

Application Instructions for Idaho WIOA Eligible Training Providers

Effective April 15, 2019

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General Process

The Idaho Department of Labor (IDOL) maintains and determines eligibility for Idaho's Workforce Innovation and Opportunity Act (WIOA) Eligible Training Provider List (ETPL). Applications are initiated through the IdahoWorks online portal followed by a notification email to WIOAETP@labor.idaho.gov. Training providers must supply information about their training entity and each program applying to the ETPL according to the instructions in this guide.

Approval of programs will be subject to the institution and program criteria outlined in the [Idaho Policy for WIOA Eligible Training Providers](#) as defined by the Idaho Workforce Development Council.

A checklist with all steps for applying for WIOA ETP Eligibility is located at the end of the document.

Application Information

All information about becoming a WIOA Eligible Training Provider is located on this website: www.labor.idaho.gov/etp.

Required Information for New Eligible Training Provider Applications

To apply for the WIOA ETPL, training providers must first register and complete the application process beginning at <https://idahoworks.gov/ada/r/training>. This online application collects and displays all of the information WIOA ETPs must provide as required in WIOA Sec. 122.

Each institution is registered by FEIN (Federal Employer Identification Number), except for U.S. Department of Labor (USDOL) Registered Apprenticeships and the workforce training centers at the public community colleges. USDOL Registered Apprenticeships will use their Registered Apprenticeship Number. The public workforce training centers at the community colleges must contact WIOAETP@labor.idaho.gov to receive the correct registration number.

Approved Providers Adding New Programs to the ETPL

Training providers currently approved to offer programs on the ETPL may add new programs at any time using an IdahoWorks account associated with the institution. Each program submission will be evaluated on its own merits and approved or denied by IDOL staff based on the initial eligibility criteria from the Idaho Policy for WIOA Eligible Training Providers. Please notify WIOAETP@labor.idaho.gov after each new program submission.

Exceptions to Initial Application Procedures

All training providers must comply with these application instructions unless they are one of the excepted categories listed below:

Public Postsecondary Academic Programs - Consistent with existing policy, academic programs provided by Idaho's public colleges and universities will be approved for initial eligibility under WIOA. These programs will be added to the ETPL upon request of a WIOA career planner to IDOL and confirmed by OSBE.

Out-of-State Training Providers – With the exception of Registered Apprenticeships, out-of-state providers are not allowed on Idaho's WIOA ETPL. WIOA participants may attend programs offered by out-of-state providers that are: 1) listed on another state's WIOA ETPL AND 2) there is a signed reciprocal agreement between Idaho and the respective state's ETP administrator or appropriate signatory.

Registered Apprenticeships – U.S. Department of Labor Registered Apprenticeship programs are automatically placed on the WIOA ETPL upon request from the apprenticeship sponsor. Apprenticeship sponsors may also create an account in IdahoWorks to provide program information. Submitting the ETP Data Submission Agreement and completing the reporting process are optional for Registered Apprenticeship programs.

Reporting Requirements for Eligible Training Provider Applicants

Training providers must complete the information for their institution requested within the IdahoWorks system and upload the required documents at the end of the provider registration page. There are different requirements for private and public educational institutions.

Private educational entities must upload a copy of the institution's current Certificate of Registration with the Office of the Idaho State Board of Education ([OSBE](#)) and submit a signed copy of the [ETP Data Submission Agreement Form](#).

The ETP Data Submission Agreement will identify an individual who is authorized to report the required program outcomes and will complete the second part of the application process referenced in the Appendix. The named individual will be authorized to create an account on the Idaho Secure File Transfer System (IFiST) maintained by the Idaho Department of Labor. Instructions for accessing IFiST and the WIOA data reporting requirements are outlined in the [Idaho WIOA Private ETP Reporting Manual](#). A copy of the private training provider program template is available on the www.labor.idaho.gov/ETP website and linked directly [here](#).

Idaho public educational entities governed under the authority of the Idaho State Board of Education do not need to submit documentation within the IdahoWorks application module. However, the individual responsible for reporting required program outcomes must register with the OSBE secure transfer site as directed in the Idaho [WIOA Public Postsecondary Provider Reporting Manual](#). Copies of the three templates used by public training providers are located on the www.labor.idaho.gov/ETP website.

