

Region Q Workforce Development Board

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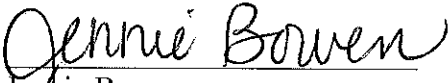
REGION Q LA ISSUANCE 2018-01

SUBJECT: On-The-Job Training Program Guide

PURPOSE: This issuance transmits revisions/updates and rescinds all prior OJT issuances.

ACTION: WIOA service providers are to review and implement the attached policy and forms for all new OJT contracts.

EFFECTIVE DATE: February 20, 2018


Jennie Bowen
Workforce Development Director

Attachments

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"Committed Equal Opportunity Employer/Programs"

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**REGION Q
ON-THE-JOB TRAINING
PROGRAM POLICY
FOR STAFF AND PROGRAM
OPERATORS**

February 1, 2018

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Workforce Innovation and Opportunity Act (WIOA) On-the-Job Training (OJT) Program Policy

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INTRODUCTION AND PURPOSE

The Workforce Innovation and Opportunity Act (WIOA) authorizes the implementation and operation of a variety of programs designed to facilitate the transition of persons into permanent, full-time employment. On-the-Job Training (OJT) is recognized as one of the most effective programs that contribute to this objective. The OJT process allows the participant to learn skills that will enhance retention in unsubsidized employment. This Policy Handbook provides procedures for implementing the OJT program.

All programs authorized under WIOA are intended to benefit those in need of training to reduce the identified skills gap. These individuals frequently require training and other services which are over and above those normally provided other new employees. WIOA OJT provides reimbursement to employers for extraordinary costs incurred in hiring persons in need of training. The reimbursement period is based on a negotiated training time.

The OJT program encourages employers to hire and train individuals that they traditionally would not hire without the incentives provided by the program. An individual may be enrolled in an OJT program only upon completion of core and intensive services to include an assessment and IEP in which OJT and the occupation offered by the employer is an appropriate activity.

Within the limits of this policy, jobs suitable for OJT contracting include those that offer permanent, full-time employment. While most jobs under contract will provide full-time employment, part-time, flex-time and other alternative work arrangements may be contracted for individuals with special employment considerations, i.e., age, handicap or other factors.

WIOA OJT must be directed towards private business, the public sector, and private non-profit sectors of the economy. The vehicle for implementing OJT is a negotiated fixed-price contract between employers (subcontractor) and the contractor (service provider).

The sections which follow contain information which describes the WIOA/On-the-Job Training Program and contracting procedures.

I. WIOA OJT ELEMENTS

Outreach and recruitment is the responsibility of all Career Center Staff and Board Staff as they work with the various partnering agencies. In addition, the Business Engagement Coordinator will work to identify potential participants as they engage with the business and industry sector. Partnering agencies can be but are not limited to: Vocational Rehabilitation, Department of Social Services, Community Colleges, Public Schools, Career Centers, Boys & Girls Club, Chambers of Commerce, and Faith-based Organizations.

A *Skills Gap Analysis* and comparison will be completed on each potential OJT participant. The gap in required skills is the basis of the Training Plan and is used to determine the length of the on-the-job training period. There are several tools that may be used to conduct and document a skills gap analysis, including www.myskillsmyfuture.org and <http://online.onetcenter.org>. Region Q will utilize EMSI and/or Prove It. These provide general guidance on how to conduct a skill gap analysis.

If a participant possesses previous experience through a Work Experience Program, a WIOA/OJT contract may be prohibited or be significantly restricted. If the participant's experience is less than the length of training time prescribed by the employer, a contract can be permitted.

The *Training Plan* will be developed based on the job description provided by the employer. The Plan will take in account the participant's prior work history and job skills. Each objective will be measurable and have an expected outcome.

The OJT program will be *marketed to potential employers* through visits made by the Business Engagement Coordinator and/or local Career Center staff. Additional advertising will be through social media sites, flyers and brochures, telephone and email contacts as well as through partnering agencies. Staff will discuss the 'value add' and benefits of the OJT program to the employer.

Reverse Referrals from employers will be considered just as any other potential participant. Please refer to Section VII: Participant Eligibility and Requirements for additional information.

Supportive services will be provided to all participants who demonstrate a need for assistance. Supportive services will be made available based on funding and cover such items as: transportation, childcare, and emergency assistance. Other requests will be considered on a case-by-case basis and will be based on need and funding assistance.

Please refer to Section II: Employer Guidelines/*OJT Contract Development* for specific details on how an OJT is developed and the requirements placed on the employer.

Case Management will be the responsibility of the Career Advisor. The Career Advisor should maintain contact with the participant to ensure the participant stays on track during training and any subsequent OJT contract. *Business Services* will be a coordinated effort between the Career Advisors and the Business Services Staff.

