include graduate degrees in its definition of recognized postsecondary credential. Therefore, graduate degrees do not count toward the credential attainment measure used for program performance reporting.

vi. **IHE Certificate of Completion** – Qualifying academic certificate awarded for completion of career-technical education requirements.

vii. **Secondary school diploma** – Program participants can attain a high school diploma or equivalent.

viii. **Employment** –The program of study is associated with obtaining employment in a specific occupation.

ix. **Measurable skills gain** – If selecting "Measurable skills gain," please ensure documentation can be provided consistent with [WIOA Federal Regulations Training and Employment Guidance Letter No. 10-16, Change 3](#).

f. **In-State and Out-of-State Tuition Registration Fees, Books, and Supplies**

Program Cost Items

ⓘ Add to the Program description by completing the Program Costs listed below. When finished, click Save.

	Costs	Description
In-State/District Tuition	0.00	
		If district, name the district.
Out-of-State/District Tuition	0.00	
		If district, name the district.

Enter the program's total cost of tuition assuming a normal time for completion. For those programs charging by credit hour or other component unit, enter the number of units and the cost per unit in the description field. Proprietary or private institutions with undiscounted costs may enter N/A in the *Out-of-State/District Tuition* description field.

g. Registration Fees, Books, and Supplies

Registration Fee	0.00	
		If the fee is due for each semester and the program is more than one semester, describe.
Books (Estimated)	0.00	
		If the cost for books is for one semester, and the program is more than one semester, describe.
Supplies/Materials/Hand Tools (not included in tuition)	0.00	
		Enter a description of the cost. List the supplies, materials, and hand tools required and the student's estimated cost. If the cost is for one semester, and the program is more than one semester, describe. Include all costs: art supplies for art classes, fuel charges for truck driving, etc.

Include the sum of all applicable fees that students will incur related to registration, assuming a normal time to completion.

Record estimates for the student's cost for books and supplies, assuming normal time to completion. Describe the types of required supplies in the *Supplies/Materials/Hand Tools* description field.

h. Other Fees

The *Other Fees* field should include technology fees, lab fees, athletic center fees, and other fees required by registered students. Itemize the types of fees in the description field.

Note – The sum of all *Tuition and Fees* fields should equal the total out-of-pocket expenses for a student to complete the program of training.

i. Occupations

i.   **Program Type** – Carefully select a CIP code for the program. The CIP code will be used to compare similar programs across the state and country.

ii. **Occupation Title** – Enter at least one and up to three occupations that students may obtain based on the completion of the program of study.

iii. **Hourly Wage** – Enter the hourly wage for the occupation. If unknown, IDOL will supply the hourly entry wage for the occupation based on published labor market information.

iv. **Required Certification** – Enter up to three associated credentials

students may obtain related to the occupations or completion of the programs of study. <u>These DO NOT have to be required certifications.</u>

j. Initial Eligibility Program Performance Reporting

Begin Date (required)

[   ] 📅 Today

End Date (required)

[   ] 📅 Today

Number Served (required)

[0]

The total number of students enrolled in the program during the reporting period.

Number Exited (required)

[0]

The total number of students who completed, withdrew, or transferred from the program during the reporting period.

Number Completed (required)

[0]

Completed: 0%

The total number of students who successfully completed the program during the program year (did not withdraw or transfer).

Enter the number of students that have enrolled, exited, and completed the program within the last complete program year. Program years span July through the following June.

Ex: If you were applying for ETP approval on September 1, 2024, the previous program year would be July 2023 – June 2024. The "Begin Date" would be entered as July 1, 2023, and the "End Date" would be entered as June 30, 2024. The number of students served, exited, and completed should reflect the program statistics for that period.

Numerator Employed in 2nd Quarter After Exit (required)

[0]

The total number of all student exiters who were employed in unsubsidized employment in the 2nd quarter after their exit quarter.

Denominator for Employed in 2nd Quarter After Exit (required)

[0]

The total number of all student exiters who were in their 2nd quarter after exit during the reporting period.

Numerator Employed in 4th Quarter After Exit (required)

[0 ⇕]

The total number of all student exiters who were employed in unsubsidized employment in the 4th quarter after their exit quarter.

Denominator for Employed in 4th Quarter After Exit (required)

[0]

The total number of all student exiters who were in their 4th quarter after exit during the reporting period.

