

KCDEE- POLICIES AND PROCEDURES MANUAL

KCDEE & River Valley Workforce Investment Board

POLICY & PROCEDURES MANUAL RELEASE

To	All WIA Title 1, and WIA Title1 Subrecipients	SUBJECT AREA	WIA Employment & Training
From	KCDEE Administration	POLICY NUMBER	CM 04-10
Date	6/20/05	EFFECTIVE DATE	6/24/05 revised 8/5/05

SUBJECT: INDIVIDUAL TRAINING ACCOUNT – Adults and Dislocated Workers

PURPOSE:

To transmit policy that will provide guidance to staff regarding the issuance of Individual Training Accounts for training and associated costs under WIA Title 1.

REFERENCES: Federal Register 20 CFR 663.410 which states “The ITA is established on behalf of a participant. WIA title 1 adult and dislocated workers purchase training services from eligible providers they select in consultation with the case manager.”

REQUIREMENTS:

- Training must be selected from the State approved provider list.
- Training cap will be the maximum approved by the Local Workforce Investment Board. Current WIA training cap of \$6000 for LWIA 5 customers was approved by the WIB on 11/20/2002.
- Length of the customer’s training should not exceed the maximum of a two year program.
- The Priority of Service Checklist must be completed for all customers interested in training services.
- Staff involved in the ITA process must be knowledgeable about assessment, development of an assessment summary, integration of needed services, provisions of follow-up services, explicit documentation of services and performance outcomes.
- Case managers should address all requests for funding that exceed the established tuition cap by completing and submitting the Customer Request for Training Costs Extending Beyond the Training Cap to the WIB Director and the KCDEE Director of Workforce Operations.
- All potential students must apply for financial aid before registering for training. Proof of the financial aid application must be included in the student’s file.
- Trainees may be entitled to supportive services as deemed necessary and in accordance with the Supportive Service policy CM 03-02.
- Sufficient funding for an ITA must be available in the WIA Title 1-B KCDEE budget.
- Staff should ensure that training funds will be prioritized to pursuing high growth opportunities and that training investments meet industry-specific requirements leading to a credential or diploma as appropriate.

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PROCEDURES:

- Completed customer applications for services will be submitted to the local IETC for staffing.
- Applications will be reviewed and distributed appropriately.
- Designated staff will work with customers to help them identify and then research the career area of choice. Customers may be required to attend relevant work shops to assist with his/her career exploration and identification of transferable and marketable skills.
- Staff will conduct a thorough assessment to determine the appropriateness of training for the customer.
- The Priority of Service Checklist should be completed to determine Veteran's priority rating.
- Staff will develop an assessment summary to ensure customer's successful completion of requested training, including attainment of appropriate performance outcomes.
- If deemed appropriate, KCDEE staff will issue the ITA
- The Training contract should be completed by KCDEE staff with the customer.
- The Tools, equipment and supplies agreement should be completed by KCDEE representative with the customer if and when appropriate.
- Originals of the training contract and tools, equipment and supply agreement (if needed) should be retained in the customer's file. Copies should be provided to the customer.
- If changes are required after an original ITA is issued, complete an ITA change notice.

EXPIRATION:

Ongoing

ATTACHMENTS:

1. Individual Training Account
2. Training Program Contract
3. Training Tools, Equipment, Supplies Agreement
4. Customer Request for Training Costs Extending Beyond Training Cap
5. ITA Change Notice

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REQUIREMENTS:

- Training must be selected from the State approved provider list.
- Training cap will be the maximum approved by the Local Workforce Investment Board. Current WIA training cap of \$6000 for LWIA 5 customers was approved by the WIB on 11/20/2002.
- Length of the customer's training should not exceed the maximum of a two year program. An associate degree may take longer than 2 years to complete but the actual training program is two years. For example, pre-requisites and class cancellations may require a student to go to school longer than 2 years but the associate program is still 2 years in the college catalogue.
- The Priority of Service Checklist must be completed for all customers interested in training services. The Priority of Service Checklist gives veterans first preference but addresses all customers. Please review the checklist
- Staff involved in the ITA process must be knowledgeable about assessment, development of individual service strategies, integration of needed services, provisions of follow-up services, explicit documentation of services and performance outcomes. Although you are not completing what is called an ISS in IWDS, you should be creating some type of career plan with the customer. For clarification purposes, the policy wording has been changed to "development of an assessment summary".
- Case managers should address all requests for funding that exceed the established tuition cap by completing and submitting the Customer Request for Training Costs Extending Beyond the Training Cap to the WIB Director and the KCDEE Director of Workforce Operations.
- All potential students must apply for financial aid before registering for training. Proof of the financial aid application must be included in the student's file.
- Trainees may be entitled to supportive services as deemed necessary and in accordance with the Supportive Service policy CM 03-02.
- Sufficient funding for an ITA must be available in the WIA Title 1-B KCDEE budget.
- Staff should ensure that training funds will be prioritized to pursuing high growth opportunities and that training investments meet industry-specific requirements leading to a credential or diploma as appropriate.

