



This is an application for initial eligibility approval to participate as an Eligible Training Provider under the Workforce Innovation and Opportunity Act (WIOA) of 2014. Approval as a WIOA Eligible Training Provider does not represent an endorsement or accreditation of the programs offered by the Eligible Training Provider.

In accordance with 20 C.F.R. § 680.450, all providers and programs that have not previously been eligible to provide training services under WIOA sec. 122 or WIA sec. 122, except for registered apprenticeship programs, must submit required information to be considered for initial eligibility. If approved, the initial eligibility period is one (1) year for a particular program. To remain on the ETPL, 20 C.F.R. § 680.460 requires continued eligibility to be determined for each provider and program at the end of the initial eligibility period and then every two (2) years thereafter. Continued eligibility will be determined using the performance accountability measures described in WIOA secs. 116(b)(2)(A)(i)(I)-(IV), other matters required by WIOA sec. 122(b)(2), and other appropriate measures of performance as determined by the Governor for WIOA-funded program participants, taking into consideration the characteristics of the population served and relevant economic conditions. Please note – the provisions in WIOA secs. 116 and 122 and 20 C.F.R. § 677.230 and § 680.400 - § 680.530 that require the collection and reporting of performance related data on all participants in training programs on the State's ETPL have been waived through June 30, 2020; however, during this waiver period, the U.S. Department of Labor has mandated that the State must continue to collect and report performance related data for all WIOA-funded participants in accordance with all statutory and regulatory requirements, including WIOA secs. 116 and 122, and as specified at 20 C.F.R. § 677.230 and § 680.460.

INSTRUCTIONS: After completing and signing the application form below, training providers should submit it to their closest IowaWORKS Center with attention to the Local Workforce Development Board. Addresses for IowaWORKS Centers can be found at <http://www.iowaworkforcedevelopment.gov/locations>. If this application is approved by the Local Workforce Development Board, the training provider will be contacted by a representative from Iowa Workforce Development with further instructions on creating an account and adding this training program to the IowaWORKS data management system at <http://www.iowaworks.gov> in order for it to be placed on the Iowa Eligible Training Provider List.

Provider Information

Federal Employer ID	
Federal Employer ID No:	42-0926922
Institution Identification	
Institution Name:	Western Iowa Tech Community College
Institution Type:	<input type="checkbox"/> Adult Education and Literacy - Title II <input type="checkbox"/> Community Based Organization (CBOs) <input type="checkbox"/> Four-year Colleges and Universities <input type="checkbox"/> Joint labor-management organizations <input type="checkbox"/> Other Training Provider <input type="checkbox"/> Private Business and Technical Schools <input type="checkbox"/> Registered Apprenticeship programs <input checked="" type="checkbox"/> Two-year, Technical, and Community Colleges
Institution Ownership:	<input type="checkbox"/> Private for-profit institution <input type="checkbox"/> Private non-profit institution <input checked="" type="checkbox"/> Public institution <input type="checkbox"/> Unknown
Institution Primary Location	

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Address 1:	4647 Stone Avenue
Address 2:	
City:	Sioux City
State:	IA
Zip:	51106
Contact Information	
Title:	
First Name:	
Middle Initial:	
Last Name - (include suffix e.g. Jr, Sr, PhD, etc):	
Contact Phone Number:	
Cell Phone:	
Contact Fax Phone Number:	
Email Address:	
Institution URL:	www.witcc.edu
Provider Information	
Local Workforce Development Area:	
Type of Business:	<input type="checkbox"/> College/University <input checked="" type="checkbox"/> Post-Secondary Educational Institution - Public <input type="checkbox"/> Post-Secondary Educational Institution - Private <input type="checkbox"/> Local Public School - 12th Grade and Under <input type="checkbox"/> Local Private School - 12th Grade and Under <input type="checkbox"/> Local Charter School - 12th Grade and Under <input type="checkbox"/> Alternative Secondary Education School - 12th Grade... <input type="checkbox"/> Health Care <input type="checkbox"/> Community Based Organization - Church <input type="checkbox"/> Community Based Organization - Non-Profit <input type="checkbox"/> Federal Government Agency <input type="checkbox"/> State Government Agency <input type="checkbox"/> Local Government Agency <input type="checkbox"/> Private Employer <input type="checkbox"/> Services/Goods Vendor Not Otherwise Classified <input type="checkbox"/> Trade Association <input type="checkbox"/> Registered Apprenticeship <input type="checkbox"/> One-Stop Office