Please refer to Section IV: Method of Payment to Employer and Section V: Basis for Costs Reimbursement Limitations for specific details on *reimbursement and invoicing*.

Financial and Program Monitoring will be conducted by Local Area Staff and will be conducted during the review of monthly invoices along with scheduled monitoring visits throughout the program year. Additionally, formal reviews will take place at least once during each OJT contract duration.

II. EMPLOYER GUIDELINES/OJT CONTRACT DEVELOPMENT

No participant who is to be hired into a training position under an OJT contract may be employed prior to the date the contract is scheduled to be signed. The effective date of the contract shall be negotiated between the contractor and the employer and shall be based upon the needs of the participant(s) to start to work and the time needed for processing the contract (Checking corporate status, typing forms, mailing, & etc.). The employer must also be made aware of the fact that no reimbursement will be paid for any training costs incurred prior to the effective date of an approved contract.

Orientation will be provided each WIOA OJT participant by a designated staff person. Each participant, as a minimum, will be acquainted with job factors (wage rate, fringe benefits, number of hours expected to work or attend training, and place of employment), supportive services available, grievance procedures, and civil rights. Special orientation "to the world of work" may be provided by service provider staff or by the employer. The orientation is not covered as part of the OJT contract training activities.

WIOA OJT employers will be responsible for implementing and fulfilling the terms and requirements of their contract. The employer's responsibility extends also to service(s) which may be provided by another organization or agency that directly impacts the WIOA OJT participant while they are under contract. Employers should take appropriate action to assure that organizations participating in the provision of services have the expertise, staff and general capability to deliver employer services effectively.

The WIOA OJT contract must be conducted by the employer at the work site indicated on the contract. The following list provides restrictions and conditions for determining an employer's eligibility for WIOA/OJT funding.

- a. The employer has a bona fide job vacancy and/or is able to give a specific date for an expansion of the workforce to meet needs to increase productivity.

- b. The employer agrees to retain the participant in employment upon successful completion of training.
- c. It is intended that OJT assistance be available only to those employers who generally provide year-round employment.
- d. The employer must not be in violation of local, state, or federal labor laws, which includes taxes.
- e. The employer is experiencing no current abnormal labor conditions; i.e., strike or lock-out in the occupations considered for OJT.
- f. The employer must be in compliance with Section 181(b)(2) and 20 CFR 667.270 of the Act which prohibits the replacement or displacement of regular employees for the sole purpose of filling those vacancies with participants whose wages are subsidized under the ACT.
- g. The employer has not previously abused or misused federally funded OJT programs as a means of subsidizing his payroll and/or by his failure to operate such programs in compliance with applicable contract rules and regulations unless corrective action has been initiated and approved by the LA/Substate Grantee.
- h. Per Section 663.700 of the WIOA Act, subsequent training contracts will not be entered into with employers who have received payments under previous contracts and have exhibited a pattern of failing to provide continued long-term employment as regular employees with wages and employment benefits (including health benefits) and working conditions the same level and extent as other employees working similar lengths of time and the same type of work.

In Region Q, if an employer has utilized the OJT program for the training of two participants, at least one participant must have been retained at program completion. If more than two participants have been trained under OJT, approximately two-thirds (66%) must be retained at completion. The 66% retention rate is over the previous three years. The Region Q Local Area Director must approve any variance to this policy in writing.

- i. OJT contracts will not be entered into with employment agencies or employee leasing agencies for staff the leasing contractor provides to perform specific job functions for another employer.

- j. All OJT employers must be registered or licensed (as appropriate) to do business in the State of North Carolina and in good standing with applicable North Carolina Statutes.
- k. OJT contracts cannot be used to assist, promote or deter union organization.

III. WORKING CONDITIONS AND LABOR LAWS

WIOA OJT employees are subject to the same personnel rules, working conditions and benefits as regular employees hired by the employer. It is the responsibility of the person who negotiates the OJT contract to determine that the participants will be provided benefits and working conditions at the same level and to the same extent as other employees working a similar length of time and doing the same type of work and that all employer and occupational eligibility requirements are met. If the participants will not be covered by the required benefits, a contract cannot be written or approved.

- a. **Worker's Compensation:** Participants must be covered by Worker's Compensation insurance. The person who negotiates the contract must verify that the employer provides Worker's Compensation for present employees. If the employer does not have this coverage or an equivalent coverage a contract cannot be negotiated.
- b. **Fringe Benefits:** Participants shall be afforded the same benefits, at the same level, as other regular employees working a similar length of time and doing the same type of work. This means that if other new employees are considered for salary increases after 30 days, the OJT employee/trainee shall also be considered for a raise using the same evaluation process and the same increase schedule. However, the OJT reimbursement rate will remain the OJT contracted hourly rate.