PROCEDURES:

- Completed customer applications for services will be submitted to the local IETC for staffing.
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- Designated staff will work with customers to help them identify and then research the career area of choice. Customers may be required to attend relevant work shops to assist with his/her career exploration and identification of transferable and marketable skills.
- Staff will conduct a thorough assessment to determine the appropriateness of training for the customer.
- The Priority of Service Checklist should be completed to determine Veteran's priority rating.
- Staff will develop a plan for service (ISS) to ensure customer's successful completion of requested training, including attainment of appropriate performance outcomes. The policy wording has been changed to "assessment summary for clarification".

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- If deemed appropriate, KCDEE staff will issue the ITA
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You should already be using these forms and have received them prior to this policy. Please note that all of these are also in the P&P folder. I will forward hard copies to Arlene and Maria for distribution.



SEQUENCE NUMBER: 07 -

Kane County Department of Employment & Education (KCDEE)
WIA Title 1B/TAA Individual Training Account
 for Tuition Fees Books Supplies Other _____
 (To be completed by a Staff Representative only)

Registrant Name:		Petition #:	Company Name:	
Social Security Number:		Institution Name:		
Address:		Book/Store Name:		
City, State, Zip:		Attn:	Customer Reimbursement: <input type="checkbox"/> Check box	
Phone Number:		Staff Representative:	LWIA Center:	
Program of Study:	Certificate Type:	Training Activity Enrollment Date:	GRANT: circle appropriate grant 1A 1D TAA 1Y 1S 1N	

The above named person has been determined WIA Title I-B/TAA eligible. The person has selected your institution for training and, therefore your institution is being utilized by KCDEE for training services. Please permit this person to register/enroll in the course(s) or for the items listed below. This voucher can only be used for payment for tuition, fees, books, or supplies listed below for the time authorized. Verify that the information listed below is correct. Any modifications to this voucher must be authorized, in writing, by a Staff Representative. This voucher is non transferable. The student's signature on this form authorizes KCDEE to obtain the student's grades and/or certificate/degree information from your institution.

Department	Course/Item	Section No.	Start/End Dates	Days	Times	Price

SUB-TOTAL OF COURSE, PROGRAM, TUITION COSTS FROM ABOVE

SUB-TOTAL OF BOOKS, ITEMS, SUPPLIES OR ALLOWANCES FROM PAGE 2

CURRENT TOTAL AMOUNT DUE:

The training institution will ensure that eligible WIA Title I-B/TAA registrants apply for federal grants and aid including the Pell Grant. The training institution will ensure that double-billing for identical training costs does not occur for those registrants who receive state and/or federal loan or grant funds, and will refund the amount of any double-billing to KCDEE. KCDEE must be informed of any non-WIA Title I-B/TAA financial assistance paid to the registrant and of its disposition. The training institution must provide KCDEE written notification of a student's withdrawal from classes. Failure to do so may result in non payment. **KCDEE is Tax Exempt: Tax Exempt #E9996-0850-05**

(NOT VALID WITHOUT SIGNATURE) Staff Representative:	Date:
(NOT VALID WITHOUT SIGNATURE) Institution Official/Vendor Manager:	Date:
(NOT VALID WITHOUT SIGNATURE) Student:	Date:

For payment of tuition, fees, books, supplies or allowances, this original ITA document must be mailed, by your institution, with an invoice to: Kane County Department of Employment & Education, Financial Department, 1 Smoketree Business Park, Suite A, North Aurora, IL 60542-8196 Phone # 630-208-1402 Fax # 630-966-1172

ITA Total \$	Total of Prior Year Vouchers \$	Total of Current Year Vouchers \$	Unspent Balance of ITA \$
ACTUAL EXPENDITURE			\$
Office use only			

KANE COUNTY DEPARTMENT OF EMPLOYMENT & EDUCATION

TRAINING PROGRAM CONTRACT

Please Print

Date _____

Name _____

Address _____

Phone # _____ SSN _____

Training Institution _____

Training Program _____

Certificate or Degree _____

Start Date of Program _____ Projected Completion Date _____

Note: Copy of training program curriculum must be attached to this agreement or it is void.

