



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
DEPARTMENT OF LABOR



**Work-Based Training Sponsor Application
Instructions & Checklist**

Work-based training is employer-driven with the goal of unsubsidized employment after participation. Employers/Entities seeking approval to be a Sponsor of trainees under the DOLWIA Work-Based Training Programs are required to apply to be a Work-Based Training Sponsor. Employers/Entities must complete and submit an application to the DOL-Workforce Investment Agency Division.

Work-Based Training Sponsor Application		
Section A: WORK-BASED TRAINING Sponsor Information	Sponsor Information: Address, contact information, Federal Employer Identification (FEIN) number, and Business License #.	
Section B: Authorized Representative Information	List an authorized individual with decision making authority as the <u>primary</u> and <u>secondary</u> authorized representative for the entity.	
Section C: General Eligibility	Self-Explanatory	
Section D: Type of Organization	Self-Explanatory	
Section E: Organization Experience and Performance	Self-Explanatory	
Section F: Accessibility and Non-Discrimination	Self-Explanatory	
Section G: Trainee Position Information	Self-Explanatory	
Section H: Trainee Supervisor and Trainer Information	Self-Explanatory. Start with Supervisor, then Trainers include Titles, What they will train the trainee on and What their credentials are to conduct such training (Resume will be sufficient)	
Section I: Designated Mentor/Journeyworker Information	This section is for Registered Apprenticeship Program to identify who will be mentoring or supervising potential apprentice(s).	
Section J: On-the-Job Learning (OJL) and Related Training Instruction (RTI) Information	This section is for Registered Apprenticeship Program to determine the type of program, On-the-Job Learning and Related Training Instruction hours, and provider for potential apprentice(s).	
Section K: Wage Progression Schedule	This section is for Registered Apprenticeship Program to establish the wage progression for the apprentice(s) during the entirety of the program.	
Section L: Standard Builder Information	This section is for Registered Apprenticeship Program collecting information to upload into the Standards Builder System by the USDOL Office of Apprenticeship for review and approval.	
Section M: Assurances	Acknowledge compliance with and/or understanding of each assurance item listed	
Section N: Attachments	Provide copies of each applicable attachment requested	
Section O: Attestation	Self-Explanatory	



**WORK-BASED TRAINING
SPONSOR APPLICATION**

Application Date:

APPLICANT INFORMATION	
Section A: Work-Based Training Sponsor Information	
Name of Potential Training Sponsor (Entity Name):	Federal Employer Identification #:
	Dept of Finance MUNIS Vendor No.
	CNMI Business License Number:
	Expiration Date:
Physical Address:	Mailing Address:
Telephone Numbers:	Email Address:
	Website Address:
Section B: Authorized Representative Information	
Primary Contact:	Title:
	Phone Number(s):
	Email:
Secondary Contact:	Title:
	Phone Number(s):
	Email:

Section C: General Eligibility

To be eligible to provide Work-Based Training services, the provider shall be one of the following:

- An entity that carries out a USDOL Approved Apprenticeship Program
- A public provider capable of training opportunities leading to a full-time job or advanced education.
- A private provider capable of training opportunities leading to a full-time job or advanced education.
- Other entity capable of training opportunities leading to a full-time job or advanced education.

Section D: Type of Organization

- | | |
|--|---|
| <input type="checkbox"/> USDOL Approved Apprenticeship Program | <input type="checkbox"/> Private Non-Profit |
| <input type="checkbox"/> Public Entity | <input type="checkbox"/> Community Based Organization (CBO) |
| <input type="checkbox"/> Private For-Profit | <input type="checkbox"/> Other: _____ |

Section E: Organization Experience and Performance

Note: Applicants must have been in business/operations for at least one-year prior to application