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This provider is an accredited postsecondary education institution:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Billing Address Information	
Billing Address 1:	PO Box 5199
Billing Address 2:	
Billing City:	Sioux City
Billing State:	IA
Billing Zip:	51102
Attention:	
Mailing Address Information	
Mailing Address 1:	PO Box 5199
Mailing Address 2:	
Mailing City:	Sioux City
Mailing State:	IA
Mailing Zip:	51102
Mailing Attention:	
CRS Provider Information	
WIOA Provider	<input type="checkbox"/> Yes <input type="checkbox"/> No
Institution Type:	<input type="checkbox"/> Adult Education and Literacy - Title II <input type="checkbox"/> Community Based Organizations (CBOs) <input type="checkbox"/> Four-year Colleges and Universities <input type="checkbox"/> Joint labor-management organizations <input type="checkbox"/> Other Training Provider <input type="checkbox"/> Private Business and Technical Schools <input type="checkbox"/> Registered Apprenticeship programs <input checked="" type="checkbox"/> Two-year, Technical, and Community Colleges
Institution Ownership:	<input type="checkbox"/> Private for-profit institution <input type="checkbox"/> Private non-profit institution <input checked="" type="checkbox"/> Public institution <input type="checkbox"/> Unknown
Type of Entity:	<input checked="" type="checkbox"/> Higher Ed: Associate's Degree <input type="checkbox"/> Higher Ed: Baccalaureate or Higher <input type="checkbox"/> Higher Ed: Certificate of Completion <input type="checkbox"/> National Apprenticeship

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	<input type="checkbox"/> Private Non-Profit <input type="checkbox"/> Private For-Profit <input type="checkbox"/> Public <input type="checkbox"/> Other
Years in Business:	53 years
Disabled Access:	<input type="checkbox"/> Yes <input type="checkbox"/> No
ADA Compliant:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Institution Description:	
Main Telephone Number:	712-274-6400
TTD/TTY Telephone Number:	
Financial Aid Telephone Number:	712-274-6402
Main Email Address:	
Is this a Community College?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Accreditation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Career Assessment Available	<input type="checkbox"/> Yes <input type="checkbox"/> No
Career Counseling Available	<input type="checkbox"/> Yes <input type="checkbox"/> No
Job Placement Assistance Available	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tutorial Services Available	<input type="checkbox"/> Yes <input type="checkbox"/> No
ESL Services Available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
GED Assistance Available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Other Additional Services Available	<input type="checkbox"/> Yes <input type="checkbox"/> No

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On-site Child Care Available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Financial Aid Available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Eligible Provider or Youth Workforce Investment Activities	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Pell Grant Eligible:	<input type="checkbox"/> Yes, Pell Grant Eligible <input type="checkbox"/> No, not Pell Grant Eligible <input checked="" type="checkbox"/> Pell Grant Not Applicable
Registered Apprenticeship Provider:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Approved Apprenticeship:	<input type="checkbox"/> Yes, Approved Apprenticeship <input checked="" type="checkbox"/> No, not Approved Apprenticeship

Program Information

General Information	
Purpose for adding program:	<input checked="" type="checkbox"/> Submit for ETPL Approval and accept participants <input type="checkbox"/> Accept participants without submitting for ETPL Approval <input type="checkbox"/> Display to the public only
*CIP Code:	
*Education Program Name:	AEL Program
Education Program Description:	High School Equivalent, English Language Learning and Adult Basic Education Skills Upgrade
*This program of study leads to:	<input type="checkbox"/> An industry-recognized certificate or certification <input type="checkbox"/> A certificate of completion of an apprenticeship <input type="checkbox"/> A license recognized by the State involved or the Federal government <input type="checkbox"/> An associate degree <input type="checkbox"/> A baccalaureate degree <input checked="" type="checkbox"/> A community college certificate of completion <input checked="" type="checkbox"/> A secondary school diploma or its equivalent <input checked="" type="checkbox"/> Employment <input checked="" type="checkbox"/> A measurable skills gain leading to a credential <input checked="" type="checkbox"/> A measurable skills gain leading to employment

