

INDIVIDUAL TRAINING ACCOUNT APPROVAL POLICY

Section I:

Assessment and Services Process for Customers of the St. Lawrence County One-Stop Workforce Investment System

There are four (4) main service categories: (i) Job Search Ready Services; ii) Career Development Services; (iii) Job Match Services; and (iv) Self-Service.

The following represents the process by which customers will receive the services cited above:

All customers, except the Self-Service customer and Work Exempt UI customer will receive an Initial Assessment. The Initial Assessment (Attachment, Element List A) is documented in OSOS with a corresponding comment that indicates whether the customer needs Job Search Ready Services (JSRS) or Career Development Services (CDS).

The Initial Assessment (and subsequent assessments) will determine if the customer is in need of JSRS. Services may then include Job Matching Services (JMS), resume preparation, career guidance (short term), job search planning, job development contact, workforce information services when staff assisted, and orientation to the full array of services in the One-Stop system.

The Initial Assessment (and/or subsequent assessments) will determine if the customer is in need of CDS. These services may include: counseling services (significant staff time required); supportive services; prevocational services; skill development and upgrading services; occupational skills training (results in an Individual Training Account Voucher); workplace training (Work Experience); On-the-Job Training; and other intensive and training services as defined. Customers in need of CDS will work with a counselor to develop an Individual Employment Plan. All services developed under CDS will require a comprehensive assessment that builds upon the Initial Assessment and justifies the services with a "Determination of Need" for all Intensive and Training services, and has as its outcome the Individual Employment Plan.

Self-Service is not an actual service. It does not involve significant staff assistance. OSOS registration is the only requirement to receive self-service. It involves the use of any of the resources in the One-Stop Resource Room and is essentially accessed by the customer without Career Center staff assistance.

There are two (2) main types of assessments: (i) Initial Assessment and (ii) Comprehensive Assessment.

The Initial Assessment is an exploration by the Counselor utilizing the questions on the Initial Assessment document, a review of OSOS registration information, a resume review, a review of the UI Profile score and professional judgment as to whether the customer is Job Search Ready or the customer is in need of Career Development Services. The exception to this will be for the UI customer with a Profile Score between 70 and 100. Staff must then record this customer's initial assessment determinations as Career Development Services and schedule the customer for services.

Customers not possessing a relevant employment goal with the necessary knowledge, skills and abilities and/or who have a barrier to employment will be determined to be in need of Career Development Services. All others will be determined to be Job Search Ready.

The Comprehensive Assessment is developed with the information obtained from the Initial Assessment with further consultation with the customer; with career assessments; with a determination of need for Intensive and/or Training services; and with identification of those services that are most likely to overcome any barriers to employment and fill skill gaps. Furthermore, the comprehensive assessment will help the customer develop a relevant employment goal, and help the customer acquire those skills, knowledge, and credentials that will lead to meaningful employment (Attachment, Element List B).

All customers receiving Intensive and/or Training services will participate in Comprehensive Assessment. When the Comprehensive Assessment leads to any service requiring a financial commitment of WIOA Training or Training-related dollars such as an Individual Training Account of Supportive Services, strict documentation procedures will be followed with a documentation review by the WIOA Supervisor.

Section II: Individual Training Account (ITA) Approval Policy

The first step in the approval of all Individual Training Accounts (ITAs) will be the completion of the Initial Assessment and Comprehensive Assessment as outlined under the “Assessment and Services Process for Customers of the SLC One-Stop.” This provides justification for the “need” for Intensive and Training services when Workforce Innovation and Opportunities Act (WIOA) financial Assistance is to be offered in support of a training plan.

When justification and need for training have been established and documented, **and** when funds are available, an ITA may be issued upon documentation of eligibility for one or more funding categories. The establishment of eligibility is determined by the following: (i) SLC WDB policy “Self-Sufficiency”; (ii) SLC WDB policy “Priority of Service”; and (iii) NYS WDS Technical Advisory 08-8.

The WIOA Supervisor will review all documentation regarding eligibility and all documentation necessary for issuing an ITA.