KCDEE expects that students whose training is partially or fully funded by WIA Title 1 funds, will complete their training and obtain training-related employment. In order to meet these training and employment goals, you agree to comply with or attest to compliance with the following conditions. Failure to uphold the following requirements may result in the immediate termination of all WIA Title 1 funding and preclusion from consideration for future training funds.

1. I voluntarily chose this training institution after being informed of my training options. I understand that I may not change programs once a training voucher has been issued.
2. My end goal is to complete WIA funded training and to obtain training-related employment in as short a time period as reasonably possible. I understand that I will not receive an extension of my unemployment benefits while I am in training and that I must obtain other sources of income to support me if I exhaust my unemployment benefits while I am in training.
3. I applied for financial assistance through the Financial Aid Office of the above educational institution on (date) _____ and will inform my KCDEE counselor of any and all financial aid that I am or will be receiving while also receiving WIA Title 1 funding from KCDEE.
4. I will inform KCDEE when I am awarded any grants or financial assistance loans from the above educational institution to pay for my training or expenses while I am enrolled.
5. I understand that absences, tardiness or other failure to complete the requirements of any training program may be cause for termination of this agreement with KCDEE.

6. I agree not to accept anything of value from the training institution that is not paid for with my individual training voucher.
7. I must notify my KCDEE counselor if there are **any** changes in my class schedule. I must receive **advance** approval from my KCDEE counselor before I **withdraw** from any classes. I understand that a failure to inform my counselor prior to withdrawing from a class may result in the imposition of fees that I must repay.
8. **If I withdraw from any class funded by KCDEE with WIA funds, I will do so in exact compliance with the refund deadline policy and conditions stated in the training institution's catalog, informing my KCDEE counselor of this in advance of withdrawing. A WIA funded course will not be funded for the second time (unless a full refund has been given by the institution).**
9. I will maintain a 2.0 grade point average (C average) while receiving WIA funding. If at any time I fall below a 2.0 GPA, I will meet with my KCDEE counselor to discuss the situation. I will immediately inform my KCDEE counselor of any barriers I may be experiencing that affect my ability to maintain a C average while receiving WIA funding. I will provide KCDEE with a transcript and/or current grade reports from the above school at the end of each semester.
10. I will meet with my KCDEE counselor at least once every month for the duration of my enrollment in the above training institution.
11. I will contact my KCDEE counselor prior to registering for the next semester.
12. Within five (5) business days of being awarded my certificate, diploma or other credential, I will provide my KCDEE case manager with a copy. If I fail to do so, my KCDEE counselor has my permission to contact the training institution for a copy of my certificate, diploma, transcript or other credential.
13. When deemed appropriate, KCDEE will provide me with assistance in job search skills. I will attend any job search, employment readiness, employability skills or other "soft skills" classes that my KCDEE case manager refers me to.
14. I will provide KCDEE with information about my new job including start date, job title, employer address and phone number, employer contact, hourly wage, fringe benefits, and hours.

With my signature below, I agree to comply with the conditions stated in this Contract. I understand that this agreement does not guarantee full funding for the completion of training. Continued funding is contingent on WIA Title 1 allocations and the current ITA funding limit.

WIA Participant Signature:

Date:

KCDEE Staff Representative:

KCDEE TRAINING TOOLS, EQUIPMENT, SUPPLIES AGREEMENT

I,

_____,
verify that I have received tools, equipment, and/or supplies from the Kane County Department of Employment and Training:

- for the following approved area of training

- at the training institution identified below

- and per the attached list of required training tools, equipment or supplies required by the training institution identified above in order for me to meet training requirements.

I agree to all of the following :

- 1. The above tools, equipment, or supplies will remain the property of KCDEE and must remain at the training site (as feasible and allowable) at all times.**
- 2. When I obtain unsubsidized training-related employment (verifiable by a KCDEE representative), the above items will become my property.**
- 3. It is my responsibility to return the above items to KCDEE if I do not obtain unsubsidized training-related employment.**

Participant

Signature: _____

KCDEE Representative Signature:

Date Signed: _____

KANE COUNTY DEPARTMENT OF EMPLOYMENT AND EDUCATION

P & P MANUAL RELEASE

To	All Program Staff	Subject Area	WIA
From	Director of Workforce Operations	Policy Number	CM 04-09
Date	3/30/2005	Effective Date	4/6/2005

SUBJECT: Customer Request for Training Costs Extending Beyond Training Cap

PURPOSE:

To provide program staff with the procedure for requesting training costs which exceed the current training cap.