IDAHOWORKS Registration Instructions for Program Providers

Application Instructions

Detailed instructions for registering in the IdahoWorks system are in this section.

Within the instructions are several tables of identifying the requested and required information. **Please review this information in advance and have it on-hand when you begin the registration process.**

Guide for tables

✓ indicates that information is required for this field.

[Linked field](#) indicates a link providing additional information needed to complete the field.

All information submitted into IdahoWorks except for User Profile and Provider Contact fields are published under the training provider's record in IdahoWorks.

After completing the registration process in IdahoWorks, please send a notification email to WIOAETP@labor.idaho.gov. IDOL staff will contact the training provider about the approval status of its application and provide additional instructions.

USER REGISTRATION

1. In order to register with IdahoWorks America’s Job Link Alliance (AJLA), please go to the following website: <https://idahoworks.gov> and click the “Training” tab towards the top of the page.
2. In the Training Provider Login section, click “Register for a new account”.

The screenshot shows the IdahoWorks website interface. At the top, there is a navigation bar with the Idaho Dept. of Labor logo, a search bar, a 'Jobs' dropdown menu, and links for 'CONTACT US' and 'LOG IN / REGISTER'. Below the navigation bar is a main menu with tabs for 'HOME', 'JOB SEEKERS', 'EMPLOYERS', 'TRAINING', 'RESOURCES', and 'PROGRAMS'. The 'TRAINING' tab is highlighted with an orange circle and a large orange number '1'. Below the navigation bar, the page is divided into two columns. The left column contains a search section for training and education providers, with fields for 'Keywords' (with an example 'Computer or Accounting') and 'School type' (with a 'Please Select' dropdown), and a 'Search' button. Below this is a section for finding WIOA eligible providers, with a 'GO' button. The right column is titled 'Training Provider Login' and contains a paragraph of text explaining the WIOA program. Below the text is a blue button labeled 'Register for a new account', which is highlighted with an orange circle and a large orange number '2'. Below the button is a section for existing users with a 'Log In' link and a form with 'Username' and 'Password' fields and a 'Log In' button.

Note: Before creating a new training provider account in IdahoWorks, first verify that the institution’s Federal Employer Identification Number (FEIN) is already registered in the system. **All current and many previously listed training providers are already recorded within IdahoWorks.** Each institution may have multiple user accounts associated with its FEIN. It is the responsibility of the training provider to notify IDOL at WIOAETP@labor.idaho.gov if an account associated with its institution should be discontinued.

3. Before you can create a user account, you must determine if there is already a record for your training entity. Enter your entity’s FEIN underneath the Provider Lookup, then click “Search” to look up your institution.

OR

4. Because U.S. Department of Labor Registered Apprenticeships are exempt from the eligibility requirements, their application process is different. They must enter the assigned number for their Registered Apprenticeship program to begin.

The screenshot shows two search forms. The first is titled "Provider Lookup" and includes the instruction "Search by FEIN to determine if your institution is already registered." Below this is a text input field labeled "FEIN" and a blue "Search" button. The second form is titled "Apprenticeship Lookup" and includes the instruction "Search by Registered Apprenticeship Number to determine if your apprenticeship program is already registered." Below this is a text input field labeled "RA Number" and a blue "Search" button. Both search buttons are circled in orange. To the left of the first form is a large orange "3." and to the left of the second form is a large orange "4."

5. If your entity is already registered in the system, you will see the next screen. The entity associated with the FEIN will display beneath the FEIN*. Select the entity name to create a user account associated with the entity list.

*Note: If the entity information returned for the FEIN is NOT correct, do NOT click “Add a New Provider.” Please notify the WIOAETP@labor.idaho.gov mailbox to discuss correcting the information.

5.