Numerator Who Attained Credential (required)

[23]

Total number of student exiters who completed their program of study and attained a credential associated with the program of study within one year after exit from the program.

Denominator Who Attained Credential (required)

[0]

The total number of students who exited during the report period.

Median Earnings in 2nd Quarter After Exit

[0.00]

Record the quarterly earnings that is at the midpoint between the highest and lowest quarterly earnings in the 2nd quarter after exit.

Average Earnings in 2nd Quarter After Exit (required)

[0.00]

Record the average total earnings for the 2nd quarter after exit.

Average Earnings in 4th Quarter After Exit (required)

[0.00]

Record the average total earnings for the 4th quarter after exit.

WIOA Performance Indicators and Measures

[Save] [Cancel]

Note - Most annual Program Performance Reporting will be entered into this section in the *IdahoWorks* profile. Any additional reporting requests will be emailed to the provider contact from WIOAETP@labor.idaho.gov with instructions.

3. Click **Save**.

4. Wait for Program Approval. You will be notified via email from WIOAETP@labor.idaho.gov when the program is approved or denied.

   Reminder – It's a best practice to log in to your *IdahoWorks* ETP user account every 180 days or less to maintain an active account status. If you get locked out of your account, please send an email to WIOAETP@labor.idaho.gov.

Check Program Approval Status

1. An individual program's WIOA status is listed on the program's *Program Description* page. Click **My Programs** in the left-hand menu.
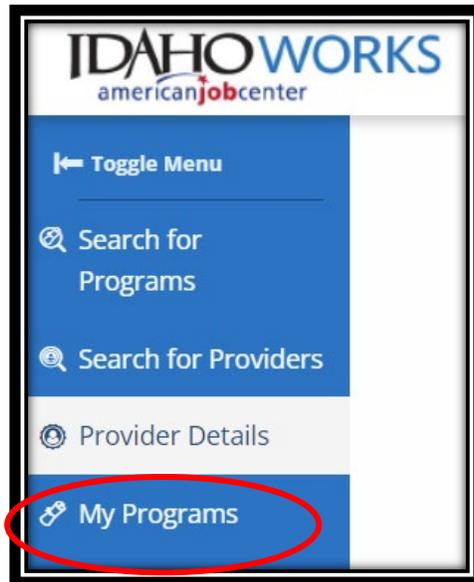
2. The *Manage Programs* page for that program displays. The *Approved* column shows program approval status and the *Updated* column shows the date the status was changed. The *Approved* column could show:

   a. **New program not yet approved** – The program is pending and has not yet been reviewed for approval (the *Updated* column will be blank).
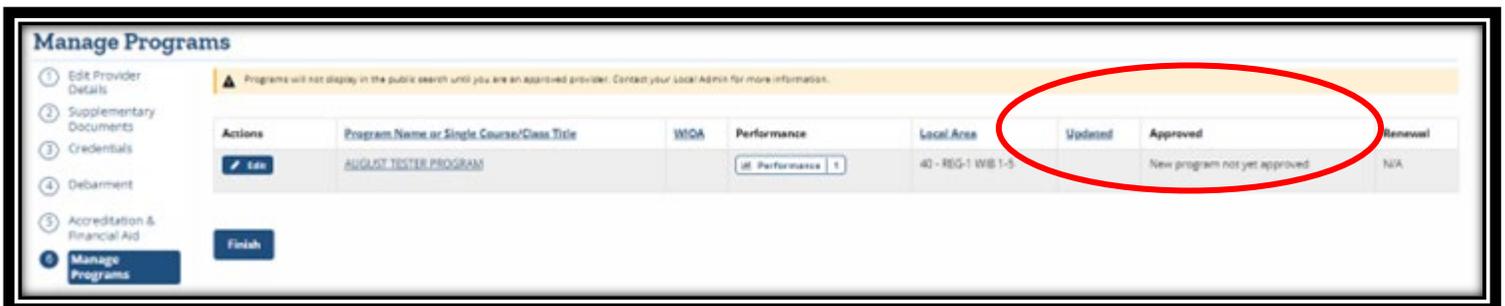
b. **State Approved** – The program is approved and *Updated* column shows the date that this occurred. Eligibility expires one year from the approval date.

Updated	Approved	Renewal
Aug 01, 2024	State Approved	Aug 01, 2025

c. **State Denied** – The program is denied and *Updated* column shows the date that this occurred.