The ITA maximum amount is established by local WDB resolution. An ITA may be approved up to the WDB’s established maximum. When issuing an ITA and determining the amount to be committed (up to the maximum), the following factors must be taken into consideration:

- The actual cost of tuition and training-related expenses, less any applicable grants.
- The funds available for training and the anticipated number of individuals in the local area requiring training within the program year.
- The availability of any other funding sources to help the customer meet the cost of training.

ITAs may only be issued to training agencies or institutions that are listed in the New York State Eligible Training Provider list.

ITAs may only be issued for training within an occupation that is in “demand” in either the Local Workforce Region or in demand in the area in which the customer has a viable plan of relocation. An occupation will be considered to be in demand when any of the following criteria are met:

- The occupation is currently listed on the New York State Department of Labor website for occupations in demand in the North Country Region.
- The individual provides a verifiable letter of hire from an employer that demonstrates that a job is available to this individual upon completion of training.
- The individual has a reasonably developed plan of business that is likely to lead to meaningful self-employment upon completion of training.
- The individual has a reasonable plan for relocation to a specific area in which it can be determined through the local One-Stop in that area that the occupation for which they are training is in demand.
- The Local WDB has approved, through resolution, priority of training funding for a “section” of the local economy, such as the “Green Jobs” SLC WDB Resolution 09-03-05.

All ITAs will first be approved by a career counselor trained in the policies and procedures mentioned above. A WIOA Supervisor or the Executive Director of the WDB will be required to sign the ITA before it is sent to the WDB’s Fiscal Department for obligation.

SLC WDB Policy No. 3 outlines ITA maximums and guidelines. This policy should always be consulted before issuing an ITA.

Initial Assessment
With Comprehensive Assessment &
Individual Employment Plan

NAME:

DATE:

- I. Presenting Need (Job search assistance or Career Development Services):
- II. Comment on individuals stated or tested interests and aptitudes:
- III. Ability & Skills: (Be specific regarding relevancy to labor market and need for an upgrade to current skills or development of new skills):
- IV. Employment History: (Comment on last 10 years):
 - a. Job Search: (Is the person ready to seek work? Skills based resume? Able to seek work electronically and in person? Good interviewing skills?):
 - b. Working with any other agencies:
- V. Health: (any employment restrictions?):
- VI. Financial Situation: (Does this person have resources to support themselves while in training or while seeking work?):
- VII. Support Services Necessary:
- VIII. Additional barriers to employment: for example: age, legal issues, lack of basic skills, lack of transportation (gas money, license), lack of childcare (money, provider), employment related health concerns for themselves or family members, etc.:
- IX. Resume:

Core Services Provided

Assessment Interview, Initial Assessment	Date Provided	_____
Counseling – Career Guidance	Date Provided	_____
Job Search Planning	Date Provided	_____
Resume Preparation Assistance	Date Provided	_____
Bonding Assistance	Date Provided	_____
Job Development Contact	Date Provided	_____
Job Search Planning	Date Provided	_____
Job Search Workshop	Date Provided	_____
Workforce Information Services Staff Assisted (LMI)	Date Provided	_____
Orientation (Other)	Date Provided	_____
Orientation (Rapid Response)	Date Provided	_____
Referral to Outside Job Listing	Date Provided	_____

Comprehensive Assessment
Determination of Need for Intensive
and/or Training Services

Check all that apply:

- Customer has skills that are not competitive in the local labor market.
- Customer has little or no work history.
- Customer has conducted an extensive, independent, and staff assisted job search and is unable to find employment.
- Customer has significant barrier(s) to employment.
- Customer is employed, but has not achieved self-sufficiency.
- Customer is unemployed or has not achieved self-sufficiency, and is in need of training and training is available.
- Customer is not benefiting from information-only services.
- Customer is deficient in one or more basic skill areas to include computers skills.
- Customer has entered employment, but requires support to retain employment.
- Customer is in need of **skills upgrading** to improve upon an existing skill or to advance to a job requiring a higher level of skill.
- Customer is in need of **retraining** to reflect a response to a change in the economy. The purpose is skill or knowledge development that may lead to a **new** occupation.
- Trade Act Eligible (see Employment Plan)
- Trade Act Waiver

Individual Employment Plan (IEP)

Employment Goal:

Goal Justification:

Outlook for Occupational Goal:

Plan Date:

Goal #1:

Training Provider:

Location:

Start Date:

Anticipated Completion Date:

Actual Completion Date:

Outcome:

Certification Received: N/A Yes No

Estimated Training Cost:

On-the-Job Contract Cost:

Supportive Services

 Child Care:

 Transportation:

 Meals/Lodging:

 Books, Fees and Supplies:

 Other:

December 11, 2013
ST. LAWRENCE COUNTY WORKFORCE INVESTMENT BOARD
Resolution No. 13-12-17

**AMENDING POLICY NO. 3:
DETERMINATION OF INDIVIDUAL TRAINING ACCOUNTS
UNDER THE WORKFORCE INVESTMENT ACT**

WHEREAS, on February 6, 2003 the St. Lawrence County Workforce Investment Board (WIB) passed Resolution No. 03-02-05 (Policy No. 3) approving \$8,000 as the maximum amount allowable for an Individual Training Account (ITA), and

WHEREAS, the resources available to the WIB have been steadily reduced since 2003, resulting in ITAs that have averaged about half of the maximum during the last two years, and

WHEREAS, the gap between the maximum and the actual ITA has become so wide that the WIB has decided to revise its ITA policy, and

NOW, THEREFORE, BE IT RESOLVED that the St. Lawrence County Workforce Investment Board approves amending Policy No. 3 by decreasing to \$4,000 the maximum amount allowable for an ITA in any program year (defined as July 1- June 30), subject to the following additional understandings and requirements:

- No recipient is guaranteed the maximum;
- The WIB's Executive Director (or his/her designee) is authorized to authorize ITAs in excess of the maximum in special cases based on his/her judgment, which shall take into consideration at least the following criteria:
 - The proposed skills to be attained;
 - Whether those skills are directly related to priority occupations;
 - Degree of shortage of the skills to be attained;
 - Whether the skills are In demand by a targeted industry; and
 - Available funds, and

BE IT FURTHER RESOLVED that all other conditions of Policy No. 3 shall remain in full force and effect.

[WIB Action: Approved 12/11/13; Blevins/Sutton; 12 ayes/0 nays/2 abstention]

I, Lori A. Barr, Secretary I of the St. Lawrence County Workforce Investment Board, DO HEREBY CERTIFY, that I have compared this copy of this Resolution, adopted December 11, 2013; with the original record in this office and that the same is a correct transcript thereof and of the whole of said original record.

Lori A. Barr, Secretary I
St. Lawrence County Workforce Investment Board
December 11, 2013

ST. LAWRENCE COUNTY ONE-STOP CAREER CENTER

APPLICANT STATEMENT/ SELF ATTESTATION DETERMINATION OF SELF-SUFFICIENCY
STANDARD FOR PROVIDING SERVICES FOR EMPLOYED INDIVIDUALS UNDER
THE WORKFORCE INNOVATION and OPPORTUNITIES ACT

Name: _____

I am currently employed full-time (30 or more hours per week)

I am currently employed part-time; I work _____ hours per week.

My current per hour wage is \$ _____

My Pre-Layoff hourly wage was: \$ _____

My Self-Employment Net Income is \$ _____

My hourly wage is \$ _____ (which is equal to or higher than \$18.86 per hour) **and** I have an active Cash Public Assistance, SNAP, and / or Medicaid Case.

**By Signing this document, I am self-attesting, under penalty of perjury, that:
All of the above statements are true to the best of my knowledge.**

Customer Signature

Date

The St. Lawrence County Workforce Development Board defines self-sufficiency as employed on a full-time basis (i.e. 30 or more hours per week), with an individual applicant's wage equal to or higher than 225% of the Federal Poverty Level (annually published, 225% Poverty Level for a family of 1 divided by 52 weeks, and then divided by 30 hours per week). An individual who has an active Cash Public Assistance, Food Stamps, and/or Medicaid Case will be considered not self-sufficient regardless of hourly wage as described above. An individual who is self-employed shall be considered self-sufficient if the net self-employment income is equal to or more than 225% of the Federal Poverty Level as described above. A Displaced Homemaker is considered self-sufficient if their current wage is equal to or more than 225% of the Federal Poverty Level as stated above. Self-sufficiency for a dislocated worker is defined as an individual applicant's hourly wage from unsubsidized employment at or above 90% of the individual's pre-layoff hourly wage.