The screenshot shows the 'Provider Lookup' section of a web application. At the top, it says 'Search by FEIN to determine if your institution is already registered.' Below this is a search form with 'FEIN' and the value '001142564' in a text box, and a blue 'Search' button. A red circle highlights the search result: 'Test Training Provider (ID: 1553), ddd, 208-222-2222'. Below the result is a grey box with '-OR-' in the center. At the bottom of this section is a blue button labeled 'Add a New Provider'. Below this is the 'Apprenticeship Lookup' section, which says 'Search by Registered Apprenticeship Number to determine if your apprenticeship program is already registered.' It has a search form with 'RA Number' and an empty text box, and a blue 'Search' button.

6. **OR** if your entity is not already registered in the system, you will see the next screen. To continue, click “Add a New Provider.”

6.

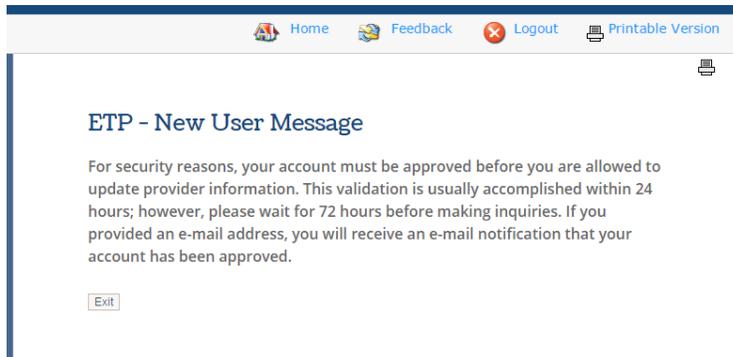
The screenshot shows the 'Provider Lookup' section of a web application. At the top, it says 'Search by FEIN to determine if your institution is already registered.' Below this is a search form with 'FEIN' and the value '987654321' in a text box, and a blue 'Search' button. A yellow highlight is under the message: 'There are currently no registered training providers with this FEIN.'. Below this message is a blue button labeled 'Add a New Provider', which is circled in red. Below this is the 'Apprenticeship Lookup' section, which says 'Search by Registered Apprenticeship Number to determine if your apprenticeship program is already registered.' It has a search form with 'RA Number' and an empty text box, and a blue 'Search' button.

7. The Create Training Provider Account page will be displayed next. Follow the instructions to complete the fields to create a **New User Registration and Profile** (not shown in this guide). Then proceed to the Provider Registration section on the same page.

OR

8. If you are connected to an existing provider, you will see the following message.

8.



Please send an email to WIOAETP@labor.idaho.gov to notify staff to approve your account.

Click submit and you will be directed to the **Provider Menu page** to add or manage programs.

USERNAME OR PASSWORD LOOKUP

1. Existing providers who do not remember their log on information to the IdahoWorks portal should select Forgot Username or Password.



2. For security purposes, the system will automatically disable accounts unused for 180 days. If you receive a message that your account has been disabled, please contact WIOAETP@labor.idaho.gov with your username so that staff may manually enable the account.

PROVIDER REGISTRATION

1. If your entity is not already listed in IdahoWorks, complete this section to add a new provider, complete the Provider Information fields on the same page as the User Profile.

The table below contains the fields requested to complete the Provider Registration. The required fields are checked. Please have this information on-hand and available to you when registering.

All information submitted is published under the training provider's record in IdahoWorks.
(except User Profile and Provider Contact fields)

| Field Name | Description |
|-------------------------|---|
| ✓ Provider Name | (Text) Type the name of the training provider. It is possible to have more than one listed name in ProviderLink. Take care to use the name consistently. For example, if the name is Hamilton Area Community College, one record may read Hamilton ACC, another may read HACC, and another Hamilton Area Community College. |
| ✓ Address | (Text) Type the street address for the provider. This address is used by the public to map the location and get directions. Avoid providing a P.O. box, because these cannot be mapped. |
| ✓ City | (Text) Type the city where the institution is located. |
| ✓ County | (Drop-down) Select the training provider's county. |
| ✓ State | (Drop-down) Select the state where the institution is located. |
| ✓ Zip Code | (Digits) Type the ZIP of postal code of the institution. |
| ✓ Country | (Drop-down) If outside of the United States, select the country in which the training provider is located. |
| ✓ Phone | (Digits) Type the telephone number for the training provider. |
| Fax | (Digits) Type the fax number for the training provider. |
| Email Address | (Text) Type an email address to which the public can address general information inquiries. |
| Website Address | (Text) Type the website address for the training provider |
| Website Link | (Display Only) If a website address is entered, the URL displays as a link when the page is saved. |
| *FEIN | (Display Only) The FEIN entered in Provider Lookup displays. The FEIN can only be edited by ProviderLink staff. |
| ✓ Provider Contact Name | (Text) Type the full name of the contact person for the training provider. |
| ✓ Contact Title | (Text) Type the title of contact person for the training provider. |
| ✓ Contact Address | (Text) Type the full address of the contact person. |
| ✓ Contact City | (Text) Type the city where the contact person is located. |
| ✓ Contact State | (Drop-down) Select the state in which the contact person is located. |