Updated	Approved	Renewal
Aug 01, 2024	State Denied	N/A

d. **State Removed** – The program has been removed from the Eligible Training Provider List by local and state ETP administrators because its eligibility has expired or is otherwise out of compliance with the ETP Policy.

Updated	Approved	Renewal
Jul 30, 2024	State Removed	N/A

Complete Annual Renewal Process

Training providers and programs on Idaho's ETPL must be reviewed and renewed following the first year of initial approval and then every two years thereafter for continued eligibility. It is a recommended best practice to review each program's information annually to ensure accuracy.

1. Verify that your *IdahoWorks* Training Provider account and institution's details on the *Edit Provider Details* page are current and up to date, including:
   a. **Provider Name** – An institution can have more than one record. Take care to use the name consistently.
   b. **Address** – This information is used by the public to get directions to an office or location that is available for students to meet with staff in-person as required or requested.
   c. **Email Address** – A contact email address is required and will be used by the EPTL Administrator to contact the institution regarding WIOA eligibility or other correspondence.

2. Upload the required documents into the *Supplementary Documents* section for annual or biennial (2 year) renewal:

Upload Every Year for Renewal	Upload Every Other Year for Renewal
1. Attachment VI – *IdahoWorks* Eligible Training Provider Assurances	1. Attachment V – Eligible Training Provider Supplemental Questions for Continued Eligibility 2. Attachment VI – *IdahoWorks* Eligible Training Provider Assurances

3. Review these account sections to ensure completion and accuracy:
   - *Credentials*
   - *Debarment*
   - *Accreditation & Financial Aid*
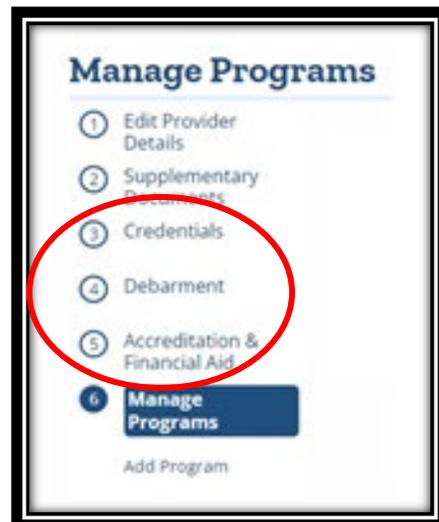
4. Update program information in the *Manage Programs* section, including any program cost changes.
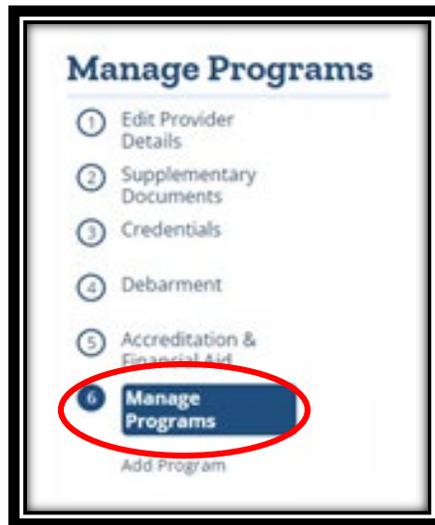
5. Review the current Idaho ETP Policy and reach out WIOAETP@labor.idaho.gov about any concerns.

6. Inform WIOAETP@labor.idaho.gov if you wish to remove programs from the ETPL. If you wish to appeal a program renewal denial, an explanation of your right to appeal will be included with the denial letter.

WIOA Eligible Training Provider
Data Submission Agreement

The Workforce Innovation and Opportunity Act (WIOA) enacted July 22, 2014 contains new requirements for obtaining and maintaining status on the WIOA Eligible Training Provider List (ETPL). The State is now required to publish annual performance reports for eligible training provider programs. These performance reports include basic information about training programs such as costs, as well as employment outcomes for the students completing the program.   Program performance information will be used as eligibility criteria to apply or remain on the WIOA ETPL in subsequent years.

WIOA Eligible Training Providers must annually provide program-related information for students enrolled in each program listed on the ETPL. The program-related information (data elements) will be used to develop the annual performance reports.

Training providers are required to report student record data for all students, including both WIOA participants and non-WIOA participants, enrolled in the programs listed on the ETPL. The social security number must be used as an identifier for tracking enrollments and exits. The Idaho Department of Labor will determine the student employment and wage outcomes using the social security number submissions matched against Unemployment Insurance Wage Records and other available employment databases. Training providers must also submit information on student demographics, enrollment, completion, and credential obtainment to provide the reporting data not captured through social security numbers.