OJT employees shall also be afforded all paid leave and paid holidays as other employees in accordance with the personnel rules covering regular employees but all fringe benefits shall be a cost to the employer and shall not be included in the OJT cost reimbursement. The person who negotiates the contract must determine that the OJT employee(s) are provided all benefits afforded other regular, newly hired employees of the same employer.
- c. **Union Concurrence:** The person who negotiates the OJT contract must determine if other employees of the employer, who perform the same or similar work, are included in a collective bargaining agreement. If such an agreement exists, the union agent who represents the employees must be made aware of and must concur that the terms and conditions of the proposed training will not conflict with the union bargaining agreement. If

such written concurrence will not be provided, a contract **CANNOT BE WRITTEN**. No negotiation should be undertaken when the employer declines to consult with the bargaining agent during the negotiation process.

- d. **Grievance Procedures:** If the employer has established grievance procedures for resolving employee complaints, the OJT employees must be made aware of, and subject to, these procedures. The employer must agree to abide by the LA grievance procedures for resolving grievances and complaints from the OJT participant.

IV. METHOD OF PAYMENT TO EMPLOYER

Employers are required to submit monthly invoices along with pay stubs to the WIOA Service Provider. The monthly invoices will cover the previous pay periods corresponding to the invoice submitted. The WIOA/service provider will provide the employer with assistance in completing the first invoice at the 30 day Evaluation and will assist thereafter as needed.

Employers will not be reimbursed for hours paid trainees for sick leave, vacation and holidays. Personal leave, military leave, and other paid leave is exempt from reimbursement. These days are not considered days in training status. Reimbursement is limited to time actually worked. Original contract end dates can be modified to allow for employer closings. However, the end date cannot exceed six calendar months.

V. BASIS FOR COST REIMBURSEMENT AND LIMITATIONS

WIOA OJT funds are used to reimburse employers for the extraordinary expenses incurred in training those individuals who might otherwise be excluded from job opportunities due to an identified skills gap. For PY 2017, following the DWS issuance, Region Q Local Area will provide reimbursement described in WIOA Section 3 (44) and WIOA Section 134 (c)(3) (H) to up to 75 percent of the wage rate of the participant taking into account such factors as:

- a) the characteristics of the participants resume;
- b) the size of the employer;
 - Up to 50 percent for employers with 251 or more employees
 - Up to 75 percent for employers with 250 employees or less employees
- c) the quality of employer-provided training and advancement opportunities; and
- d) such other factors as the Governor or local Workforce Development Board, respectively, may be determined to be appropriate, which may include the number of employees (at present and anticipated upon competitiveness of the participant). The local board may increase the amount of reimbursement up to 75 percent based on criteria listed above.

Employers with 100 or less employees have the option of have up to three (3) contracts at one time. These can be a combination of Work Experience and/or OJT. Employers with over 100 employees have the option to have up to six (6) contracts at one time. These can be a combination of Work Experience and/or OJT. The limits set above are a combination of all three program areas: NextGen, Adult, and Dislocated Workers; not per program area. Exceptions may be granted by the Local Area upon written request.

VI. RECORDKEEPING REQUIREMENTS

Employers must retain records for a period of three (3) years to substantiate all claims for reimbursement. Records required to substantiate training enrollments and progress, as well as extraordinary costs, generally are left to the discretion of the employers; however, the Training Plan has been developed to assist employers in substantiating extraordinary costs. The Training Plan is actually the means by which the employer verifies that the training is being or has been provided and the training participant has or has not attained the skill(s) outlined in the plan.

All participant records and eligibility documentation, along with the following OJT paperwork, will be maintained in the participant's electronic file through NCWorks.

- a. Pre-Award Analysis
- b. Skills Gap Analysis
- c. Employer Agreement
- d. Training Plan
- e. OJT Monthly Invoices
- f. Trainee Evaluation
- g. Contract Modifications
- h. All correspondence relating to the contract
- i. Any Local Area Forms

VII. PARTICIPANT ELIGIBILITY AND REQUIREMENTS

An eligible participant is someone who has the aptitude and interest to succeed in a given occupation, is a North Carolina resident and meets WIOA eligibility criteria. The eligible participant, if referred by the employer, will be required to meet WIOA eligibility guidelines and follow all program requirements before placement in an OJT can occur.

Participants in OJT shall be paid the same wages (the prevailing local wage), including periodic increases, as other workers or incumbents hired for the same or similar jobs. If the training includes cross-training in several occupations, negotiate the contract using the **lowest entry rate of pay** for the various occupations, but in no instance less than \$9.25 for any participant.

If the proposed training is for a salaried position, determine that this salary, when converted into an hourly rate, meets the minimum wage requirements. Use the following methods to convert a salary pay schedule into an hourly rate.

Weekly Salary: Salary divided by usual number of hours in work week equals hourly rate.