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<p>This program leads to a credential or degree</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Name of associated credential:</p>	<p>High School Equivalent Diploma</p>
<p>*Completion level:</p>	<p> <input type="checkbox"/> Apprenticeship completers <input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Certificates < 2 yrs. <input type="checkbox"/> Doctor's Degrees <input type="checkbox"/> Employment & training program completers <input type="checkbox"/> First-professional Cert. (Post-Degree) <input type="checkbox"/> First-professional Degrees <input type="checkbox"/> Graduate degrees combined <input type="checkbox"/> Information Technology Certificates <input checked="" type="checkbox"/> Job Corps Completers <input type="checkbox"/> Master's Degree <input type="checkbox"/> Military separatees <input checked="" type="checkbox"/> OJT=on-the-job training <input type="checkbox"/> Post-Master's Certificates <input type="checkbox"/> Postbaccalaureate Certificates <input type="checkbox"/> Postsec. Awards/Cert./Diplomas; < 1 yr. <input type="checkbox"/> Postsec. Awards/Cert./Diplomas; <4 yrs. <input type="checkbox"/> Postsec. Awards/Cert./Diplomas; 1-2 yrs. <input type="checkbox"/> Postsec. Awards/Cert./Diplomas; 2-4 yrs. <input checked="" type="checkbox"/> Secondary <input type="checkbox"/> State-defined Completion Types <input type="checkbox"/> Sum of all types <input checked="" type="checkbox"/> Vocational Rehabilitation </p>
<p>*Attain Credential:</p>	<p> <input checked="" type="checkbox"/> High School Diploma or GED or High School Equivalency Diploma <input type="checkbox"/> AA/AS Degree <input type="checkbox"/> BA/BS Degree <input type="checkbox"/> Occupational Skills License <input type="checkbox"/> Occupational Skills certificate or credential <input type="checkbox"/> Other <input type="checkbox"/> No credential received, individual received training <input type="checkbox"/> N/A, individual did not receive training <input type="checkbox"/> Post Graduate Degree </p>
<p>Other, Specify:</p>	
<p>Certification/License Title:</p>	
<p>Certification/License Type:</p>	<p> <input type="checkbox"/> National Certification or License <input type="checkbox"/> State Certification or License <input type="checkbox"/> Regional Certification or License <input type="checkbox"/> Certification or License Does Not Apply </p>
<p>Green Job Training:</p>	<p> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>
<p>*Is this education program in a partnership with</p>	<p><input checked="" type="checkbox"/> Yes</p>

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a business?	<input type="checkbox"/> No
Please describe the partnership or plans to develop partnership in 800 characters or less (supporting documentation may be required):	
Apprenticeship	
*This program is an Apprenticeship:	<input type="checkbox"/> Yes (proceed to next question) <input checked="" type="checkbox"/> No (skip to next section, Additional Details)
This Education Program is a Registered Apprenticeship:	<input type="checkbox"/> Yes (proceed to complete the rest of this section) <input type="checkbox"/> No (skip to next section, Additional Details)
Apprenticeship Registration Date:	
Apprenticeship Description:	
Number of active apprentices:	
Instruction Method:	<input type="checkbox"/> In-person <input type="checkbox"/> Online, E-learning, or Distance Learning <input type="checkbox"/> Hybrid or Blended Program
Instruction Length in Weeks:	
Technical instruction is provided by another provider:	<input type="checkbox"/> Yes (proceed to complete the rest of this section) <input type="checkbox"/> No (skip to next section, Additional Details)
Instruction Provider Name:	
Instruction Provider Address 1:	
Instruction Provider Address 2:	
Instruction Provider City:	
Instruction Provider State:	
Instruction Provider Zip Code:	
Additional Details	
Financial Aid Available	<input type="checkbox"/> Pell Grant <input type="checkbox"/> Federal Loan <input type="checkbox"/> Institutional Scholarship <input type="checkbox"/> Other
*URL of Training Program:	

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<p>*Program Prerequisites:</p>	<p> <input type="checkbox"/> High School Diploma or Equivalent <input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Course(s) <input type="checkbox"/> Combination of Education and Course(s) <input checked="" type="checkbox"/> None </p>
<p>*Date Edu. Program First Offered:</p>	<p style="text-align: center;">All year</p>
<p>*Please provide a reasonable explanation regarding why this is a new program:</p>	
<p>Minimum Class Size</p>	<p style="text-align: center;">8</p>
<p>Maximum Class Size</p>	<p style="text-align: center;">20</p>
<p>Number of Instructors</p>	<p style="text-align: center;">1</p>
<p>Describe the qualifications of all instructors in 800 characters or less:</p>	<p>Must have a bachelor degree and teaching experience.</p>
<p>Describe the minimum entry level requirements or prerequisites in 800 characters or less:</p>	<p>See above</p>
<p>Drug/Alcohol Screening Required:</p>	<p> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </p>
<p>Accessibility:</p>	<p> <input checked="" type="checkbox"/> On-Site Parking <input checked="" type="checkbox"/> Public Transportation <input checked="" type="checkbox"/> Disabled Student Access <input checked="" type="checkbox"/> Sign Language <input checked="" type="checkbox"/> Other Languages <input type="checkbox"/> Other </p>
<p>Describe any equipment used in this program and its adequacy and availability in 800 characters or less:</p>	<p>Kurzweil Allows Learners to Read, Comprehend & Demonstrate Knowledge Independently</p>
<p>*Grievance Procedure:</p>	