All current information regarding the Idaho WIOA Eligible Training Provider Policy, Application Procedures, and Annual Reporting Requirements is available at www.labor.idaho.gov/ETP. Questions may be directed to WIOAETP@labor.idaho.gov.

In order to qualify for inclusion on Idaho's WIOA Eligible Training Provider List, I certify that I, on behalf of

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- Have reviewed the Idaho WIOA Eligible Training Provider Policy as established by the Idaho Workforce Development Council.

- Have reviewed the Idaho WIOA Training Provider Eligibility Application and Procedures as provided by the Idaho Department of Labor.

- Have reviewed the annual program and student data reporting requirements established by the U.S. Department of Labor and fulfilled by the Idaho Department of Labor.

- Will provide all requested information regarding my institution and training program as directed by the Idaho Department of Labor.

- Will collect student record data, as described in the requirements, for all attendees of eligible programs.

- Will annually report to the Idaho Department of Labor the required student records using the secure transmission process as directed by the Department.

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_____ designates the following individual to work with staff from the Idaho Department of Labor to provide the required data elements and receive training on collection, secure storage and transmission. I agree to notify the Idaho Department of Labor immediately when this person is no longer authorized.

Point of contact for data collection:

Name of Entity:

Name of Point of Contact:

Title:

Signature:

Date:

Mailing Address:

Telephone Number:

Email Address:

I understand this agreement is required for application to the Idaho WIOA Eligible Training Provider List. I also understand that failure to comply with the written application or reporting requirements from the Idaho Department of Labor will result in removal from the Idaho WIOA Eligible Training Provider List.

_____   _____
Signature   Date

_____
Print Name and Title

_____
Name of Entity

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Attachment II - Eligible Training Provider
Supplementary Questions for Initial Eligibility

How long has the training institution been providing training to paying participants?

             Months   Years

Does training institution agree to send students an annual Equal Employment Opportunity Survey and Customer Satisfaction surveys when prompted by IDOL?

        Yes   No

Does the training program an institution is looking to add to the Eligible Training Provider List provide physical or virtual facilities with appropriate tools or equipment to meet instructional and skills assessment needs?

        Physical   Virtual   Appropriate Tools/Equipment

Does the training program measure participants' reportable skills gains through assessments (tests, quizzes, benchmarks, practical assessments, etc.)?

        Yes   No

What is the training program's dropout rate?   %

What is the training program's student loan default rate?   %

What is the training program's job placement/post-graduation employment rate?*

        %

What is the training program graduates' median earnings?* $ per

What is the credential (certification or degree) attainment rate for the training program?*

        %

*If the training institution has not previously collected this program data, alternative information may be used. Complete Attachment IV - Alternate Performance Reporting Questions for Initial Eligibility and upload it with the other required documents to the provider's *IdahoWorks* profile.

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Designation, Identification of Complaint Specialists

Dear WIOA Eligible Training Provider or WIOA On-the-Job Training Employer,

The U.S. Department of Labor (USDOL), in Section 188 of the Workforce Innovation and Opportunity Act (WIOA) and 29 CFR Part 38, requires each governor to establish a Methods of Administration (MOA) that includes a system for periodically monitoring the compliance of recipients, including eligible training providers (ETP) and on-the-job Training (OJT) employers, to determine if they are conducting their WIOA Title I financially assisted program in a nondiscriminatory manner. Periodic monitoring must include, but is not limited to, records analysis and policy and process review to ensure compliance with federal equal opportunity regulations. Failure to participate and cooperate in these processes will result in removal from program participation.

The purpose of this survey is to assist the state in implementing its equal opportunity monitoring system and provide an initial assessment to ensure that WIOA programs, services, and employment, including those of subrecipients (WIOA eligible training providers) and contractors (OJT employers), are provided in a manner that ensures equal opportunity and nondiscrimination. This system will also ensure that applicants, participants, and employees who may be individuals with disabilities or who are limited in English proficiency will have access to WIOA financially-assisted programs, services and employment.

The Idaho Department of Labor requests training entities on the WIOA ETP list complete the following survey. We estimate completing the survey will take no more than 10 to 15 minutes. We appreciate your cooperation in this process.