*** Self-Sufficiency for Adults: For 2015 an adult is considered self-sufficient if their hourly wage is equal to or higher than \$18.86 and are regularly employed 30 or more hours per week.**

The customer is not self-sufficient; and is therefore eligible for WIOA Intensive Services.

The customer is self-sufficient; and is therefore not eligible for WIOA Intensive Services.

*** Self-Sufficiency for Dislocated Workers**

The customer is not self-sufficient; and is therefore eligible for WIOA Intensive Services.

The customer is self-sufficient; and is therefore not eligible for WIOA Intensive Services.

Counselor Signature

Date

Jobs for Veterans Determination Worksheet

Customer's Name _____

Participant ID Number (if any) _____

Are You a Veteran? _____ **YES** _____ **NO**

If "YES"

Did you serve in the active military, naval or air service? _____ Yes _____ No

Were you discharged or released under conditions other than dishonorable? _____ Yes _____ No

If the customer can answer "Yes" to ***both*** of these questions, then he/she qualifies as a "covered person" under the Jobs for Veterans Act (JVA).

Are you married to a Veteran? _____ **YES** _____ **NO**

If "YES"

Does your spouse have a total disability resulting from a service-connected disability? _____ Yes _____ No

Is your spouse listed as forcibly detained or interned by a foreign government or power, missing in action or captured in the line of duty, and has been so listed for a total of more than 90 days? _____ Yes _____ No

If the customer can answer "Yes" to ***either*** of these questions, then he/she qualifies as a "covered person" under the Jobs for Veterans Act (JVA)

Are you a surviving spouse of a Veteran? _____ **YES** _____ **NO**

If "YES"

Did your spouse die of a service-connected disability? _____ Yes _____ No

Did your spouse die while a total disability resulting from a service-connected disability was in existence? _____ Yes _____ No

If the customer can answer "Yes" to ***either*** of these questions, then he/she qualifies as a "covered person" under the Jobs for Veterans Act (JVA)

DETERMINATION

Based on the information proved to me by the customer, I have determined that this individual

_____ **IS** _____ **IS NOT** a covered person under the Job for Veterans Act.

Workforce Professional

_____/_____/_____
Date



St. Lawrence County One-Stop Career Center

Human Services Center
80 State Highway 310 Suite 8, Canton, New York 13617-1498
Telephone: (315) 386-3276 Fax: (315) 386-3414
www.slconestop.com
Equal Opportunity Program

Individual Training Account Voucher

NOTICE TO ELIGIBLE PROVIDER

(Training Provider) has been **certified** as an Eligible Training Provider (ETP) under the Workforce Innovation & Opportunities Act (WIOA) by the State of New York and the St. Lawrence County Workforce Development Board (WDB).

(Customer Name) investigating the possibility of enrolling for instruction in the occupational field of (Name of training program/ occupational goal), provide the customer with information about your training facility/school and answer any questions the customer may have regarding the curriculum, accreditation, financial assistance, program costs, placement rates, and average starting salaries for the above referenced field.

This notice is not a contract for training services but rather an assurance that an Individual Training Account (ITA) has been approved for this customer in an amount not to exceed the **actual program tuition or \$4,000.00 whichever is less, for enrollment into only the approved occupational skills training field/program indicated above.**

NOTICE TO WIOA CUSTOMER

This ITA Voucher is valid from _____ through _____ (cannot exceed current program year). Should it be determined that the training facility/school can best meet your needs, enrollment can occur only after an agreement has been made by a Customer, Case Manager/Counselor and a Senior Counselor/WIOA Supervisor with the training institution. "Any alterations or changes will render this voucher null and void."

PAYMENT PROCEDURE

All other eligible financial resources are to be used prior to incurring costs on this authorized local Individual Training Account. Payment processes and tuition retrieval procedures will reflect those used by the training institution in the conduct of their normal operation, i.e. one-time payment or incremental payments based on normal billing procedures. Payments will be made directly by the Workforce Development Board's fiscal agent, St. Lawrence County, to the training institution on behalf of the sponsored student per the Workforce Innovation & Opportunities Act Policies and Procedures for Customers Enrolled in Classroom Training.

Signature of Customer

Date

Signature of WIOA Case Manager/Counselor

Date

Signature of Senior Counselor/WIOA Supervisor

Date