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*Grievance Procedure URL:	
*Refund Policy:	
*Refund Policy URL:	
Internship Available:	<input type="checkbox"/> Yes <input type="checkbox"/> No
*This education or training program is a Quality Pre-Apprenticeship:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Related Selected Occupations	
CIP Code 1	
Occupation Title 1	
CIP Code 2	
Occupation Title 2	
CIP Code 3	
Occupation Title 3	
If any selected occupation is not in local bright outlook, provide evidence that it is in demand.	
Selected Occupational Skills	
List any occupational skills:	

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Completion Expectations	
Continuing Education Units (CEU):	
CEU Granting Institution:	
*Credit Earned Program:	<input type="checkbox"/> Yes <input type="checkbox"/> No
*Number of Credits:	
Credit Earned Duration:	<input type="checkbox"/> Yes <input type="checkbox"/> No
*Program Goal	<input type="checkbox"/> Skill Attainment <input type="checkbox"/> Certificate <input type="checkbox"/> Registration <input type="checkbox"/> License <input type="checkbox"/> Associate Degree <input type="checkbox"/> Baccalaureate Degree <input type="checkbox"/> Other
Credentialing Body:	<input type="checkbox"/> Iowa Board of Educational Examiners <input type="checkbox"/> Iowa Bureau of Professional Licensure <input type="checkbox"/> Iowa Board of Nursing <input type="checkbox"/> Iowa Board of Behavioral Science <input type="checkbox"/> Iowa Board of Certification <input type="checkbox"/> Iowa Board of Veterinary Medicine <input type="checkbox"/> Nation Environmental Health Association
*Projected Hourly Wage After Program Completion:	
Scheduling	
Class Time (hours):	
Lab Time (hours):	
Other Time (hours):	
Class Frequency:	<input type="checkbox"/> Daily <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semester <input type="checkbox"/> Tri-semester <input type="checkbox"/> Annual <input type="checkbox"/> Bi-Annual <input type="checkbox"/> Bi-Monthly
*Reporting Program Length - Clock/Contact Hours:	

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*Reporting Program Length - Full-time Weeks:	
*Reporting Program Format:	<input type="checkbox"/> In-person <input type="checkbox"/> Online, E-learning, or Distance Learning <input type="checkbox"/> Hybrid or Blended Program
Duration	
Duration:	
Duration Type:	<input type="checkbox"/> Semesters/Terms <input type="checkbox"/> Weeks <input type="checkbox"/> Hours <input type="checkbox"/> Months
Schedule Intensity:	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Weekly Schedule:	
Classes Offered:	<input type="checkbox"/> Day <input type="checkbox"/> Night <input type="checkbox"/> Weekend <input type="checkbox"/> Summer
External Approvals	
Is this program listed on another state's ETPL?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cost Details	
*Tuition/Fee:	
*Books:	
*Tools:	
*Other Costs (describe in Comments below):	
*Total Training Costs:	
Comments:	
Edu. Program Application Confirmation	
<p>*Providers requesting approval or re-approval of a training program must agree to the statement below.</p> <p>The Program Description and Program Costs I have provided are currently listed in my catalog/brochure. The</p>	

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programs offered are available to the general public on a tuition basis.

- Yes, I agree to the above statement. I am submitting this educational program for WIOA Approval. I certify that the information contained in this application is true and correct and that any supporting documentation is true and factual.**

Name (Print): _____ **Title:** _____

Applicant Signature: _____ **Date:** _____

Applications must be reviewed by the Local Workforce Development Board for consideration. Non-LWDB approved applications received directly from the training provider will not be processed with no further notification.

