American Apprenticeship Grants Individual Record File: Data Dictionary and

March 2019 - Version 3.1

Instructions

Data Element Name	Data Definition and Instruction	Code Value
Grant Number	Grant number as it appears on the appropriate Notice of Obligation (NOO) or equivalent official document from the U.S. Department of Labor	
Project Name	Grant number as it appears on the appropriate Notice of Obligation (NOO) or equivalent official document from the U.S. Department of Labor	

Required (Yes/No)
Y
Y

Data Element Name	Data Definition and Instruction	Code Value	Required (Yes/No)
Grantee Street Address	Street address as it appears on the appropriate NOO or equivalent official document from the U.S. Department of Labor		Y
Grantee City	City mailing address as it appears on the appropriate NOO or equivalent official document from the U.S. Department of Labor		Y
Grantee State	State mailing address as it appears on the appropriate NOO or equivalent official document from the U.S. Department of Labor		Y
Grantee 5-Digit ZIP Code	ZIP code as it appears on the appropriate NOO or equivalent official document from the U.S. Department of Labor		Y
Contact_Type	Valid Values: Grantee, ProgramSponsor, Employer1....20, Pre-Apprentice Provider, RtiProvider		Y
Grantee Contact Name	Enter the name the grantee official that is certifying submission of the report to the Department. **This contact is usually the Grant Signatory. This person must be available at the time of report submission and available to re-validate data that may be returned with errors. This available time-frame may include up-to three weeks after initial report submission.**		Y
Grantee Contact Title	Enter the title of the grantee official that is certifying submission of the report to the Department . Contact Title refers to the business title such as "Chief Financial Officer"		Y
Grantee Contact Telephone Number	Enter the area code (999) and telephone number (999-9999) of the authorized official		Y
Grantee Contact Telephone Extension	If Applicable, enter the authorized official's telephone extension		N
Grantee Contact Fax Number	Enter the area code (999) and telephone number (999-9999)		N
Grantee Contact Email Address	Enter the email address of the authorized official		Y
Grantee Contact Street Address	Enter the Grantee Contact's street address. This may or may not differ from the Grantee address.		Y
Grantee Contact City	Enter the Grantee Contact's city. This may or may not differ from the Grantee address.		Y
Grantee Contact State	Enter the Grantee Contact's state. This may or may not differ from the Grantee address.		Y

Grantee Contact 5-Digit Zip Code	Enter the Grantee Contact's 5-digit zip code. This may or may not differ from the Grantee address.		Y
Grantee: Last Event Date	The date that the Grantee information was last modified	DATE MM/DD/YYYY	Y

Data Element Number	Data Element Name	Data Definition and Instruction

Program Sponsor Information

Data Element Number	Data Element Name	Data Definition and Instruction
3	Program Sponsor Number	A unique identifier for the Program Sponsor *A program must have only one program sponsor number that associates all employers/occupations *The same program sponsor number cannot be registered by another program simultaneously
4	Program Sponsor 6-digit NAICS Code	Enter the 6-digit North American Industrial Classification System (NAICS) Code (http://www.census.gov/eos/www/naics/)
5	Program Sponsor Name	This may or may not be the same of the Grantee name
6	Program Sponsor Street Address	Enter the Program Sponsor's street address. This may or may not differ from the Grantee address.
7	Program Sponsor City	Enter the Program Sponsor's city. This may or may not differ from the Grantee address.
8	Program Sponsor State	Enter the Program Sponsor's state. This may or may not differ from the Grantee address.
9	Program Sponsor 5-Digit Zip Code	Enter the Program Sponsor's 5-digit zip code. This may or may not differ from the Grantee address.
10	Registration Date	Date the program was officially registered by the Office of Apprenticeship or State Apprenticeship Agency.