| | |
|---|---|
| ✓Contact Country | (Drop-down) If the contact person is located in a country other than the United States, select that country. |
| ✓Contact Phone | (Digits) Type the telephone number for the contact person. |
| ✓Contact Email Address | (Text) Type an email address for the contact person. |
| ✓Training Institution Type | (Drop-down) Select an option to indicate the type of institution: <ul style="list-style-type: none"> • Charitable / Faith-Based Organization • College / University (Four Year) • Community-Based Organization • Employer • Government Agency • Labor Union • Other • Private Career School / College • Private Corporation • Public Community / Technical School / College |
| ✓Are reasonable accommodations available upon request for people with disabilities? | (Drop-down) Select Yes or No. |
| ✓Are you in any partnership(s) with business? | (Drop-down) Select Yes or No. |
| ✓Do you provide access to training for individuals who are employed? | (Drop-down) Select Yes or No. |
| ✓Do you provide access to training for individuals with barriers to employment? | (Drop-down) Select Yes or No. |
| ✓WIOA Youth Services Provider | (Drop-down) Select No. |
| ✓ Provide any supplementary documents | (Button) Click Choose Files to select files to upload |

The Provider Contact fields (Name, Title, etc.) are used by the ETPL Administrator to contact the institution regarding WIOA eligibility or other correspondence. A contact email address is required.

If indicated in the [Reporting Requirements](#) section, the following items must be attached under **supplementary documents**.* or emailed separately to WIOAETP@labor.idaho.gov

- Completed and signed [Data Submission Agreement](#)
- Copy of the entity's registration with the [Idaho State Board of Education](#) or other [authorizing government agency](#)

***Note:** If the page returns an error message for any reason, the documents will need to be reattached before resubmission of the page.

- After submitting the new training provider registration, a page listing the Equal Opportunity Assurances displays.* Carefully review the information on this page. If your entity ensures compliance, toggle the selection to “Yes” at the bottom of the page.

***Note:** The registration process will not continue until agreement with the assurances is provided (toggled to Yes). The application process will automatically terminate and the return the user to the IdahoWorks Home page.

- After submitting “Yes” to the Assurances page, the Eligibility/Degrees page displays. The purpose of this page is to collect basic information about the provider and its educational offerings and outcomes. This information will not necessarily be used to determine eligibility.

| TYPE OF TRAINING INSTITUTION | |
|---|--|
| ✓ Institution Type | (Check Box) Check all that apply: <ul style="list-style-type: none"> • Public • Private • Non-Profit • Sectarian |
| ✓ Postsecondary eligible to receive Title IV funds from Higher Education Act (HEA) and provides an associate degree, baccalaureate degree, or certificate | (Drop-down) Select Yes or No. Note: Certificate means a technical or academic certificate. For example, Intermediate Technical Certificate or ITC |
| ✓ Postsecondary not providing an associate degree, baccalaureate degree, or certificate | (Drop-down) Select Yes or No. Note: Certificate means a technical or academic certificate |
| ✓ Registered Apprenticeship program under National Apprenticeship Act | (Drop-down) Select Yes or No. |
| ✓ Non-Registered Apprenticeship program | (Drop-down) Select Yes or No |
| ✓ Community Based Organization | (Drop-down) Select Yes or No. |
| ✓ Joint Vocational School | (Drop-down) Select Yes or No. |
| ✓ Proprietary School | (Drop-down) Select Yes or No. |
| Other | (Drop-down) Select Yes or No. |
| Other, specify if selected above | (Text) Type a description of the type of training institution. Required if Other is Yes. |
| Is your training /education institution authorized with your | (Drop-down) Select Yes or No. |