FOR LOCAL WORKFORCE DEVELOPMENT BOARD ONLY

Date Received by LWDB	
Date Approved by LWDB	
IWD LWDB Region #	
Authorized LWDB Name (Print):	
Authorized LWDB Signature:	

LWDB approved forms must be emailed to: ETPL@iwd.iowa.gov

To Be Completed by LWDB		STATE USE ONLY	
LWDB:	Region 12	Date Received:	
Date Submitted:		Date Approved:	
Provide a description of Local Plan changes below:		Effective Date:	
		Title I Rep:	

Add the following to the Region 12 Local Service Plan: Corrections

1. Geographical Preference for Enrollment Policy and Procedures:

The Geographical Preference for Region 12 is that the participant must be a resident within the following counties: Cherokee, Ida, Monona, Plymouth, and Woodbury. Preference is also given to those living outside of the region, but the Region 12 One Stop or satellite office is the closest location to access America’s Job Center services. For individuals living outside of these boundaries who request assistance from Region 12, approval must be requested from WIOA region of residency and documented in the data management system.

2. Eligibility Determination Policy for Participation of Minors:

The Region 12 LWDB does not authorize any additional responsible adults outside of those mentioned in the State Policy to authorize program participation for minors.

3. Ineligibility to Receive Services Policy:

On the date that the individual is found ineligible to receive services the individual will be mailed a letter stating why they are ineligible and providing them 30 days to respond to correct the ineligible status. A final determination will be made after the 30 days have expired and the individual will be mailed a letter within 5 business days stating the final determination of services.

4. Closure of Services Due to Fraud Policy:

On the date that the individual is found to have committed or attempted to commit fraud to receive services, the individual will be mailed a letter stating the determination and provide them 30 days to respond to the fraud status. A final determination will be made after the 30 days have expired and the individual will be mailed a letter within 5 business days stating the final determination of services.

5. Selection of Adult Mentors Policy:

The following is the selection and screening process for Adult Mentors in Region 12:

1. Mentors must be at 25 years old.
2. Mentors must pay for and complete a background check. Background check must be within 90 days before beginning mentorship.
3. Mentor must complete a mentorship application, confidentiality statement, a rights and responsibilities agreement and provide background check results.
4. Mentor must complete an interview with the Youth Standing Committee.
5. Applications will be good for 90 days.

The LWDB will screen the interest mentor based on application, background check, and interview. **OR**

Region12 could partner with other Agencies certified in Adult Mentoring Services.

6. Objective Assessment Policy:

Region 12 will utilize one or a combination of the following assessments as part of the Objective Assessment Service: CASAS, Aleks, (Get You Future Ready) /Career Coach, NCRC and O*NET Interest Profiler.

7. Support Services Policy: General

Support service payments may be provided, when necessary, to enable a participant to participate in WIOA Title I activity or a partner activity. Support service payments can be made only when the participant is unable to obtain the service through other programs providing such services.

The American Job Center partners will work in conjunction to ensure that duplication of services does not happen for dual enrolled participants.

There is a support cap maximum of \$4,500.00 per participant per program year. Support caps can be altered with written permission of an administrator.

Clothing (CHG): Payment for items such as clothes and shoes that are necessary for participation in WIOA Title I activities such as interviewing, employment, or work experiences. Items such as uniforms and protective gear are generally allowable. The cost of required tools is allowed. Maximum expenditure is \$500.00 per activity.

Dependent Care (DPC): For those individuals not eligible for dependent care services from other entities, a maximum of \$2.50/hr. per person or the rate of the provider, whichever is less, \$20.00 per day maximum per child. DPC will not be paid to any relative living in the same house with dependent; WIOA Title I will not be responsible for paying of meals at the daycare site. DPC payments paid directly to the childcare provider.

Educational Testing (EDT): Assistance with educational testing required for participation in WIOA Title I activities is allowable. Some examples of educational testing include, but are not limited to, high school equivalency testing and vocational testing. If required for employment, the costs for licenses and application fees are allowable. Maximum expenditure is \$600.00 per participant.

Educational Assistance (EST): Assistance with books, fees, school supplies, and other necessary items for students enrolled in postsecondary educational classes is allowable. Maximum expenditure is \$3,000.00 per program year.

Financial Assistance (FAS): The purpose of a Financial Assistance Payment is to make a payment to a service provider or vendor on behalf of a participant. This payment is used to cover an emergency financial need that, if unmet, would prevent the participant from participating in WIOA Title I activities. Maximum expenditure is \$600.00 per program year. FAS may be used for such things as: housing assistance, auto repair, eyewear, repair, and other critical participants needs. FAS may not be used pay any type of fines or penalties imposed because of failure to comply with any federal, state local law or statute.

Health Care (HLC): Health Care assistance and referrals may be made available to participants when lack of assistance will affect their ability to obtain or maintain employment. This support service shall be used as a last resort, and only when no other resources are available to the participant. Maximum \$1,000.00 per participant.