Monthly Salary: Salary multiplied by 12 equals annual, divided by 52 equals weekly, divided by usual number of hours in work week equals hourly rate.

Annual Salary: Salary divided by 52 equals weekly, divided by usual number of hours in workweek equals hourly rate.

OJT contracts may be written for eligible employed workers when: 1) the employee is not earning a self-sufficient wage as determined by Region Q Workforce Development Board policy (see Region Q definition of self-sufficiency); **and** 2) the requirements of 663.700 are met; **and** 3) the OJT relates to the introduction of new technologies, introduction to new production or service procedures, upgrading to new jobs that require additional skills or workplace literacy. Such employed workers must be provided a career services (general assessment) and individual career service (IEP development) prior to the determination of the appropriateness of OJT. The Region Q LA Director must give prior approval to the WIOA Service Provider for any OJT subcontracts written for employed workers.

VIII. Ineligible Occupations

Under WIOA OJT occupations for which contracts will not be approved are:

- a. Occupations dependent on commissions or gratuities as the primary source or income;
- b. Intermittent seasonal occupations;
- c. Occupations requiring a license as a hiring prerequisite (excluding drivers license);
- d. Occupations requiring less than 240 hours of training;
- e. Occupations on the construction, operation, or maintenance of any facility as is used, or to be used for sectarian instruction or as a place for religious worship.
- f. Part-time occupations (For definition purposes, full-time employment is 36 to 40 hours per week);

Note: Older Workers, workers with disabilities etc. may be negotiated for part-time employment if such negotiation is undertaken for a specific participant. The Region Q LA Director must give prior approval to the WIOA Service Provider for any OJT subcontracts written part-time employment.

- g. Occupations experiencing or historically having a large turnover in employees. Such occupations are customarily in low or unskilled jobs which require only short demonstration in order to perform the job task;
- h. Occupations where adequate supervision and/or monitoring is not available. These include traveling salespersons, truck or van drivers who are totally independent of supervision, and some out-stationed job positions with limited or no supervision.

IX. CONTRACT LENGTH

The OJT period, under the WIOA OJT contract, will be no less than 240 hours and no more than six calendar months. Length of training time will be negotiated based on factors such as a specific individual's need for additional training time and/or reduction in training time to reflect the individual participant's pre-existing skills. The IEP and the training plan inclusive of a documented skills gap analysis will detail the basis for the training time (contract length) necessary for the participant to become proficient in the occupation for which OJT training is provided.

Region Q Local Area will utilize the Specific Vocational Preparation (SVP) codes as indicated in O*NET to determine maximum length of training in OJT programs. SVP conversions as applied in Region Q LA are as follows:

- SVP 3: Over 1 month up to and including 3 months
- SVP 4: Over 3 months up to and including 6 months
- SVP 5: Over 6 months up to and including 1 year
- SVP 6: Over 1 year up to and including 2 years
- SVP 7: Over 2 years up to and including 4 years

X. TRAINEE/PARTICIPANT SKILL EVALUATIONS

WIOA Career Advisors are required to do Skill Evaluations at 30 days after the contract begins, at the mid-point of the contract, and at the conclusion. These evaluations provide the employer, the participant, and the Career Advisor the opportunity to review the Training Plan and ensure the participant is progressing. If modifications need to be made, they are noted on the Evaluation Form and the OJT contract will be modified.

XI. CONTRACT MODIFICATION AND/OR TERMINATION

The OJT contract may be modified or terminated by the WIOA Service Provider whenever, by mutual consent, it is determined that such modification or termination is in the best interest of the program participant and the employer. The Service Provider will use the Local Area Employer Agreement form to document the modification or termination. Modifications requested by an employer shall be evaluated by the WIOA service provider who may approve or disapprove the modification. Modifications are to be documented and signed in Section 4 of the Employer Agreement and the OJT Training Plan.

Region Q Workforce Development Board

Program Operator Name

On-the-Job Training (OJT) Contract: Pre-Award Analysis

Section 1: Employer Information

Complete the following Employer Information		
COMPANY NAME:		FEIN #:
CONTACT PERSON:	TITLE:	
COMPANY ADDRESS:		
PHONE:	FAX:	EMAIL:
TYPE OF ORGANIZATION: PRIVATE FOR PROFIT <input type="checkbox"/> PRIVATE NON-PROFIT <input type="checkbox"/> PUBLIC <input type="checkbox"/>		
COMPANY NAICS CODE:	# OF CURRENT EMPLOYEES IN THIS LOCATION:	YEARS IN EXISTENCE:

Section 2: Criteria for OJT Employers

YES	NO	Employer Requirements
<input type="checkbox"/>	<input type="checkbox"/>	1) Does the employer agree to ensure that the OJT will not result in the replacement of laid-off workers?
<input type="checkbox"/>	<input type="checkbox"/>	2) Does the employer ensure that the company has not exhibited a pattern of failing to provide OJT trainees with continued long-term employment?
<input type="checkbox"/>	<input type="checkbox"/>	3) Does the employer commit to providing long-term employment for successful OJT trainees, barring unforeseen economic conditions?
<input type="checkbox"/>	<input type="checkbox"/>	4) Does the employer agree to ensure that the OJT will not result in the full or partial displacement of currently employed workers nor will it infringe on promotional opportunities of current workers?
<input type="checkbox"/>	<input type="checkbox"/>	5) Does the employer agree to ensure that trainees will be provided the same benefits and working conditions at the same level and to the same extent as other trainees or employees working a similar length of time and doing the same type of work?
<input type="checkbox"/>	<input type="checkbox"/>	6) Does the employer agree to ensure that trainee wages to be paid are at least equal to both: a) the Federal, state or local minimum wage (Fair Labor Standards Act), and b) other employees in the same occupation with similar experience?
<input type="checkbox"/>	<input type="checkbox"/>	7) Does the employer agree to ensure that trainees are provided with the same workers' compensation coverage as regular, non-OJT employees? a) Worker's Compensation Company: b) Account #: c) Effective Dates: to
<input type="checkbox"/>	<input type="checkbox"/>	8) Does the employer agree to ensure that the OJT will not result in the impairment of existing contracts for services or collective bargaining agreements?
<input type="checkbox"/>	<input type="checkbox"/>	9) Does the employer agree to ensure that OJT funds will not be used to directly or indirectly assist, promote, or deter union organizing?
<input type="checkbox"/>	<input type="checkbox"/>	10) Does the employer agree to ensure that WIOA funds will not be used to relocate operations in whole or in part?
<input type="checkbox"/>	<input type="checkbox"/>	11) Does the employer confirm that the company has operated at current location for at least 120 days (unless the new location did not result in the layoff of employees at another location)?
<input type="checkbox"/>	<input type="checkbox"/>	12) Does the employer agree to provide safe working conditions for OJT trainees?

Section 3: Authorized Signatures

I hereby certify that the above information is, to the best of my knowledge, true and correct.

EMPLOYER SIGNATURE:	TITLE:	DATE:
WIOA OJT AGENCY REPRESENTATIVE SIGNATURE:	TITLE:	DATE:

Section 4: Outcome of Pre-Award Interview

1. Does the employer meet all requirements (i.e. answer "yes" to all twelve questions above) of the OJT pre-award analysis? YES NO
2. Will an OJT Contract (Employer Agreement) be developed? YES NO
If not, please explain.

Region Q Workforce Development Board

OJT Skills Gap Analysis Worksheet

Please complete all boxes. If information is missing, Skills Gap will not be completed and the form will be returned to the referral source.

TRAINEE NAME:		TARGET JOB TITLE:	
COMPANY NAME:		COMPANY ADDRESS:	
EMPLOYER REPRESENTATIVE:		TITLE:	CONTACT PHONE NUMBER AND EMAIL:
SUPERVISOR OF TRAINEE:		TITLE:	CONTACT PHONE NUMBER AND EMAIL:
WIOA OJT AGENCY REPRESENTATIVE:		TITLE:	CONTACT PHONE NUMBER AND EMAIL:
ALL BASE O*NET CODES:		APPROXIMATE YEARS OF EXPERIENCE:	FULLY REGISTERED IN NCWORKS: (Y/N)
TARGET O*NET CODE:		SVP FROM TARGET O*NET CODE:	REIMBURSEMENT PERCENTAGE:
REIMBURSEMENT RATE:	STARTING HOURLY WAGE:	TOTAL REIMBURSEMENT AMOUNT:	
PAY SCHEDULE (WEEKLY, ETC.)	PAY DAY AND PERIOD COVERED:	RATIO OF TRAINEES TO SUPERVISOR:	
BENEFITS AVAILABLE:			
ANTICIPATED CONTRACT START DATE:		CONTRACT END DATE:	

Other documentation needed to complete the analysis:

A skill gap analysis was performed by using EMSI's economic modeling tool, and the clients' previous education, and work history. The skill set values from the base occupation were subtracted from the target occupation to obtain a skill gap value between the two occupations. Using the sum of both occupations a skill gap percentage was obtained by dividing the skill set values of the target occupation into that of the base occupation. The O*Net Online website was used to research the Standard Vocational Preparedness (SVP) for the target occupation for a _____. Using the percentage value from the EMSI skill gap analysis and supporting documents the client it is determined that the client has a skill gap of ____%. Using the O*Net SVP of _____ which is _____ to become a _____, the client qualifies for a max benefit of ____ hours of on-the-Job training.