Program Information

Data Element Number	Data Element Name	Data Definition and Instruction
11	Program Type	bargaining agreement **Group, joint** = multi employer association, covered by a collective bargaining agreement **Group, non joint** = multi employer association <u>not</u> covered by a collective bargaining agreement
12	Number of Participating Employers	Number of employers who are signatories to the standards of apprenticeship for training of apprentices. Default value = 1 employer
13	Employer: Name	Enter the name of the employer

| 14 | Employer: Street Address | Enter the employer's street address. |

| 15 | Employer: City | Enter the employer's city. |

| 16 | Employer: State | Enter the employer's state. |

| 17 | Employer: 5-Digit Zip Code | Enter the employer's 5-digit zip code. |

| 18 | Employer: Status | Choose the employer's status |

| 19 | Bargaining Agency Name | If applicable, name of local union |

| 20 | National Union Affiliation | If applicable, Union acronym, example: IBEW, SMWIA, etc. |

Occupation Information

| 21 | Occupation: Apprentice Occupation 8-digit O*NET Code | Enter the 8-digit O*NET code that best fits the apprenticeable occupation (www.onetonline.org). |

| 22 | Occupation: Occupational Title | Specific title of an occupation that may or may not be the same as that designated by the O*NET data system (www.onetonline.org). |

| 23 | Occupation: RAPIDS/State Occupation Code | Enter RAPIDS occupation code if known |

| 24 | Occupation: Training Approach | **Time-Based Approach** = apprentice required to complete a specific number of hours of on-the-job learning (OJL) and related training instruction (RTI)
Competency-Based Approach = apprentice required to demonstrate competency in defined subject areas and does not require any specific hours of OJL or RTI
Hybrid Approach = apprentice required to complete a minimum number of OJL and RTI hours and demonstrate competency in the defined subject areas |

25	Occupation: Primary RTI Type of Instruction	1= Community college 2= Adult education 3= Sponsor 4 = Private colleges 9 = Other
26	Occupation: Primary RTI Provider Name	Enter the name of college, adult education, or sponsor
27	Occupation: Secondary RTI Provider Name	Enter the name of college, adult education, or sponsor
28	Occupation: Secondary RTI Type of Instruction	1= Community college 2= Adult education 3= Sponsor 4 = Private colleges 9 = Other

Code Value	Required (Yes/No)
	N
	Y
	Y
	Y
	Y
	Y
	Y
	Y
Non Joint	
2 = Independent, Joint	
3 = Group, Joint	Y
	Y
	Y

Y

Y

Y

Y

1 = Active
2 = Cancelled   y
Y

Y

Y

Y

N

1 = Time-Based
2 = Competency-
Based
3= Hybrid

Y

Y

Y

N

N

Data Element Number	Data Element Name	Data Definition and Instruction	Code Value	Required (Yes/No)
Apprentice Program Sponsor				
1	Program Sponsor Associated with Apprentice	This may or may not be the same of the Grantee name		Y
Apprentice Information				
2	Apprentice First Name	Enter the first name of the apprentice		Y
3	Apprentice Middle Name	Enter the middle name of the apprentice		N
4	Apprentice Last Name	Enter the last name of the apprentice		Y
5	Apprentice Suffix	This is the suffix to the apprentice name. Values include I, II, III, Jr., Sr. Default is Null.	I II III Jr Sr	N
6	Apprentice ID	A unique identifier for the apprentice *An apprentice must have only one apprentice id that associates all programs/occupations that the apprentice has been registered in. *The same apprentice cannot be registered in another program and/or occupation simultaneously.		N
7	Apprentice Social Security Number	Enter the apprentice social security number. The value is 999999999 if the user does not supply a value it is set to 999999999 and the SSN Identifier is set to 'N' This value is to be encrypted.	xxxxxxxxx 999999999 = individual did not disclose	N
8	Date of Birth	Month value greater than 12 is not allowed. The largest date for each month is validated. Value larger than the largest date in each month is not allowed. January, March, May, July, August, October and December have 31 days. February has 28, April, June, and	YYYYMMDD	Y
9	Gender	Record 1 if the participant indicates that he is male Record 2 if the participant indicate that she is female Record 9 if the participant does not self-identify sex Leave blank if this data element does not apply to the person	1 = Male 2 = Female 9 = Participant did not self-identify	Y
10	Employment Status	Enter participant's employment status. Incumbent workers are defined as existing employees of the company.	1 = New Employee 2 = Existing Employee (Incumbent Worker)	Y

11	Date Apprenticeship Begins	Enter the date the apprentice was registered	Y
12	Start Date	Enter the date that the apprentice began their apprenticeship. This date may be the same as the registration date, but cannot be prior to the registration date.	Y