Miscellaneous Services (MSS): Bonding is an allowable cost, if it is not available under federally or locally sponsored programs. If bonding is an occupational requirement, it should be verified that the participant is bondable before the participant is placed in training for that occupation. The costs of licenses, certifications, testing or application fees are allowable if occupationally required. Maximum of \$1,000.00 per participant.

Needs-Related Payment (NRP): Needs Related Payments will not be provided.

Services for Individuals with Disabilities (SID):

The cost of special services, supplies, equipment, and tools necessary to enable a participant with a disability to participate in training is allowable. It is not an allowable use of WIOA Title I funds to make capital improvements to a training or work site for general compliance with the Americans with Disabilities ACT (ADA) requirements. WIOA Title I will provide these support services only if other entities are unable to address these needs. Maximum \$300.00 per program year will be provided..

Supported Employment and Training (SET)

Supported Employment and Training (SET) payments are allowable to provide individuals requiring individualized assistance with the one-on-one instruction and the support necessary to enable them to complete occupational skill training and to obtain and retain competitive employment.

SET may only be used in training situations that are designed to prepare the participant for continuing non-supported competitive employment.

SET may be conducted in conjunction with experiential learning activities such as: an internship, on-the-job training, job shadow, quality pre-apprenticeship and work experience.

An example of appropriate SET use would be the hiring of a job coach to assist an individual who has been placed in competitive employment. Employment positions supported at sheltered workshops or similar situations may not utilize SET.

Maximum of \$1,000.00 per participant.

Stipends (STI)

For participants in non-wage paying Experiential learning activity that is scheduled for four months or longer, a monthly stipend, maximum of \$250 per month depending on individual need, paid at the end of the month in which participation occurred. For participants in YouthBuild, the YouthBuild stipend policy will be followed. Excessive absences, of more than 10% of scheduled days will result in a reduction of the stipend, \$7.50 per day, unless the need to be absent is the result of an event that could excusable in an employment situation. Documentation of the event is not required, but can be requested at the discretion of the career planner.

Transportation (TRN)

The cost of Transportation (TRN) necessary to participate in WIOA Title I activities and services, including job interviews, is allowable.

\$.30/mile with a reimbursement maximum of \$25.00 day.

Youth Incentive Payment:

Incentive and bonus payments will be available to youth participants to encourage and reward achievements that are tied to training activities and experiential learning activities.

HSED/High School Attendance Incentive:

Eligible participants can receive an Incentive of up to \$50.00 per month available at the discretion of the career planner, with input from the youth's instructor and the approval of the Iowa Region 12 WIOA Title I Director, to address poor attendance issues. The criteria to be met in order to qualify for the incentive will be clearly stated in the ISS or in an addendum of the ISS. The purpose of the attendance incentive is to improve attendance so that the youth can progress toward educational/academic goals. The incentive will not be an "entitlement" but rather a true incentive for those participants who need additional motivation to improve attendance.

HSED/High School Achievement Incentive:

Eligible participants can receive an Incentive of \$200 for successful completion of a High School Diploma or for successful completion of the HSED. High School transcripts, high school diploma, HSED Official Report of Test Results, or a written statement from a school official will document academic achievement. Neither incentives nor bonuses will be awarded until academic achievement is documented in the participant file.

Youth Achievement Incentive:

Eligible participants can receive an Incentive of \$100 for earning the National Career Readiness Certificate at the Gold Level; \$50 for the Silver Level during enrollment. Eligible participants can receive an Incentive of \$100 for achieving the Measurable Skills Gain goal is limited to one bonus per year. Both the NCRC and Measurable Skills Gain goal incentives can be earned in the same year.

WIOA Title I Youth Programs in Region 12 do not utilize cash or gift cards as part of its incentive and bonus policy. Rather all payments are in the form of checks issues by the WIOA Title I Youth program agent.

8. Additional Assistance for Youth Policy: Region 12 identifies the following categories for Youth Needing Additional Service in addition to those outlined in State Policy.

9. Economic Self-Sufficiency:

Region 12 adopts the State Standard for Economic Self-Sufficiency.

10. Underemployed Individuals Policy:

Region 12 outlines the following criteria to qualify as an Underemployed Individual under the Adult and Dislocated Worker Programs:

1. Currently employed on a less than full-time basis and is seeking full-time employment.
2. Currently in a position, that is less below their level of skills and training.

Approvals:

LWDB Chair

Date

CEO Chair

Date