Region Q Workforce Development Board

Program Operator Name

On-the-Job Training (OJT) Contract: Employer Agreement

Section 1: Contact Information

Complete the following Employer Information		
WIOA OJT AGENCY:	WIOA OJT AGENCY REPRESENTATIVE:	PHONE NUMBER/ EMAIL ADDRESS:
COMPANY NAME:		<input type="checkbox"/> STATE ACTIVITIES FUNDS <input checked="" type="checkbox"/> FORMULA FUNDS <input type="checkbox"/> OTHER (SPECIFY)
ADDRESS:		PHONE NUMBER:
EMPLOYER REPRESENTATIVE:	TITLE:	EMAIL ADDRESS:
CONTRACT START DATE:	CONTRACT END DATE:	

Section 2: Contract Agreement

This contract is entered into between Program Operator Name, hereinafter called the Workforce Innovation and Opportunity Act (WIOA) OJT Agency, and Employer Name, hereinafter called the Employer.

The parties hereto agree that the Employer will employ worker(s) and provide On-the-Job Training services to individuals referred by the WIOA OJT Agency and deemed acceptable by the Employer in accordance with the associated pre-award analysis and training plan(s) attached and made a part thereof. Reimbursement will be paid pursuant to the terms and conditions set forth under the General Assurances on the reverse side of this signatory sheet. In no case shall total reimbursement exceed **75** percent of the gross wages paid to the trainee(s) during the training period. In addition, the Employer agrees that it will perform under this contract in accordance with the Workforce Innovation and Opportunity Act and the regulations, procedures and standards promulgated there under. The Employer shall comply with all applicable Federal, State and local laws, rules and regulations which relate to the employment of persons who perform work and are trained under this contract. Individuals employed under this contract must be certified as being eligible by the WIOA OJT Agency. The Employer agrees to submit an invoice for reimbursement to the WIOA OJT Agency **monthly**. In addition, the Employer agrees to complete and submit the attached evaluation for each trainee at the midpoint and end of the training period.

Section 3: Authorized Signatures

I agree to all terms, conditions, and general assurances set forth in this contract. I hereby certify that the information is, to the best of my knowledge, true and correct.

EMPLOYER REPRESENTATIVE SIGNATURE:	TITLE:	DATE:
WIOA CAREER ADVISOR:	TITLE:	DATE:
WIOA OJT AGENCY REPRESENTATIVE SIGNATURE:	TITLE:	DATE:
MID-EAST COMMISSION REPRESENTATIVE SIGNATURE:	TITLE:	DATE:

This instrument has been pre-audited in manner required by the Local Government Budget and Fiscal Control Act.

Mid-East Commission Finance Director/Date

Section 4: Contract Agreement Modification, if applicable

Contract Agreement terms modified: _____

Reason for modification or cancellation: _____

I hereby certify that I agree to the contract agreement modification(s) as stated above.

EMPLOYER REPRESENTATIVE SIGNATURE:	TITLE:	DATE:
WIOA CAREER ADVISOR:	TITLE:	DATE:
WIOA OJT AGENCY REPRESENTATIVE SIGNATURE:	TITLE:	DATE:
MID-EAST COMMISSION REPRESENTATIVE SIGNATURE:	TITLE:	DATE:

This instrument has been pre-audited in manner required by the Local Government Budget and Fiscal Control Act.

Mid-East Commission Finance Director/Date

Region Q Workforce Development Board

Program Operator Name

On-the-Job Training (OJT) Contract: Training Plan

Section 1: General Information

Please complete the following:

TRAINEE NAME:		JOB TITLE:	
O*NET CODE:	SVP CODE:	HOURLY STARTING WAGE:	HOURLY ENDING WAGE:
REIMBURSEMENT PERCENTAGE:	REIMBURSEMENT RATE:	MAXIMUM TRAINING HOURS:	MAXIMUM REIMBURSABLE AMOUNT:
COMPANY NAME:		COMPANY ADDRESS:	
TRAINEE SUPERVISOR:	TITLE:	PHONE/EMAIL:	
EMPLOYER REPRESENTATIVE NAME:	WIOA OJT AGENCY REPRESENTATIVE:	WIOA OJT AGENCY REPRESENTATIVE CONTACT INFO:	
PAY SCHEDULE: Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Other <input type="checkbox"/>	PAY DAY: PERIOD COVERED:	RATIO OF TRAINEES TO SUPERVISOR:	
BENEFITS AVAILABLE (list):			

Section 3: Authorized Signatures

By signing below, I agree to adhere to the Training Outline and my responsibilities thereof.