| state to provide a program beyond secondary education | |
|---|---|
| DEGREES OFFERED/TRAINING OUTCOMES | |
| Associate Degree | (Drop-down) Select Yes or No. |
| Baccalaureate Degree | (Drop-down) Select Yes or No. |
| Certificate | (Drop-down) Select Yes or No. |
| License | (Drop-down) Select Yes or No |
| Competency of Skill Recognized by Employer | (Drop-down) Select Yes or No. |
| Additional Skills or Competencies Generally Recognized by Employers | (Drop-down) Select Yes or No. |
| Other | (Drop-down) Select Yes or No. |
| Other, Specify | (Text) Type a description of the outcome provided by the training provider. Required if Other is Yes. |

- The next page requests information regarding state or federal debarment, if applicable.
- Another page collecting basic institutional information displays. This information will be viewable by the public.

| ACCREDITATION OR AGENCY APPROVAL | |
|----------------------------------|--|
| Accredited | (Drop-down) Select Yes or No. |
| Accredited By: | (Text) Type name of regional or national accrediting body. |
| Approved | (Drop-down) Select Yes or No. |
| Approved By: | (Text) Type name of approval entity. |
| Registered | (Drop-down) Select Yes or No. |
| Registered With | (Text) Example: Idaho Office of the State Board of Education. |
| Licensed | (Drop-down) Select Yes or No. |
| Licensed By | (Text) Example: Idaho Bureau of Occupational Licenses for Barber and Cosmetology Services Licensing Board. |

- On the same page are list of optional financial aid information that is viewable by the public. Please complete any fields you wish to display with your school's information.

After completing the applicable fields, click Save/Continue. The new provider registration is complete and will advance to a new [program registration section](#).

New providers will submit one program with their initial provider application to determine WIOA eligibility.

PROGRAM REGISTRATION

3. New providers will advance directly to the Program Description page as part of the registration process. OR

Returning users will start at the Provider Menu to add or update program information.

4. To register a new program, complete the Program Description page. Federal regulations require submission for all fields that are applicable for your entity's program.

The table below contains the fields requested to complete the Provider Registration. The required fields are checked. The blue underlined fields are hyperlinked to more specific instructions. Please review and have this information on-hand and available to you when registering.

| PROGRAM DESCRIPTION | |
|---|---|
| WIOA Approved | (<i>Display Only</i>) Displays the status of the program. |
| Do you wish to apply for WIOA approval | (<i>Option Buttons</i>) Select Yes or No. |
| ✓ This individual program of training services is: (check all that apply) | (<i>Checkboxes</i>) Check all that apply: <ul style="list-style-type: none"> • Single Course / Class • Training Program of Multi-Courses • Non-traditional for Women |
| ✓ Program Name | (<i>Text</i>) Type the name of the program or course. |
| ✓ Program Synopsis: | (<i>Text</i>) Type a brief description of the program: 5,000 character max. |
| ✓ Training Services Delivered By: (check all that apply) | (<i>Checkboxes</i>) Check all that apply: <ul style="list-style-type: none"> • Online with a browser • Directly on a computer • Onsite at our location |
| ✓ Training Services Offered When: (check all that apply) | (<i>Checkboxes</i>) Check all that apply: <ul style="list-style-type: none"> • Daytime hours • Evening hours • Weekends |
| Curriculum Competency Based | (<i>Text</i>) If the curriculum is competency-based, describe the competencies. |
| Prerequisites | (<i>Text</i>) List the prerequisites. |
| ✓ Total Credit or Curriculum (Clock) Hours | (<i>Digits</i>) Type the number of <u>clock</u> hours needed for the program. |
| Total Number of Training Weeks | (<i>Digits</i>) Type the number of weeks needed to complete the program/course. |
| Apprentice Sponsors | (<i>Drop-down</i>) Select Apprenticeship Sponsors, if applicable. |
| ✓ Training Location | (<i>Text</i>) Type the street address of the training location. |
| ✓ County | (<i>Drop-down</i>) Select the county where the training is located. |