Thank you,

Crystal Lowther
Technical Records Specialist
(208) 332-3570 ext. 4325
Crystal.Lowther@labor.idaho.gov

* 1. Please identify the individual serving as your Equal Opportunity complaint specialist.

[   ]

* 2. Please provide the name of the staff member who serves as a backup for this purpose.

[   ]

Notice and Communication

* 3. Are the "Equal Opportunity is the Law" posters prominently displayed in your office in both English and Spanish in all areas used by customers and staff?

  ◯ Yes

  ◯ No

* 4. Is information about the right to file a complaint included in all staff (including on-the-job training participants) and/or student files?

  ◯ Yes

  ◯ No

* 5. When creating outreach materials, are both the taglines "Equal Opportunity Employer/Program" and "Auxiliary aids and services available upon request" included?

  ◯ Yes

  ◯ No

* 6. When preparing grant applications, agreements and contracts, do the documents include the required language stating all recipients must comply with the basic tenets of all nondiscrimination acts and laws?

  ◯ Yes

  ◯ No

* 7. What efforts does your office make to ensure that communications with individuals with disabilities are equally as effective as communications with individuals without disabilities?

Assurances and Training

* 8. Are your staff or students aware of your organization's responsibility to comply with federal laws as they relate to the Civil Rights, Equal Opportunity, Age Discrimination and Americans with Disabilities acts or laws?

  ◯ Yes

  ◯ No

* 9. Are your employees aware of your organization's sexual harassment, equal opportunity and nondiscrimination policies?

  ◯ Yes

  ◯ No

* 10. Do you have equal opportunity and nondiscrimination policies in place for review if necessary?

  ◯ Yes

  ◯ No

Accessibility

* 11. Does your parking area include designated parking with appropriate signage for customers with disabilities?

　◯ Yes

　◯ No

* 12. Are the entrances to your building accessible to customers with disabilities?

　◯ Yes

　◯ No

* 13. Does your building feature a designated restroom or restroom stall with the appropriate signage for customers with disabilities?

　◯ Yes

　◯ No

* 14. When services, activities and workshops are provided, are they delivered in an area accessible to customers with disabilities?

　◯ Yes

　◯ No

* 15. Are auxiliary aids, services or reasonable accommodations provided to customers with disabilities?

　◯ Yes

　◯ No

* 16. Do you have a written policy explaining reasonable accommodation?

　◯ Yes

　◯ No

Universal Access

* 17. Is information provided to people with limited English-speaking proficiency (LEP) in their own language?

  ◯ Yes

  ◯ No

* 18. Are there signage, customized workshops, language line, etc., to ensure limited English proficient customers have universal access to your services? Is there a specific LEP policy in place?

  ◯ Yes

  ◯ No

* 19. If needed, can an American Sign Language interpreter be provided for customers?

  ◯ Yes

  ◯ No

* 20. Are TDD/TTY or Relay Service available for customers who are deaf or hard of hearing?

  ◯ Yes

  ◯ No

Record Keeping

* 21. Is equal opportunity data collected on customers, applicants, registrants, participants, employees and applicants for employment?

○ Yes

○ No

* 22. Are student/staff medical records kept confidential?

○ Yes

○ No

Complaint Procedures

* 23. Are staff/students familiar with complaint procedures?

  ○ Yes

  ○ No

* 24. Are complainants made aware that retaliation for filing a discrimination complaint is prohibited?

  ○ Yes

  ○ No

Contact information

* 25. Contact information

Name of person completing survey

Training Provider/Company Name

Address

Address 2

City / Town

State / Province

ZIP / Postal Code

Email

Phone

Attachment IV - Alternate Performance Reporting
Questions for Initial Eligibility
Please provide as much information as possible.

What is the training institution's student retention rate?   %

What is the training institution's employment placement rate?   %

What is the training institution's completion rate?   %

What number of students have obtained employment after completion?

What number of students have attained a credential or degree?

Provide a narrative that describes and quantifies how the training program improves students' employability and/or earning potential.

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Attachment V - Eligible Training Provider
Supplementary Questions for Continued Eligibility
Please provide as much information as possible.

Does the training program provide physical or virtual facilities with appropriate tools or equipment to meet instructional and skills assessment needs?

Physical   Virtual   Appropriate Tools/Equipment

What is the training program's drop out rate?   %

What is the training program's student loan default rate?   %

What is the training program's job placement/post-graduation employment rate?   %

Is the training program offered in-person, virtually, or as a hybrid model?