Contact Information

13	Apprentice Street Address	Enter the apprentice's street address.	Y
14	Apprentice City	Enter the apprentice's city.	Y
15	Apprentice State	Enter the apprentice's state.	Y
16	Apprentice 5-Digit Zip Code	Enter the apprentice's 5-digit zip code.	Y
17	Primary Telephone	Enter the area code (999) and telephone number (999-9999) of the apprentice	Y
18	Other Phone	Enter the area code (999) and telephone number (999-9999) of the apprentice	N
19	Email	Enter the email address of the apprentice	Y

Demographics

20	Ethnicity Hispanic / Latino	Record 1 if the participant indicates that he/she is a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant does not self-identify his/her ethnicity. Leave blank if this data element does not apply to the person (covered entrants, TAA non participants) and the data is not available.	1 = Yes 0 = No 9 = Participant did not self-identify	Y

	Race	maintains cultural identification through tribal affiliation or community recognition. Record 2 if the participant indicates that he/she is a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent (e.g.,, India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. Record 3 if the participant indicates that he/she is a person having origins in any of the black racial groups of Africa. Record 4 if the participant indicates that he/she is a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. Record 5 if the participant indicates that he/she is a person having origins in any of the of the original peoples of Europe, the Middle East, or North Africa. Record 6 if the participant selects more than one race.	1 = American Indian or Alaska Native 2 = Asian 3 = Black or African American 4 = Native Hawaiian or Other Pacific Islander 5 = White 6 = More than one race 7 = Do not wish to answer	
21				Y
	Disability	Record 1 if the participant indicates that he/she has any "disability," as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. (For definitions and examples of "physical or mental impairment" and "major life activities," see paragraphs (1) and (2) of the definition of the term "disability" in 29 CFR 37.4, the definition section of the WIA non-discrimination regulations.) If the response is yes, answer data element #109. Record 0 if the participant indicates that he/she does not have a disability that meets the definition. Record 9 if the participant does not wish to disclose his/her disability status. Leave blank if this data element does not apply to the person and the data is not available.	1 = Yes 0 = No 9 = Participant did not self-identify	
22				N

23	Veteran Status	Record 1 if the participant is a person who served on active duty in the armed forces and who was discharged or released from such service under conditions other than dishonorable. Record 0 if the participant does not meet the condition described above. Record 9 if participant does not disclose veteran status. Leave blank if this data element does not apply to the person and the data is not available.	1 = Yes 0 = No 9 = Participant did not self-identify	Y
24	Education	Enter the apprentice's education status. Default Value = 5 for unknown/not provided.	1 = 8th grade or less 2 = 9th to 12th grade 3 = GED 4 = high school diploma 5 = unknown 6 = Post Secondary or Technical Training	N

Apprentice Occupation Information

25	Occupation 8-digit O*NET Code	Enter the 8-digit O*NET code that best fits the apprenticeable occupation (www.onetonline.org). NOTE: This code must match an occupation code registered by the program sponsor.		Y
26	Entry Wage	Enter the apprentices hourly starting wage. This wage cannot be less than the apprentice hourly entry wage for the occupation as established by the program sponsor.		Y
27	Expected Completion Date	This date is derived by adding the term length to the apprentice start date and subtracting any OJT and RTI credit the apprentice has gained prior to entering the program. The expected completion date cannot be prior to the registration or start date.		Y

Employment History

28	Weeks worked in 12 month period prior to Apprenticeship	How many weeks did the participant work in the prior 12 months?		N

29	Apprentice Earnings in the prior 12 months	Numeric field. Approximate total earnings for individual apprentice from work, including tips and overtime pay during the past 12 months.	$0 $1 to $9,999 $10,000 to $19,999 $20,000 to $29,999 $30,000 to $39,999 $40,000 to $49,999 $50,000 or over	N
30	Employment status at participation		1 = Employed 2 = Underemployed 3 = Long-term unemployed (27 weeks or more) 0 = Unemployed 9 = Unknown	Y
31	Occupational Code of Most Recent Employment Prior to Participation (if available)	Enter the 8-digit O*NET code that best fits the apprenticeable occupation to which the individual trained (www.onetonline.org). NOTE: This code must match an Pre-Apprentice Provider occupation code.		N
32	Credentials Received	These are credentials issued by the Registration Agency, upon request of the appropriate sponsor, as certification of competency attainment by an apprentice. Issued in the form of certificates, interim credentials provide portable recognition of an apprentice's accomplishments. Interim credentials can only be issued for recognized components of an apprenticeable occupation.		Y

