

Workforce Innovation and Opportunity Act

TRAINING PROVIDER MONITORING TOOL

Program Year _____

Local Workforce Development Area: _____

This review is conducted to verify the training provider meets the criteria required to continue to be listed on Arizona's Eligible Training Provider List (ETPL). The ETPL is maintained on the Arizona Job Connection System (AJC) at <http://www.azjobconnection.gov/>. Program monitoring assures that training providers meet federal and state requirements as it applies to the ETPL. The questions in the Training Provider Monitoring Tool and Training Program Monitoring Tool are designed to assist the reviewer in determining if the information provided by the training provider is in compliance with the WIOA Title I-B ETPL policy, to verify that training provider/program information in AJC is accurate, and to address areas that need refinement or corrective action. The monitor's summary/notes, and any corrective action needed, must be documented in PART 7 and PART 8.

PROVIDER INFORMATION

Training Provider Name _____

Training Agent ID _____ Date of Onsite Visit _____

Address (No., Street) _____

City _____ State _____ ZIP Code _____

Training Site Contact Name _____ Phone Number _____

Contact's Signature: _____

PART 1 – Training Provider Information

1. Does the **Training Provider Details** page in AJC contain the correct training/education institution address?
Yes No
2. Does the **Training Provider Details** page in AJC contain the correct phone number?
Yes No
3. Does the **Training Provider Details** page in AJC contain the current contact person name and contact information?
Yes No
4. Does the Institution/Organization type match the institution type in AJC? Yes No
(If yes, please check appropriate box)
 - Postsecondary providing an associate degree, baccalaureate degree or certificate
 - Postsecondary not providing an associate degree, baccalaureate degree or certificate
 - Registered Apprenticeship program under National Apprenticeship Act
 - Non-Registered Apprenticeship program
 - Community Based Organization
 - Joint Vocational School
 - Proprietary School
 - Other
5. What types of credentials does the training provider offer or prepare the student to receive?
(Verify they match what is listed in AJC.)
 - Associate Degree
 - Baccalaureate Degree
 - Certificate
 - License
 - Competency of Skill Recognized by Employer

- | | | |
|--|-----|----|
| 6. Is the training provider currently debarred by the state or federal government? | Yes | No |
| If yes, is the debarment information listed on the Debarment Status page in AJC? | Yes | No |
7. What types of financial aid is the training provider currently eligible to receive?
(Verify they match what is listed in AJC.)
- Federal Grants
 - State Grants
 - Local Grants
 - Scholarships
 - Fellowships
 - Training/Education Institution Grants

PART 2 – Training Provider Assurances

1. Please describe how the student grievance policy is communicated to students?

2. Please describe how the refund policy is provided to students?

3. Please describe the mechanism in place for collecting information about all students attending a training program as required for reporting performance measures.

4. Is the training provider aware they must not tell prospective participants they will be eligible to receive WIOA Title I-B funds for training services, promote the training as free of charge or that a share of the training is covered by a Local Workforce Development Area (LWDA)?
Yes No

PART 3 – Training Provider Technology-Based Assurances

**This section only needs to be completed if the training provider offers technology-based (online) training programs.*

1. Does the training provider have a mechanism in place for student interaction with an instructor(s)? Describe the mechanism with enough detail to ensure it is effective.

2. Does the training provider ensure periodic assessment of each student? Please describe.

3. Does the training provider's policy describe responsibilities of each party (training provider and student) to the distance learning experience?
Yes No

4. Does the training provider have a mechanism in place to track student's participation in the program? Please describe the mechanism with enough detail to ensure it is effective.

PART 4 – Third Party Training Provider Assurances

**This section only needs to be completed if the training program is offered through a partnership with a third party training provider.*

- Does the training provider listed on the ETPL verify that the out-of-state third party training provider is listed on the other state's ETPL?
Yes No If yes, identify which state: _____
- Are any of the contractors or third party training providers located outside of the United States or overseas?
Yes No
- Do program completion certificates issued to participants include the name of the training provider, not the name of the contractor or third party training provider?
Yes No
- Does the ETPL training provider give participants and third party training providers a description of the responsibilities of each party (ETPL training provider, third party training provider and the participant) related to the course?
Yes No
- Describe the third party training provider vetting process by the ETPL training provider, including verification of school licenses, liability insurance, performance data, instructor qualification requirements, pass rates, and testimonials of other schools that subcontract with the third party training provider.

PART 5 – Equal Opportunity Review

- Does the training facility support universal access for individuals with disabilities? (29 CFR 38.42)
Yes No
- Does the training provider utilize the Federal tagline: "Equal Opportunity Employer/Program" and that auxiliary aids and services are available upon request"? (29 CFR 38.31)
Yes No
- Does the training provider post "Equal Opportunity is the Law" posters so they are prominently displayed in accessible locations? (29 CFR 38.34)
Yes No
- How does the training provider deliver Equal Opportunity information to their staff and students? (29 CFR 38.36)
- Does the training provider offer the training in any language other than English? (29 CFR 38.35)
Yes No If yes, what language? _____

PART 6 – Monitor’s Summary/Comments/Notes

PART 7 – Corrective Action

PART 8 – Monitor’s Information

Monitor’s Name _____

Signature _____ Date _____

Local Workforce Development Board Representative Name _____

Signature _____ Date _____

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. Auxiliary aids and services are available upon request to individuals with disabilities. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request.