| | |
|---|---|
| ✓ Zip Code | (<i>Digits</i>) Type the ZIP code where the training is located. |
| Program Length | (<i>Drop-down</i>) Select the type of time period for measuring program length. |
| Type of Attainment | |
| ✓ Type of Credential : (check all that apply) | Linked explanation |
| Name of Credential | Name of credential awarded upon program completion |
| ✓ Type of Financial Aid Offered | (<i>Text</i>) Type the type of financial aid for which this program is eligible or enter "None" |
| ✓ Refund Policy | (<i>Text</i>) Type a description of the provider's refund policy for this program. |
| PROGRAM COST ITEMS | |
| In-State / District Tuition | Linked Explanation |
| [Description] | (<i>Text</i>) Type a description of the cost. If district, name the district. |
| Out-of-State / District Tuition | (<i>Digits</i>) Type the cost. |
| [Description] | (<i>Text</i>) Type a description of the cost. If district, name the district. |
| Registration Fee | Linked Explanation |
| [Description] | (<i>Text</i>) Type a description of the cost. If the fee is due for each semester and the program is more than one semester, describe. |
| Books (Estimated) | (<i>Digits</i>) Type the cost. |
| [Description] | (<i>Text</i>) Type a description of the cost. 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) | (<i>Digits</i>) Type the cost. |
| [Description] | (<i>Text</i>) Type 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. |
| Testing / Exam Fees | (<i>Digits</i>) Type the cost. |
| [Description] | (<i>Text</i>) Type a description of the cost. Indicate when the testing fees are due: before or after the training, and to whom they are paid. For example, network administrator certification exams are administered by a third party and the student is required to pay the third party to take the exam. |
| Graduation Fees | (<i>Digits</i>) Type the cost. |
| [Description] | (<i>Text</i>) Type a description of the cost, for example, a diploma fee. |
| Other | (<i>Digits</i>) Type the cost. |

| | |
|---|---|
| [Description] | (Text) Type a description of the cost. List and describe any other costs. If the cost for books is for one semester, and the program is more than one semester, describe. |
| CURRICULUM | |
| Certified | (Option buttons) Select Yes or No. If the curriculum is certified by an accrediting entity or national standardization program, select Yes. |
| [Description] | (Text) Required if Certified is Yes. Type the name and/or description of the entity. |
| OCCUPATIONS | |
| ✓ Program Type | (Text) Use the CIP Lookup button to search for and select the Classification of Instructional Programs. The training provider should provide the CIP. |
| ✓ Occupational Title (O*NET SOC) Title | (Text) Use the O*NET button to search for and select an occupation for which this program prepares the student. |
| Hourly Wage 1 | (Digits) Type the median hourly wage for an employee in this occupation. |
| Required Certification 1 | (Text) Type a description of any certification related to employment in this occupation |
| Occupational Title (O*NET SOC) Title | (Text) Use the O*NET button to search for and select an occupation for which this program prepares the student. |
| Hourly Wage 2 | |
| Required Certification 2 | (Text) Type a description of any certification related to employment in this occupation |
| Occupational Title (O*NET SOC) Title | |
| Hourly Wage 3 | |
| Required Certification 3 | (Text) Type a description of any certification related to employment in this occupation |

Specific instructions accompany each screenshot below.

This individual program of training services is: (check all that apply)

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 allowed only in the following circumstances:

- An occupation-specific credential may be obtained at the conclusion of the course;
 - A skills assessment is conducted at the end of the course demonstrating competency;
- OR

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

* This individual program of training services is: (check all that apply)

Single Course/Class

Training Program of Multi-Courses

Non-traditional for Women

Program Name

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.