Apprentice Exit Form

33	Exit status		1 = Complete 2 = Cancelled 3 = Registered	Y
34	Degree Attainment During Apprenticeship	The highest academic degree level achieved.	1= Associate 2= Undergraduate 3= Graduate 4= Doctorate 0 = None	Y

35	Received Interim Credential	These are credentials issued by the Registration Agency, upon request of the appropriate sponsor, as certification of competency attainment by an apprentice. Issued in the form of certificates, interim credentials provide portable recognition of an apprentice's accomplishments. Interim credentials can only be issued for recognized components of an apprenticeable occupation.	1 = Yes 0 = No	Y
36	Exit Wage	Enter the actual hourly wage paid to the participant at the time they either leave or complete the program.		Y
37	Exit Wage Date	Enter the date associated with the exit wage. This date can be less than or equal to the last event date.		Y
38	Employment Outcomes	Enter the employment outcome of the participant	1 = Remain with current employer 2= Move to another employer	Y
39	Incumbent Worker Employment Outcome	As an Incumbent worker, enter whether or not the participant advanced into higher-skilled position	1 = Yes 0 = No 9 = Unknown	N

Data Element Number	Data Element Name	Data Definition and Instruction	Code Value
	Pre-Apprentice Provider Information		
1	Pre-Apprentice Provider Name	This may or may not be the same of the Grantee name	
2	Pre-Apprentice Provider Street Address	Enter the Pre-Apprentice Provider's street address. This may or may not differ from the Grantee address.	
3	Pre-Apprentice Provider City	Enter the Pre-Apprentice Provider's city. This may or may not differ from the Grantee address.	
4	Pre-Apprentice Provider State	Enter the Pre-Apprentice Provider's state. This may or may not differ from the Grantee address.	
5	Pre-Apprentice Provider 5-Digit Zip Code	Enter the Pre-Apprentice Provider's 5-digit zip code. This may or may not differ from the Grantee address.	
6	Direct Linkage to Registered Apprenticeship	Enter if the program has a direct link to Registered Apprenticeship?	1 = No pre-apprentices go to registered apprenticeship 2 = Some pre-apprentices go to registered apprenticeship 3 = Most pre-apprentices go to registered apprenticeship
7	Program Type	Enter the program type.	1 = For-Profit 2 = Not-for-Profit 3 = Others
	Start Date	Enter the Pre-Apprentice provider start date with the grant.	
	Contact Information		
8	Pre-Apprentice Provider Contact Title	Enter the title of the Pre-Apprentice Provider official that is certifying the apprentice data reported to the Department. Contact Title refers to the business title such as "Chief Financial Officer"	
9	Pre-Apprentice Provider Contact Name	Enter the name there-Apprentice Provider Contact. This contact may or may not be the Grant Signatory/Program Sponsor. This person must be available at the time of report submission and available to re-validate data that may be returned with errors. This available time-frame may include up-to three weeks after initial report submission.	
10	Pre-Apprentice Provider Contact Street Address	Enter the Pre-Apprentice Provider Contact's street address. This may or may not differ from the Pre-Apprentice Provider address.	

11	Pre-Apprentice Provider Contact City	Enter the Pre-Apprentice Provider Contact's city. This may or may not differ from the Pre-Apprentice Provider address.	
12	Pre-Apprentice Provider Contact State	Enter the Pre-Apprentice Provider Contact's state. This may or may not differ from the Pre-Apprentice Provider address.	
13	Pre-Apprentice Provider Contact 5-Digit Zip Code	Enter the Pre-Apprentice Provider Contact's 5-digit zip code. This may or may not differ from the Pre-Apprentice Provider address.	
14	Pre-Apprentice Provider primary Telephone Number	Enter the area code (999) and telephone number (999-9999) of the authorized official	
15	Pre-Apprentice Provider primary Telephone Extension	If Applicable, enter the authorized official's telephone extension	
	Pre-Apprentice Provider Fax	If applicable, enter the provider fax number	
16	Pre-Apprentice Provider Contact Other Phone Number	Enter the area code (999) and telephone number (999-9999)	1 = Mobile 2= Home 3 = Work
17	Pre-Apprentice Provider Contact Email Address	Enter the email address of the authorized official	

