

## ETPL APPLICATION & ACKNOWLEDGEMENT FORM

Training Provider Name			
Billing Address			
Main Contact Name		Email	
Alternate Contact Name		Alt. Email	
Provider has current accreditation status through an accrediting body recognized by the Department of Education or is approved through the Division of Apprenticeship Standards (DAS) as an Apprenticeship.			<input type="checkbox"/> Yes <input type="checkbox"/> DAS
Provider possess a current "approval to operate" with expiration date or exemption status from the Bureau for Private Postsecondary Education (BPPE). Exempt Reason: <input type="checkbox"/> State School/University <input type="checkbox"/> DAS Letter <input type="checkbox"/> Other:			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Exempt
All programs which will be proposed for inclusion or are currently included in the ETPL are considered in-demand or higher in-demand in San Diego County, as per the <a href="#">EXHIBIT - IN-DEMAND/HIGHER-IN-DEMAND JOBS LIST</a> . *This requirement is waived for DAS approved apprenticeships			<input type="checkbox"/> Yes <input type="checkbox"/> DAS
Provider will comply with SDWP's performance requirements (e.g. placement, entered employment, credential attainment) as outlined in the <a href="#">ATTACHMENT - ETPL, ATA &amp; ITA POLICY AND PROCEDURES</a> and enter the required performance data into the CalJOBS reporting system on an annual basis.			<input type="checkbox"/> Yes
For all programs proposed for inclusion or are currently included in the ETPL, completion will result in the awarding of an industry-recognized credential, national or state certificate, or degree. Regardless of whether the provider's program requires a third-party certification for credential attainment/national or state certificate award, the provider is responsible for appropriately reporting such attainment to SDWP.			<input type="checkbox"/> Yes
The course fees for all programs proposed for inclusion or are currently included in the ETPL are competitive with the fees of similar courses offered in the region.			<input type="checkbox"/> Yes
Tuition costs for all programs proposed for inclusion or are currently included in the ETPL are equal or less than the published rate on the provider's website or catalog. Total program costs must include all costs associated with successful completion of the program course, including textbooks, fees, exam costs, and other materials. If other costs are not included in the published rate, the training provider must provide a breakdown of additional costs to SDWP as part of the <a href="#">EXHIBIT - ETPL NEW PROGRAM REQUEST FORM</a> .			<input type="checkbox"/> Yes
Provider has been in operation for at least six months as of the date of application/re-certification and is able to provide proof of financial solvency, without the need for subsidy from WIOA training funds, if requested.			<input type="checkbox"/> Yes
Provider will comply with all Equal Opportunity requirements as outlined in the <b>SDWP Operations Manual, Chapter 9: Nondiscrimination &amp; Equal Opportunity Policy and Complaint Procedures</b> and acknowledges they must submit documentation on an annual basis as part of continued eligibility.			<input type="checkbox"/> Yes
Provider is able to meet the following requirements: a. Not debarred from doing business with the Federal Government. b. Provide written documentation of any changes to accreditation status or approval to operate. c. Post current year fact sheet on the website. d. Provide advance notice of price changes to SDWP during the annual review period. e. Adhere to routine review compliance and requirements from SDWP.			<input type="checkbox"/> Yes
Provider will comply with continued eligibility during the annual review period, which includes, but is not limited to, an annual review of the criteria listed above. Failure to comply with continued eligibility may result in being delisted from ETPL.			<input type="checkbox"/> Yes

I understand and acknowledge that SDWP has sole discretion, based on program needs, budget limitations, quality, qualifications or convenience, to approve or deny participation in the ETPL; this includes approving or denying a training provider or an individual program. I also understand that SDWP will conduct a thorough review prior to approving my organization and programs proposed for inclusion for initial eligibility or subsequent eligibility (re-certification) and may request additional documentation. By signing this form, I am confirming that I have read **SDWP Operations Manual - Chapter 4, Part 1, Attachment ETPL, ATA & ITA Policies and Procedures** and such policies will be adhered to by the training provider, including certifying that all the above eligibility requirements are met and is, to the best of my knowledge, true and accurate.

Authorized Training Provider Representative Printed Name	Authorized Training Provider Representative Signature	Date
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