

PARTICIPANT TRAINING & EQUIPMENT AGREEMENT

Participant Name (print): _____

You have been approved for Workforce Innovation and Opportunity Act (WIOA) funding to assist you with costs associated with your employment related training. **Participants eligible for WIOA funding must understand, agree and comply with the following:**

I understand that continued WIOA tuition assistance is contingent on availability of WIOA funding and satisfactory progress in school.

My anticipated training start date is: _____; anticipated completion date is: _____

I agree to seek employment upon completion of training and will notify my career advisor/navigator immediately upon obtaining employment. In addition, I agree to provide/release my employment information to the Office of Workforce Development (OWD).

I will be familiar and comply with the training institution's attendance, withdrawal, and code of conduct policies.

I will apply for financial aid through FAFSA and the Financial Aid of the training institution, if applicable.

To ensure there is no duplication of tuition payment, I will provide my career advisor/navigator with application results, including award letters from other funding sources.

I authorize _____ **(name of school)** to release my educational records, including attendance, grades, transcripts and/or progress reports, financial awards, educational expenses, etc., to my career advisor/navigator.

- I will strive to maintain, at a minimum, satisfactory progress which includes:
 - A grade point average that does not fall below 2.0; or
 - A grade point average sufficient to graduate from, or receive certification in my approved area of study; or
 - Sufficient coursework to finish the approved course of study within the timeframe established under the approved training plan.
 - In the case of self-paced or ungraded learning programs, satisfactory progress means participating in classes and passing certification examinations within the timeframe established under the approved training plan.
- I will maintain on-going contact and discuss my progress with my career advisor/navigator as documented on my Career Plan but no less than once every 60 days throughout enrollment, job search, and employment follow-up.
- I will resolve issues with the training instructors and training institution directly. If I am unable to resolve them satisfactorily, I will contact my career advisor/navigator for assistance.
- I will notify my career advisor/planner immediately if issues or concerns arise that may impact my continued training participation or require a change to my training program/schedule.
- I will notify my career advisor/navigator with written notification of my consideration of discontinuing my training program, or dropping a specific no less than 10 days prior to taking action.
- I will notify my career advisor/navigator immediately if my contact information changes.
- I acknowledge that I am aware of the Career Center grievance policy with regard to the decision about my eligibility for an Individual Training Account (ITA) and how to appeal such a decision.
- I acknowledge that I am aware of information regarding my rights to Equal Opportunity/Non-Discrimination under the Workforce Innovation and Opportunity Act (WIOA) and how to file a complaint.

Initials: _____

PARTICIPANT EQUIPMENT AGREEMENT

If training-related equipment necessary for my training is purchased with WIOA funds, I agree to the following:

- I understand that I cannot sell or give away my equipment, nor use it in an irresponsible manner.
- Safety and security of equipment is my sole responsibility. If my equipment is lost, stolen, or damaged, it is my responsibility to replace them.
- I will return any training-related equipment if I do not successfully complete my training.

Initials: _____

I understand that failure to comply with the terms of this contract may result in my termination from the WIOA program. I have read and agree to the conditions stated on the Participant Training Agreement and Participant Equipment Agreement. I have retained a copy of this agreement.

Participant Signature: _____ **Date:** _____