- 1) Because the system only displays the program name to the public, programs with different outcomes look like duplicates in the list. 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, list the programs as follows: “Social Work BSW” and “Social Work MSW”
OR
- 2) 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. “...This program results in an A.A. or A.S. degree.”

| | |
|--|---|
| * Program Name or Single Course/Class Title: | <input type="text"/> |
| | * Program Synopsis: (5000 character max.) |
| | <input type="text"/> |
| |  |

Credit Hours/Clock Hours

For Total Credit/Curriculum Hours, enter Clock hours 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.

| | |
|--------------------------------------|----------------------|
| * Total Credit/ Curriculum Hours: | <input type="text"/> |
|--------------------------------------|----------------------|

Total Number of Training Weeks

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

| | |
|------------------------------------|----------------------|
| Total Number of Training Weeks: | <input type="text"/> |
|------------------------------------|----------------------|

Type of Credential: (check all that apply)

The Type of Credential means the potential outcome for a student completing the program of study. Multiple selection is allowed. Please see the examples and definitions below the screenshot.

| * Type of Credential: | (check all that apply) |
|--------------------------|---------------------------------|
| <input type="checkbox"/> | Industry certification |
| <input type="checkbox"/> | Apprenticeship certification |
| <input type="checkbox"/> | Government License |
| <input type="checkbox"/> | Associate degree |
| <input type="checkbox"/> | Baccalaureate degree and above |
| <input type="checkbox"/> | Community College certification |
| <input type="checkbox"/> | Secondary School diploma |
| <input type="checkbox"/> | Employment |
| <input type="checkbox"/> | Measurable Skills Gain |

Industry certification: A professional, industry, or employer organization (e.g., National Institute for Automotive Service Excellence certification, National Institute for Metalworking Skills, Inc., Machining Level I credential) or product manufacturer or developer (e.g., recognized Microsoft Information Technology certificates, such as Microsoft Certified IT Professional (MCITP), Certified Novell Engineer, a Sun Certified Java Programmer, etc.) using a valid and reliable assessment of an individual's knowledge, skills and abilities;

Apprenticeship certification: Certificate of completion of the educational component of an industry-recognized or Registered Apprenticeship.

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 (e.g., Federal Aviation Administration aviation mechanic license, or Certified Nursing Assistant).

Associate 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.

Baccalaureate 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 (master's or doctoral) do not count toward the credential attainment measure used for program performance reporting.

Community College Certification: Qualifying academic certificate awarded for completion of career-technical education requirements

Secondary School Diploma: Program participants can attain a high school diploma or equivalent.

Employment: The program of study is associated with obtaining employment in a specific occupation.

Measurable Skills Gain: If selecting "Measurable Skills Gain," please ensure documentation can be provided consistent with WIOA federal regulations at:

https://wdr.doleta.gov/directives/attach/TEGL/TEGL_10-16-Change1_Acc.pdf#page=18.

In-State and Out-of-State Tuition

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 NA in the Out-of-State/District Tuition description field.

Program Cost Items

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

| Program Cost Item | Cost/Description |
|--------------------------------|-----------------------------------|
| In-State/District Tuition: | <input type="text" value="0.00"/> |
| | <input type="text"/> |
| Out-of-State/District Tuition: | <input type="text" value="0.00"/> |
| | <input type="text"/> |

Registration Fees, Books, and Supplies

Include the sum of ALL applicable fees 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.

| | |
|--|-----------------------------------|
| Registration Fee: | <input type="text" value="0.00"/> |
| | <input type="text"/> |
| Books (Estimated): | <input type="text" value="0.00"/> |
| | <input type="text"/> |
| Supplies/Materials/Hand Tools (not included in tuition): | <input type="text" value="0.00"/> |
| | <input type="text"/> |

Other Fees

The “Other” 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.

| | |
|--------------------|-----------------------------------|
| Testing/Exam Fees: | <input type="text" value="0.00"/> |
| | <input type="text"/> |
| Graduation Fees: | <input type="text" value="0.00"/> |
| | <input type="text"/> |
| Other: | <input type="text" value="0.00"/> |
| | <input type="text"/> |

Note: The sum of tuition and all fees should equal the total out-of-pocket cost expected for a student to complete the program of training.

Occupations

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

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

Hourly Wage - If known, enter the hourly entry wage for the occupation. Otherwise, IDOL will supply the hourly entry wage for the occupation based on published labor market information.