TRAINEE SIGNATURE:		DATE:
EMPLOYER REPRESENTATIVE/SUPERVISOR SIGNATURE:	TITLE:	DATE:
WIOA CAREER ADVISOR:	TITLE:	DATE:
WIOA OJT AGENCY REPRESENTATIVE SIGNATURE:	TITLE:	DATE:

Section 4: Training Plan Modification, if applicable

On-the-Job Training Plans may require changes for which a modification is necessary. Reasons for a modification include but are not limited to:

- *To extend the end date of training due to illness or equipment failures at the place of business.*
- *To correct errors in the original training budget or the description of the job duties.*
- *Cancellation.*
- *To extend the end date in order to ensure satisfactory skill attainment.*

The Employer and the OJT Agency agree that this Training Plan shall be modified as stated: _____

Except as hereby modified, all other terms and conditions of this training plan remain unchanged and in full force and effect. The effective date of this modification is _____. The employer and the OJT Agency mutually agree to abide by the terms and conditions stated and do hereby execute this modification in keeping with our respective authority.

By signing below, I agree to adhere to the modifications set forth in Section 4

TRAINEE SIGNATURE:		DATE:
EMPLOYER REPRESENTATIVE/SUPERVISOR SIGNATURE:	TITLE:	DATE:
WIOA CAREER ADVISOR:	TITLE:	DATE:
WIOA OJT AGENCY REPRESENTATIVE SIGNATURE:	TITLE:	DATE:

Region Q Workforce Development Board

Insert OJT Provider Name Here

On-the-Job Training (OJT) Contract: Monitoring Tool

Section 1: General Information

Career Advisor to complete the following:		
TRAINEE NAME:	JOB TITLE:	EMPLOYER:
TRAINEE SUPERVISOR:	TITLE:	OJT TRAINING DATES:
NAME OF REVIEWER:	TITLE:	DATE OF REVIEW:

Section 2: Trainee Interview

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1) Do you have a copy of your Training Plan?
<input type="checkbox"/>	<input type="checkbox"/>	2) Are you receiving the type of training outlined on the Training Plan? If not, do you know why? _____ _____
		3) Who is providing the training and how much time do they typically spend with you during the day? _____
<input type="checkbox"/>	<input type="checkbox"/>	4) Does your supervisor explain your assignments and provide support if needed?
<input type="checkbox"/>	<input type="checkbox"/>	5) Does your supervisor review your performance with you consistently?
<input type="checkbox"/>	<input type="checkbox"/>	6) Do you have any concerns about the job; working conditions including safety provisions, supervision, working hours, pay, etc.? _____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	7) Do you have any additional comments, questions or concerns? _____ _____ _____

Section 3: Employer/Supervisor Interview

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1) Do you have a copy of the trainee's OJT Training Plan?
<input type="checkbox"/>	<input type="checkbox"/>	2) Is the Training Plan being followed? If not, why? _____ _____ _____
		3) Who is providing the training and how much time do they typically spend with the trainee during the day? _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	4) Do you review the trainee's progress with them regularly? Please explain. _____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	5) Is the trainee making satisfactory progress in learning the position? Please explain. _____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	6) In general, are you satisfied with the OJT experience including the trainee, contract process, training plan development, and evaluation process? _____ _____ _____
<input type="checkbox"/>	<input type="checkbox"/>	7) Do you have any other questions, comments or concerns? _____ _____

Section 4: Signature

TRAINEE SIGNATURE:	DATE:
EMPLOYER/SUPERVISOR SIGNATURE:	DATE:
CAREER ADVISOR SIGNATURE:	DATE:
WIOA PROGRAM SUPERVISOR SIGNATURE:	DATE:



REGION Q
WORKFORCE DEVELOPMENT BOARD



County _____

SUBCONTRACTOR NAME: _____
ADDRESS: _____

SUBCONTRACT NUMBER _____ INVOICE NUMBER _____ FINAL INVOICE

YES _____ NO _____

SUBCONTRACT PERIOD		*INVOICE END DATE	
FROM	TO		
MONTH DAY YEAR	MONTH DAY YEAR	MONTH DAY YEAR	MONTH DAY YEAR

INVOICES ARE DUE WITHIN TEN (10) WORKING DAYS FROM THE INVOICE END DATE

TRAINEE'S NAME SOCIAL SECURITY # NAME (ADULT or DW) XXX-XX-	ONET CODE	DATE EMPLOYED	CURRENT WAGE RATE	HOURS WORKED THIS PERIOD	LAST DATE OF TRAINING	AUTHORIZED TRAINING HOURS	HOURS WORKED TO DATE	REIMBURSEMENT RATE	REIMBURSEMENT EARNED TO DATE

SUBCONTRACTOR CERTIFICATION

THE ABOVE ENTRIES ARE CONSISTENT WITH THE TERMS OF THE SUBCONTRACT, COMPATIBLE WITH THE COMPANY/ ORGANIZATION'S TIME AND PAYROLL RECORDS AND REPRESENTS HOURS SPENT IN TRAINING FOR EACH EMPLOYEE NAMES.