Pre-Apprentice Provider Type

19	Pre-Apprentice Provider Type	Type(s) of Pre-Apprentice organization(s) providing service to participants. Check all that apply.	1 -Apprenticeship sponsor 2 Postsecondary educational institution, non-profit 3 Business 4 Consortium of business 5 Postsecondary educational institution, for-profit 6 Community-based organization 7 Business-Related Nonprofit Organization 8 School district 9 Local workforce investment Board 10 Workforce intermediary 11 Tribal organization

Screening Information

20	Drug/Alcohol Screening	Record 1 if the participant received drug/alcohol test at any time during participation in the pre-apprenticeship program Record 0 if the participant did not received drug/alcohol test at any time during participation in the pre-apprenticeship program Record 9 if information is missing or unknown.	1 = Yes 0 = No 9 = Unknown

	Criminal Background Check	Record 1 if the a criminal background check was conducted on the participant at any time during participation in the pre-apprenticeship program Record 0 if the participant did not received a criminal background check at any time during participation in the pre-apprenticeship program Record 9 if information is missing or unknown.	1 = Yes 0 = No 9 = Unknown
21			
	Physical Examination	time during participation in the pre-apprenticeship program Record 0 if the participant did not received physical examination at any time during participation in the pre-apprenticeship program Record 9 if information missing or unknown.	1 = Yes 0 = No 9 = Unknown
22			

Target Population

	Target Population(s) Served	Enter the target population(s) served. Check all that apply.	1 = Women 2 = Men 3 = Minorities 4 = Youth 5 = People with Disabilities 6 = Ex-Offenders 7 = Veterans 8 = Other
23			
24	Describe "Other" category above	Describe the Target Population if "Other" is selected.	
	Average Age	Enter the average age of the population served.	1 = 16-19 2 = 20-24 3 = 25-34 4 = 35+
25			

Supportive Services	Does your program provide supportive services? Such support services may include transportation, child care, dependent care, emergency housing, work clothing or uniforms, licensing or testing fees, medical and healthcare supportive services.	1 = Yes 2 = No

26

Referral Protocol	Does your program have a referral protocol in place to build basic skills and conduct remedial training for participants who did not score well on an assessment?	1 = Yes 2 = No

27

Skills Assessments	Does your program conduct skills assessments and Adult Basic Education tests to determine eligibility of participants?	1 = Yes 2 = No

28

Case Manager	Does your program have a case manager on staff to refer participants to support programs?	1 = Yes 2 = No

29

Readiness Checklists	Does your program use participant readiness checklists or standards?	1 = Yes 2 = No

30

Primary recruitment sources	What are the primary recruitment sources? Check all that apply.	1 = High schools 2 = American Job Centers (One Stops) 3 = Community colleges 4 = Community-based organizations 5 = Word of mouth 6 = Other

31

Average Frequency of Case Management Contact	Enter the average frequency of case management for participants	1 Weekly 2 Bi-weekly 3 Monthly 4 Bi-monthly 5 Less often than bi-monthly 6 Not applicable
32		
Case Management Average Caseload	Enter the average caseload for case managers	1 = 0 2 = 1-25 3 = 26-49 4 = 50-74 5 = 75-99 6 = 100-124 7 = More than 125
33		
Target apprenticeship occupation 1 (8-digit O*NET Code)	Enter the 8-digit O*NET code (www.onetonline.org) that best fits the primary apprenticeable occupation of the pre-apprenticeship training. NOTE: This code must match an occupation code registered by the program sponsor.	
34		

Program Services

Work-Based Learning Opportunities	Type(s) of work-based learning opportunity(ies). Check all that apply.	1 = Job Shadowing 2 = Clinical as a Part of Training 3 = Unpaid Internship or Externship 4 = Paid Internship or Externship 5 = On-the-job training 6 = Not applicable
37		