PROCEDURES:

1. Case Manager will meet with prospective customer and complete the "Training Costs Extending Beyond Training Cap" forms.
2. Case Manager will submit "Training Extending Beyond Training Cap" forms and supporting documentation to the Director of Workforce Operations or designee of KCDEE.
3. The Director of Workforce Operations or designee will schedule a meeting with the Executive Director of the River Valley WIB within seven (7) days.
4. A scheduled meeting will be held between the two parties to review information. A decision will be reached.
5. The decision will be entered on the "Training Extending Beyond Training Cap" form.
6. Signatures of Approval to exceed or Not to Approve to Exceed will be provided from the Director of Workforce Operations and the Executive Director of the River Valley WIB will be provided and the date. This will be based on the justification of need.
7. The date will be entered when the Executive Committee receives the report.
8. A copy of the completed "Training Extending Beyond Training Cap" form with the decision and signatures will be returned to the case manager by the Director of Workforce Operations or designee.

ATTACHMENT:

1. Customer Request for Training Costs Beyond Training Cap Form

**Customer Request
For
Training Costs Extending Beyond Training Cap**

Submitted By:

Date:

RiverValley Workforce Investment Board Executive Director and KCDEE Director of Workforce Operations and/or the designee will have (7) seven business days from the date of submission to take any action.

Complete the following. Request for extending training cost should be submitted *only* if the circumstances in training or in the individual's life have changed.

Brief Descriptor of Student:

Student's Course of Study:

Total Number of Credits Remaining for Program Completion:

Number of Credits Completed to Date:

Total amount obligated to Date:

Current grade point average:

Additional amount needed to complete:

Tuition:

Books:

Fees:

Other:

Discuss if any other alternative resources were accessed:

Justification for Approval of Customer Request (include copies of documentation that would be beneficial including case notes from IWDS):

ACTION TAKEN by the RiverValley Workforce Investment Board, Executive Director and KCDEE's Director of Workforce Operations and/or designee:

ACTION reported to the Executive Committee of the RiverValley Workforce Investment Board on _____.

Signature of Executive Director of the RiverValley Workforce Investment Board	Date:
Signature of KCDEE Director of Workforce Operations or designee	Date:

KCDEE

ITA CHANGE NOTICE

ITA # _____

ITA SEQUENCE # _____

Client Name	Client SSN	WIA Fund
		1A 1D 1Y

Please check appropriate category:

Drop

Course Cancellation

Other Change

Reason: _____

Effective Date of Change: _____

Name of Training Institution:	
--------------------------------------	--

Name of class/training program changed:	
--	--

Change in Tuition/Fee Cost:

\$

Change in Books/Supplies Costs:

\$

REASON:

KCDEE Case Manager Signature: _____

Fiscal Use Only:	
Date Received : _____	Date Entered: _____
Date returned to Case Manager: _____	Reviewed by: _____

Name: _____

TRAINING BUDGET WORKSHEET

Training Program _____

Cost of Training _____
(Including: books, fees, testing, uniforms, tools, etc...)

Training Provider _____

Sources of Aid Accepted by Provider Named Above:

Financial Aid Available to Customer _____

Other Funds Available (ex: TANF, ORS, etc...) _____

WIA/TAA funds Available to Customer _____

To	All WIA Title 1, and WIA Title1 SubRecipients	SUBJECT AREA	WIA Employment & Training
From	KCDEE Administration	WIB Resolution Number	2006-04-24
Date	6/5/07	EFFECTIVE DATE	5/16/07

KCDEE has requested a change in the tuition cap for out of district residents. The maximum tuition cap requested for out of district customers was \$3000.

At the May 16, 2007 WIB meeting this request was presented as an action item for approval. The request was approved (see resolution below).

Resolution 2006-04-24: Approve Revised Policy on Tuition Cap for Residents Outside of LWIA 5. **Chair Mihelic set a motion to the floor to approve. Doerr motioned to approve; Hopkins seconded the motion. Motion carried unanimously by members present.**

All customers applying for LWIA 5 training services will be held to the out of district 10% policy with the addition of this revised tuition cap.