WIOA STAFF CERTIFICATION

THE ENTRIES ON THIS INVOICE HAVE BEEN CHECKED AND ARE CONSISTENT WITH THE TERMS OF THE SUBCONTRACT. THE REIMBURSEMENT HAS BEEN CALCULATED AND REPRESENTS THE AMOUNT DUE THE SUBCONTRACTOR

TOTAL REIMBURSEMENT TO DATE	
LESS PAYMENT MADE TO DATE	
AMOUNT TO BE PAID	

Subcontractor's Authorized Signature _____

WIOA Staff Signature _____

Title _____

Title _____ Date _____

WIOA Supervisor _____ Date _____

ACCOUNTING CODE: _____



County _____

SUBCONTRACTOR NAME: _____
 ADDRESS: _____

SUBCONTRACT NUMBER	INVOICE NUMBER	FINAL INVOICE
SUBCONTRACT PERIOD		YES <input type="checkbox"/> NO <input type="checkbox"/>
FROM	TO	*INVOICE END DATE
MONTH DAY YEAR	MONTH DAY YEAR	MONTH DAY YEAR

INVOICES ARE DUE WITHIN TEN (10) WORKING DAYS FROM THE INVOICE END DATE

TRAINEE'S NAME SOCIAL SECURITY # NAME (YOUTH) XXX-XX-	ONET CODE	DATE EMPLOYED	CURRENT WAGE RATE	HOURS WORKED THIS PERIOD	LAST DATE OF TRAINING	AUTHORIZED TRAINING HOURS	HOURS WORKED TO DATE	REIMBURSEMENT RATE	REIMBURSEMENT EARNED TO DATE

SUBCONTRACTOR CERTIFICATION

THE ABOVE ENTRIES ARE CONSISTENT WITH THE TERMS OF THE SUBCONTRACT, COMPATIBLE WITH THE COMPANY/ ORGANIZATION'S TIME AND PAYROLL RECORDS AND REPRESENTS HOURS SPENT IN TRAINING FOR EACH EMPLOYEE NAMES.

WIOA STAFF CERTIFICATION

THE ENTRIES ON THIS INVOICE HAVE BEEN CHECKED AND ARE CONSISTENT WITH THE TERMS OF THE SUBCONTRACT. THE REIMBURSEMENT HAS BEEN CALCULATED AND REPRESENTS THE AMOUNT DUE THE SUBCONTRACTOR

TOTAL REIMBURSEMENT TO DATE	LESS PAYMENT MADE TO DATE	AMOUNT TO BE PAID

Subcontractor's Authorized Signature _____
 Title _____
 Date _____

WIOA Staff Signature _____ Title _____ Date _____
 WIOA Supervisor _____ Date _____

ACCOUNTING CODE: _____

REGION Q WORKFORCE DEVELOPMENT BOARD

Insert Program Operator Name Here

On-the-Job Training (OJT) Contract Trainee Evaluation

Trainee Name: _____

Supervisor Name: _____

Job Title: _____

Company Name: _____

Section 1: Evaluation

JOB SKILLS OBJECTIVES	30-DAY EVALUATION OF SKILLS	MIDPOINT EVALUATION OF SKILLS	FINAL EVALUATION OF SKILLS
	Mastered objective <input type="checkbox"/> Satisfactory progress <input type="checkbox"/> Unsatisfactory progress <input type="checkbox"/>	Mastered objective <input type="checkbox"/> Satisfactory progress <input type="checkbox"/> Unsatisfactory progress <input type="checkbox"/>	Mastered objective <input type="checkbox"/> Satisfactory progress <input type="checkbox"/> Unsatisfactory progress <input type="checkbox"/>
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Section 2: Authorized Signatures

30 Day Evaluation

<i>I hereby certify that the above information is accurate.</i>	
TRAINEE SIGNATURE:	DATE:
SUPERVISOR SIGNATURE:	DATE:
WIOA CAREER ADVISOR SIGNATURE:	DATE:
WIOA PROGRAM SUPERVISOR SIGNATURE:	DATE:

Final Evaluation

<i>I hereby certify that the above information is accurate.</i>	
TRAINEE SIGNATURE:	DATE:
SUPERVISOR SIGNATURE:	DATE:
WIOA CAREER ADVISOR SIGNATURE:	DATE:
WIOA PROGRAM SUPERVISOR SIGNATURE:	DATE:

Final Evaluation

<i>I hereby certify that the above information is accurate.</i>	
TRAINEE SIGNATURE:	DATE:
SUPERVISOR SIGNATURE:	DATE:
WIOA CAREER ADVISOR SIGNATURE:	DATE:
WIOA PROGRAM SUPERVISOR SIGNATURE:	DATE:

Having satisfied the requirements of the training plan, employment continues on an unsubsidized basis.

Section 3: Comments (please explain any unsatisfactory evaluation items)