Program Services	Type(s) of skill(s) and service(s) provided by the Pre-Apprentice provider. Check all that apply.	1 = Adult Basic Education
		2 = Basic Skills Instruction
		3 = Study Skills or Test Preparation Skills Instruction
		4 = Work-Based Learning Experience
		5 = Pre-Occupational Skills Instruction
		6 = Occupational Skills Instruction (and check one of following)
		  i. Courses for credit
		  ii. Courses not for credit
		  iii. Courses leading to non-degree certifications
		7 = GED Instruction
		8 = High school completion
		9 = English as a Second Language
		10 = Life Skills/ Job Readiness Instruction
		11 = Work-Based Learning Experience
		12 = Type of case management
		  i. Academic advising
		  ii. Career counseling/job development
		  iii. Advising on personal issues
		  iv. No case management provided

38

40 Occupational Training Providers	Type(s) of entity(ies) that will provide occupational training. Check all that apply.	1 = pre-apprenticeship provider 2 = community college 3 = employment setting 4 = community-based organization 5 = private college 6 = ther private training provider 7 = Not Applicable

| 41 Type of Case Management | Type(s) of Case Management provided to participant | 1 = Academic Advising
2 = Career Counselling/Job Development
3 = Advising on Personal Issues
4 = No Case Management Provided |

Required (Yes/No)
Y
Y
Y
Y
Y
Y
Y
Y
Y
Y
Y

Y

Y

Y

Y

N

N

N

Y

Y

Y

Y

Y

Y

Y

Y

Y

Y

Y

Y

Y

y

Y

Y

Y

Y

Y

Y

Y

Data Element Number	Data Element Name	Data Definition and Instruction
	Select Pre-Apprentice Provider	
1	Pre-Apprentice Provider Name	This may or may not be the same as the Grantee name
	Pre-Apprentice Information	
2	Pre-Apprentice First Name	Enter the first name of the pre-apprentice
3	Pre-Apprentice Middle Name	Enter the middle name of the pre-apprentice
4	Pre-Apprentice Last Name	Enter the last name of the pre-apprentice
5	Pre-Apprentice Suffix	This is the suffix to the pre-apprentice name. Values include I, II, III, Jr., Sr. Default is Null.
6	Pre-Apprentice Social Security Number	Enter the pre-apprentice social security number. The value is 999999999 if the user does not supply a value it is set to 999999999 and the SSN Identifier is set to 'N' This value is to be encrypted.
7	Date of Birth	Record the participant's date of birth Leave blank if this data element does not apply to the person Month value greater than 12 is not allowed. The largest date for each month is validated. Value larger than the largest date in each month is not allowed. January, March, May, July, August, October and December have 31 days. February has 29. April, June, and November have 30 days.
8	Sex	Record 1 if the participant indicates that he is male Record 2 if the participant indicate that she is female Record 9 if the participant does not self-identify gender Leave blank if this data element does not apply to the person
9	Pre-Apprentice Start Date	Enter the date that the participant began their pre-apprenticeship.
	Contact Information	
10	Pre-Apprentice Street Address	Enter the pre-apprentice's street address.
11	Pre-Apprentice City	Enter the pre-apprentice's city.
12	Pre-Apprentice State	Enter the pre-apprentice's state.
13	Pre-Apprentice 5-Digit Zip Code	Enter the pre-apprentice's 5-digit zip code.

14	Pre-Apprentice Primary Telephone Number	Enter the area code (999) and telephone number (999-9999) of the pre-apprentice
15	Pre-Apprentice Other Phone Number	Enter the area code (999) and telephone number (999-9999)
16	Email Address of Pre-Apprentice	Enter the email address of the pre-apprentice
17	Pre-Apprentice AI Contact First Name	Enter the first name of the pre-apprentice secondary contact
18	Pre-Apprentice Secondary Contact Last Name	Enter the last name of the pre-apprentice secondary contact
19	Email Address of Pre-Apprentice Secondary Contact	Enter the email address of the pre-apprentice secondary contact
20	Pre-Apprentice Secondary Contact Telephone Number	Enter the telephone number of the pre-apprentice secondary contact