1. Have you ever provided a Work-Based Training Sponsorship?
 Yes, Continue Below | No, Go to #6.
 - a. If yes, in what year did the Work-Based Training Sponsorship occur?
 - b. If yes, did you hire any of the trainees? Yes No
 - i. If yes, how many trainees were hired?
 - c. If no, what was the reason for non-hire?
 - d. Other Comments:
2. Were trainees offered the opportunity to pursue advanced education? Yes No
 - a. If yes, how many trainees pursued higher education? _____
 - b. As a result of advanced education, did you higher any trainees? Yes No
 - i. If yes, how many trainees were hired?
 - ii. If no, what was the reason for non-hire?
 - iii. Other Comments: _____
3. Are the trainees still working for your organization? Yes No
 - a. If yes, for how long?
 - b. If no, what was the reason why they are no longer employed?
4. Over the years, how many WIOA funded trainees have you hired?
5. How many WIOA funded trainees are still working for your organization?
6. Is your entity able to hire trainees who successfully complete the training? Yes No
7. Did your organization set aside funds or have dedicated budget for the hire? Yes No
If yes, for Government attach the budget and funding source, for others attach a guarantee letter.
8. Is this application intended for a Registered Apprenticeship Program? Yes No

If yes, complete Section F and skip Section G and H. If no, continue to the next sections and skip Sections I, J, K, and L.

Section F: Accessibility and Non-Discrimination

Is the training facility or location accessible to all persons with disabilities? Yes No
 If yes, please attach up-to-date photos of the exterior (e.g. main entrance to the facility)

Is the training program(s) accessible to all persons with disabilities? Yes No
 If yes, please attach up-to-date photos of interior (e.g. hallway, classroom, laboratory, training room, if applicable, computer room, elevator if program is not on the ground level).

Is the organization compliant with WIOA non-discrimination and equal opportunity provisions?
 (Please refer to Section K: Assurances)
 Yes No

Section G: Trainee Position Information

1. Number of Trainees Requested:
2. Proposed Training Island and Location?
3. How many months is requested for the position?
4. Position Title:
5. Position Description (O*Net is an acceptable reference source) Attached? Yes No
6. Training Plan Attached?
 - a. Training plan has reasonable timeline? Yes No
 - b. Training plan list activities/functions to be done by trainee? Yes No
 - c. Training plan has progress of training? Yes No
 - d. Training plan records measurable skills gained? Yes No

Section H: Trainee Supervisor and Trainer Information (attach resumes of each)

Please list supervisor and trainers that will provide the best learning opportunities for transition to FTE.

Name	Title	Training to be delivered	Credentials

Section I: Designated Mentor/Journeyman Information

Name of Mentor(s):

Occupation Title(s):

Mentor Wage Rate(s):

Years in trade:

Section J: On-the-Job Learning (OJL) and Related Training Instruction (RTI) Information

Type of Program: Time-Based Competency-Based Hybrid

Program Length: _____ Hours of OJL per year:

Hours of RTI per year:

Primary RTI Provider:

Secondary RTI Provider:

Section K: Wage Progression Scale

Apprentices shall be paid a progressively increasing schedule of wages starting with no less than the Federal or State minimum wage.

Wage Level	Start Date	Wage per hour
Entry Wage		
Intermediate Wage		
Exit Wage		

If additional wage levels are required, please provide them on a separate sheet attached to this application

Section L: Standard Builder Information

1. Will this be an individual (Single employer) or Group (Multiple employers) Program?
2. Are the employees signatory to a union?
3. Name of Union, contact person, address, phone number (if applicable):
4. Estimated Number of:
 - a. Mentors/Journey workers (Skilled workers): _____
 - b. How many are females: _____
 - c. How many are minorities: _____
 - d. Youth (Under 18): _____
5. Total number of initial apprentices anticipated to be registered in the first year of operation:
 - a. Do you intend to utilize a pre-apprenticeship program? _____
 - b. Will you be using electronic technology in your instructional delivery?