In-Person Only   Virtual Only   Hybrid

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IdahoWorks Eligible Training Provider Assurances

The Workforce Innovation and Opportunity Act of 2014 (WIOA) requires that states approve and maintain a list of training providers before WIOA funds can be used to pay for occupational training for WIOA participants. To become a WIOA eligible training provider (ETP), all training providers must complete this application, agree to program requirements and certify the assurances below. Idaho Department of Labor staff will review your application and determine approval on behalf of the Governor's Workforce Development Council (WDC).

Please note that programs in basic skill training, basic computer software training, and general preparatory services are exempted from these requirements. Appropriate WIOA participants will be able to access these services in accordance with federal and state program guidelines. Providers of these services do not need to complete the application process to be eligible to provide these basic services.

The initial application is to determine eligibility to become an approved WIOA occupational training provider. Approved training providers included on the state's Eligible Training Provider list are eligible to provide training services for WIOA participants for 12 months. For subsequent eligibility, WIOA requires that training entities provide program outcome information on all students served through the approved programs.

Program Requirements

In addition to completing this electronic application, training providers must certify to provide the Idaho Department of Labor with the following items to complete their application for consideration of inclusion to the state's Eligible Training Provider list:

- Provide and allow for the display of performance and cost information on IdahoWorks about their training/educational institution and programs to individuals seeking such information, as required by WIOA and the (WDC);
- Certify that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation by any Federal department or agency, and that the federal government has the right to seek judicial enforcement of this assurance.
- Idaho Code requires that all proprietary schools operating in the State of Idaho register and hold a valid certificate of compliance issued by the State Board of

Education (SBOE). The Idaho Department of Labor requires a copy of this certification to complete a training provider's application. Training providers exempted from this requirement under Idaho Statute 33-2402 need not apply with the SBOE. Providers are strongly encouraged to contact the SBOE to ensure compliance. They may be contacted at (208) 332-1587 or visit: https://boardofed.idaho.gov/higher-education-private/proprietary-schools-non-degree-granting/

- The state also requires training providers to submit a copy of their refund policy that is equal to or exceeds the minimums established by the Idaho State Board of Education.

Applicants must submit these additional documents to the following address:

Idaho Department of Labor
ETP/Workforce Systems Bureau
317 W. Main St.
Boise, ID 83735-0790

Or email attachments to: WIOAETP@labor.idaho.gov

Fiscal Agreement

For training programs approved for the WIOA ETP list, the training provider further agrees to accept the WIOA Purchase Agreement, in accordance with State Rules, State Policies and federal regulations, as method of payment utilizing the process as outlined below:

Reimbursement claims for approved costs shall be submitted under the following guidelines:

- Costs incurred for tuition/fees will be billed after the refund period has expired but will be submitted no later than 180 days following the institutional enrollment date.
- All refunds due as a result of trainee withdrawal will be processed in accordance with the institutional policy.
- Costs incurred for books/supplies, uniforms, and tools will be billed no later than 180 days following the date of purchase.
- In all instances, final reimbursement claims will be submitted no later than June 30th of the year in which the activity takes place.
- The training provider acknowledges and agrees that the WIOA Administrative Entity reserves the right to deny payment for reimbursement claims not submitted in accordance with the above guidelines.

Assurances

Training providers must assure that it and all its employees responsible for providing training services will comply fully with all nondiscrimination and equal opportunity provisions of the laws listed below:

- Federal Title 29 (Labor) Part 37 and WIOA Section 188 prohibit discrimination against all individuals in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation, or belief, and against beneficiaries on the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIOA Title I financially assisted program or activity
- Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis of race, color, and national origin
- Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities
- The Americans with Disabilities ACT (ADA) of 1990 which prohibits discrimination against qualified people with disabilities based on disability
- The Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age
- Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs
- The Idaho Acts Prohibiting Discrimination (Title 67 Chapter 59 & Title 44, Chapter 17)

The undersigned training provider and/or its agent certifies that in submitting a training program application for approval as a WIOA-ETP, these assurances and requirements apply to the provider's operation and all agreements to carry out the WIOA Title I financially assisted program or activity. The undersigned also acknowledges the Idaho Department of Labor, as agent of the WDC, has the right to remove the training provider's record and information from IdahoWorks for non-compliance with these requirements and/or assurances.

Name of Training Provider: _____

Provider Signature: _____

Printed Name: _____

Date: _____

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