

This sheet asks for information we need to guide you through preparing your Standards and registering your program.

Sponsor		FEIN Federal Employer Identification Number _____		
Date	National Affiliation, if any			
Industry Code (NAICS)		6 digits categorizing the company's business activity <i>SOS Lookup NAICS Guide</i>		
Products / Services				
Type of Sponsor		Is the sponsor listed as a business with the RI Secretary of State?	Have you registered a program before?	
Employer		Yes	No	
Community-Based Organization		No	Yes, in Rhode Island	
College / University		No, sole proprietorship	Yes, in another state	
Foundation		Profit or Non-Profit	Do you maintain workers' compensation insurance for all your employees?	
Public Sector Agency				
Union / Labor				
None of the Above, Other				
Are the workers in the apprenticed occupations represented by a union?		Program Administrative Type		Who will oversee the program?
Yes No		Single Employer		Individual will be designated
If yes, name of union(s)		Group Sponsor		Apprenticeship Training Committee
		Employer Joint with Union		
		Group Joint with Union		
Is the program sponsor willing to be placed on the WIOA Eligible Training Provider List?				Number employed in RI
Yes No				<i>(all occupations)</i>
Valor Act. The sponsor is aware of the availability of educational assistance for a veteran or other individual eligible under chapters 30-36 of USC title 38, for use in connection with a registered apprenticeship program and will make a good faith effort to obtain approval for educational assistance for, at a minimum, each program location that employs or recruits a veteran or other individual eligible. Yes No				
YOUR COMPANY WORKFORCE IN APPRENTICE OCCUPATION(S)				
<i>Number of Fully-Proficient Employees by Occupation</i> <i>(exclude apprentices, trainees)</i>				
<i>Occupation</i>	<i>Total</i>	<i>Women</i>	<i>Minorities</i>	<i>Age 16-24</i>
Primary Contact. Contact will receive an administrative login to manage registrations. You may request additional logins.				
Name	Title			
Phone	Email			

PROGRAM COSTS (Required for ETP List)

Each state has an ETP List comprised of entities with a demonstrated capability of training individuals to enter quality employment. The State Eligible Training Provider List is used by individuals seeking training opportunities funded by the Workforce Innovation and Opportunity Act (WIOA). Registered Apprenticeship programs are automatically eligible for the State ETP list and are not subject to the same application and performance requirements as other training providers. To be listed, please provide cost information about your program registered apprenticeship Program.

Tuition / Fee:	Books:
Tools:	Please describe any equipment used in this program:
Other:	
If one of your apprentices is receiving WIOA funds, DLT will contact your company to verify continuing participation in employment and training. Please designate the Authorized ETPL Contact Person.	
Contact Name:	Contact Title:
Contact Phone:	Contact Fax:
Contact Email:	

When you hire a new apprentice, please let them know that funds to pay for courses, books, gear and equipment may be available through WIOA if they are unemployed, have been a dislocated worker, or meet certain other criteria for financial aid. **New hires need to make an appointment with EmployRI to establish eligibility before starting work.**