Section M: Assurances

The Work-Based Training Sponsor assures that it will comply with all non-discrimination and equal opportunity provisions of the laws and the additional assurances listed below:

Non-Discrimination and Equal Opportunity Assurances	
Initial	Section 188 of the Workforce Innovation and Opportunity Act (WIOA), Title 29 CFR Part 38, Non-Discrimination and Equal Opportunity Regulations prohibits discrimination on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, sex stereotyping, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief; and/or against any beneficiary programs financially assisted under Title of the Workforce Innovation and Opportunity Act of 2014 on the basis of the beneficiary’s citizenship/status as a lawfully admitted immigrant authorized to work in the United States, or his/her participation in any WIOA Title I financially assisted program or activity;
	Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis of race, color and national origin;
	Title IX of the Education Amendments of 1972, as amended which prohibits discrimination on the basis of age and sex in educational programs;
	The American with Disabilities Act Amendments (ADAAA of 2009) is a civil rights law that was originally passed by Congress in 1990 (as the Americans with Disabilities Act-ADA) and protects individuals with disabilities from discrimination in the workplace, as well as school and other setting, it prohibits discrimination on the basis of disability in employment, state and local government, public accommodations, commercial facilities, transportation and telecommunications;
	29 CFR Part 38 and all other regulations impeding the laws listed above, and;
	The assurances apply to the grant application’s operation of WIOA Title I financially-assisted program or activity, and to all the agreements the grant application makes to carry out the WIOA Title I financially assisted program or activity. The grant applicant understands that the United States has the right to seek judicial enforcement of this assurance.
Additional Assurances	
Initial	The Work-Based Training sponsor will provide additional information if requested by the CNMI State Workforce Development Board and/or DOL-WIA staff.
	The Work-Based Training sponsor assures it will assume responsibility for complying with applicable federal and state rules, policies, procedures, and directives concerning Work-Based Training requirements.
	The Work-Based Training sponsor will ensure that the trainees will be trained in safe and sexual harassment free environments and conditions. Exposure to such conditions will be grounds for termination of training. Exemptions are for certain potentially hazardous conditions listed in the job description and training plan or otherwise approved by the SWDB.
	The Work-Based Training sponsor will provide the trainees with an Alcohol and Drug Free Workplace. In the event that the training site or job function involves alcohol and or drugs (i.e. Alcohol Beverage and Tobacco Control), the Work-Based Training sponsor will have additional measures to protect the trainee.
	The Work-Based Training sponsor agrees to provide access to relevant financial and WIOA participant’s attendance and performance records (including FERPA information) to be reviewed by select members of the CNMI State Workforce Development Board and DOL- WIA. The reviewers will be sworn to protect the participant’s privacy and personal information.

	The Work-Based Training sponsor agrees to cooperate with scheduled/unscheduled monitoring visits, orientations, interviews, etc. by the CNMI State Workforce Development Board and/or DOL-WIA staff.
	The Work-Based Training sponsor agrees not to withhold client certifications or the ability to take certification exams based on waiting for payments from the DOL-WIA.
	The Work-Based Training sponsor assures the State that they are not debarred from conducting business in the CNMI or the government of the United States of America.
	The Work-Based Training sponsor assures it will submit a revised application if there is a significant change to the trainees' job functions, location, job description, etc.
	The Work-Based Training sponsor agrees to adhere to the CNMI's approved negotiated performance targets for Entered Employment 2 nd Qtr After Exit; Entered Employment 4 th Qtr After Exit; Median Earnings 2 nd Qtr After Exit; Credential Attainment Rate; Measurable Skills Gain
	Measurable Skills Gain is one of the WIOA required performance indicators that measures the interim progress while actively enrolled in an education or training program. The training provider agrees to furnish school records with the consent of the WIOA participant and in accordance to FERPA.
	After the first 3-weeks of each month, the Work-Based Training sponsor agrees that by the end of the fourth week, to fill out and submit monthly assessment forms to DOL WIA. Failure to do so will be subject to termination of the training.
	The Work-Based Training sponsor agrees to complete and submit each required document or attachment for each position and trainee to be considered for approval and furnish all supporting documents.
	The Work-Based Training sponsor agrees to a work experience schedule that may be full-time, part-time or intermittent, according to the position to which the trainee is assigned and the needs of the workplace.
	The Work-Based Training sponsor agrees to submitting all timesheets, time cards, and any payroll related documents in a timely manner. The Work-Based Training sponsor agrees that failure to submit such in a timely manner will result in a delay in payroll for the trainee and that the Work-Based Training sponsor may have to pay the trainee on their own until they comply with such requirements.
	The Work-Based Training sponsor agrees to maintain every effort not to exceed 40 hours of work experience and training per week and not to exceed up to 80 hours bi-weekly.
	The Work-Based Training sponsor agrees to abide by the Fair Labor Standards Act of 1938 (FLSA) for overtime and/or compensatory time. The Work-Based Training sponsor understands that DOL-WIA explicitly does not authorize overtime and that compensation for any overtime work worked will be the responsibility and paid for by the Work-Based Training sponsor or entity to which the Trainee is assigned.
	The Work-Based Training sponsor understands that Trainees are not entitled to paid holidays. Any holidays worked will be the responsibility and paid for by the Work-Based Training sponsor or entity to which the Trainee is assigned at the appropriate rates.
	The Work-Based Training sponsor understands that Trainees are not entitled to fringe, insurance or leave benefits such as retirement, life/health insurance, annual, or sick leave.