Required Certification - Enter up to three associated credentials students may obtain related to the occupations or completion of the program of study. These **do not have to be required certifications.**

Occupations

Please provide the specific name of one or two occupations that this training program will prepare an individual to do. Include the minimum entry level wage for the occupation and indicate the certification, licensing and credentials by boards or other approval required prior to employment.

| | | |
|--------------------------------|-----------------------------------|-------------|
| * Program Type | <input type="text"/> | CIP Lookup |
| * Occupation Title (O*Net-SOC) | <input type="text"/> | ONET Lookup |
| Hourly Wage 1 | <input type="text" value="0.00"/> | |
| Required Certification 1 | <input type="text"/> | |
| Occupation Title (O*Net-SOC) | <input type="text"/> | ONET Lookup |
| Hourly Wage 2 | <input type="text"/> | |
| Required Certification 2 | <input type="text"/> | |

Save/Return

Clear Changes

PROGRAM PERFORMANCE

The information required on this page is the count of the number of students participating in the program.

Use a time period of 1 year, unless the program has not been operational for at least a year.

| | |
|---------------------|--|
| Begin Date | <input type="text" value="mm/dd/yyyy"/> |
| End Date | <input type="text" value="mm/dd/yyyy"/> |
| Number Participated | <input type="text"/>  |
| Number Completed | <input type="text"/> |

| Program Performance | |
|---|---|
| Begin Date | Enter the program begin date or |
| End Date | Enter the program end date in mm / dd/ yyyy format |
| Number Participated | Number of students participated/enrolled in the program |
| Number Completed | Enter number of students who completed the program. |
| Completed Percent | Display |
| Number Employed After Leaving the Program | (Text) Example: Idaho Office of the State Board of Education. |
| Employed Percent | Display |
| Median Hourly Wage at Placement | (Text) Idaho Bureau of Occupational Licenses for Barber and Cosmetology Services Licensing Board. |

If your entity also tracks the number of students completing the program, please enter that number for the year. It does not have to be a subset of that year's program participants.

If your entity awards a credential or tracks the credentials obtained by former students, please enter the number of students receiving a credential.

Please send an email to WIOAETP@labor.idaho.gov to notify staff of the new program application.

Returning users will exit to the Provider Programs page.

Appendix

All training providers with approved programs on the WIOA Eligible Training Provider List are required to submit information about each program's outcomes. Most of the information required for federal reporting is already collected in the IdahoWorks module. However, additional information must be provided at least once per year to the Idaho Department of Labor to comply with federal reporting requirements.

Instructions for submitting the reporting requirements are located in the Training Provider Reporting Manuals.

Private training providers refer to the [Private Training Provider Program Reporting Manual](#) and the [Private Training Provider Program Template](#).

Public training providers must report through the Idaho Office of the State Board of Education using the [Idaho WIOA Public Postsecondary Provider Reporting Manual](#) and the following templates:

[Workforce Training Provider ID Template](#)

[Labor Exchange ID Template](#)

[Public Postsecondary Provider Program Template](#)

Checklist for Applying for WIOA Eligibility

| Step | Action Item |
|-------------|--|
| 0 | Review Documents: <ul style="list-style-type: none">• <u>Idaho WIOA ETP Policy and Appendix A</u>• <u>Idaho ETP Application Procedures</u>• <u>Idaho Training Provider Reporting Guide</u>• <u>WIOA ETP FAQ</u> |
| 1 | Obtain copy of Idaho authorization document (Registration with the Idaho State Board of Education). |
| 2 | Complete and sign Data Submission Agreement. |
| 3 | Create provider account in IdahoWorks <ul style="list-style-type: none">• Review <u>ProviderLink User Guide</u>• Complete account instructions as directed in <u>Idaho ETP Application Procedures</u><ul style="list-style-type: none">○ <u>Create User Account</u>○ <u>Update or enter Provider Information</u>○ Attach copies of required documents○ Enter information for one training provider program |
| 4 | After completing IdahoWorks registration, send a notification email to <u>WIOAETP@labor.idaho.gov</u> with the name of the training provider and program submitted. |
| 5 | Create IFiST user account for data reporting process. Complete and submit data reporting template for training provider program. |
| 6 | Training Provider Programs are approved once the data reporting template is received. |