	The Work-Based Training sponsor understands that Trainees will be paid normal working hours should inclement weather or nationally recognized disasters such as pandemics fall within a normal working day that has been officially closed for normal business operations.
	The Work-Based Training sponsor understands that Trainees are entitled to Workmen's Compensation in the event of on-the-job related injury or illness and is responsible for reporting such injury or sickness immediately to DOL WIA.
	The Work-Based Training sponsor understands that the agreement between the Work-Based Training Sponsor and DOL WIA is NOT automatically renewable, nor does it create any option to renew or extend the appointment.
	The Work-Based Training sponsor agrees to update and submit a new application for each additional request for trainee or extension of a training period (including justification) for any period beyond the original agreed upon date and will follow the appropriate schedule for services as listed below.
	The Work-Based Training sponsor agrees to participating and having trainees participate in all applicable DOL WIA orientations and training opportunities.
	The Work-Based Training sponsor understands and agrees that the Work-Based Training is not designed to replace an existing employee or position and that the trainee assigned to them is to be trained for a position to be filled. Doing so will be considered supplanting a worker and deemed for termination.

Section N: Attachments

- | | |
|--|---|
| <input type="checkbox"/> Government Budget and Funding Source | <input type="checkbox"/> Letter of Guarantee/Cover Letter |
| <input type="checkbox"/> Position Description | <input type="checkbox"/> Supervisor/Trainer Resumes |
| <input type="checkbox"/> Accessibility & Non-Discriminatory - Photo(s)
(Refer to Section F) | <input type="checkbox"/> Training Plan |
| <input type="checkbox"/> Additional Materials: _____ | |

Section O: Attestation

I, the undersigned, am authorized to sign on behalf of _____
(Entity/Business Name) and affirm that the information provided in this application, including any attachments, are complete and correct to the best of my knowledge and belief. I have read, understand and agree to the application criteria referenced within this application, including any attachments, and further understand and agree to the following:

- This application will be reviewed by the DOL-WIA;
- This application will not be accepted for review by the DOL-WIA if any field has been left blank or deemed incomplete.
- It is the responsibility of the entity to inform the DOL-WIA immediately of any and all updates or changes to any information contained in the application, including the "Attachment(s)" to the application, in the format required by the DOL-WIA.
- Any outstanding issues of fraud, non-payment of funds, or record of employment law noncompliance may result in delay or denial of this application or the entity's subsequent removal.
- Failure to comply with any of the requirements listed in the Work-Based Training Sponsor Application forms, including any attachments, and any misrepresentation of information provided in the Work-Based Training Sponsor Application forms, including any attachments, may result in denial of the application.

Authorized Signature

Date

Printed Name

Title

FOR OFFICIAL USE

Date Reviewed:	Reviewer:	Stamp Received	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED		Stamp Received
Remarks/Comments:			