Characteristics

21	Disability	Record 1 if the participant indicates that he/she has any "disability," as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. (For definitions and examples of "physical or mental impairment" and "major life activities," see paragraphs (1) and (2) of the definition of the term "disability" in 29 CFR 37.4, the definition section of the WIA non-discrimination regulations.) If the response is yes, answer data element #109. Record 0 if the participant indicates that he/she does not have a disability that meets the definition. Record 9 if the participant does not wish to disclose his/her disability status. Leave blank if this data element does not apply to the person and the data is not available.
22	Offender	committing a status offense or delinquent act, or (b) requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction for committing delinquent acts, such as crimes against persons, crimes against property, status offenses, or other crimes. Record 0 if the participant does not meet

	Marital status	Check applicable marital status
23		
	Low Income	percent of the lower living standard income level, for an equivalent period; or (C) is a member of a household that receives (or has been determined within the 6-month period prior to program participation) Food Stamps under the Food Stamp Act of 1977 (7 U.S.C. 2011 et seq.); or (D) qualifies as a homeless individual, as
24		
	Limited English Language Proficiency	has limited ability in speaking, reading, writing or understanding the English language and (a) whose native language is a language other than English, or (b) who lives in a family or community environment where a language other than English is the dominant language. Record 0 if the participant does not meet the conditions described above.
25		
	Basic Literacy Skills Deficiency	Leave blank if this data element does not English at a level necessary to function on the job, in the individual's family, or in society. In addition, states and grantees have the option of establishing their own definition, which must include the above language. In cases where states or grantees establish such a definition, that definition will be used for basic literacy skills determination.
26		
27	Number of children	Enter number of children
	Ethnicity Hispanic / Latino	Record 1 if the participant indicates that he/she is a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant does not self-identify his/her ethnicity.
28		
	Race	Southeast Asia, or the Indian Subcontinent (e.g.,, India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. Record 3 if the participant indicates that he/she is a person having origins in any of the black racial groups of Africa. Record 4 if the participant indicates that he/she is a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
29		

| 30 | Veteran Status | Record 1 if the participant is a person who served on active duty in the armed forces and who was discharged or released from such service under conditions other than dishonorable.
Record 0 if the participant does not meet the condition described above.
Record 9 if participant does not self-identify veteran status. |

| 31 | Education | Enter the pre-apprentice's education status. |

Public Program Participation

| 32 | Temporary Assistance to Needy Families (TANF) | Record 1 if the participant is a person who is listed on the welfare grant or has received cash assistance or other support services from the TANF program in the last twelve months prior to participation in the program.
Record 0 if the participant does not meet the condition described above.
Leave blank if this data element does not apply to the individual. |

| 33 | Supplemental Nutrition Assistance Program (SNAP) | Record 1 if the participant is a person who is listed on the welfare grant or has received cash assistance or other support services from the SNAP agency in the last twelve months prior to participation in the program.
Record 0 if the participant does not meet the condition described above.
Leave blank if this data element does not apply to the individual. |

| 34 | Housing Assistance | Record 1 if the participant is a person who is listed on the welfare grant or has received housing assistance in the last twelve months prior to participation in the program.
Record 0 if the participant does not meet the condition described above.
Leave blank if this data element does not apply to the individual. |

#	Data Element	Description
35	Participation in other youth training programs	Record 1 if the participant is a person who has participated in other youth training programs such as YouthBuild or Job Corps in the last twelve months prior to participation in the program. Record 0 if the participant does not meet the condition described above. Leave blank if this data element does not apply to the individual.
36	Supplemental Security Income(SSI) / Social Security Disability Insurance (SSDI)	Record 1 if the individual is a person who is receiving or has received SSI under Title XVI of the Social Security Act in the last twelve months prior to participation in the program. Record 2 if the individual is a person who is receiving or has received SSDI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the program. Record 3 if the individual is receiving or has received both SSI and SSDI in the last six months prior to participation in the program. Record 0 if the individual does not meet any of the conditions described above.
37	WIA/WIOA Participant (During Enrollment in Pre-Apprenticeship Program)	Record 1 if the participant received services financially assisted under WIA/WIOA. Record 0 or leave Blank if the participant did not receive services under the condition described above. Record 9 if grantee is unable to track enrollment in the program.
38	Wagner-Peyser Act	Record 1 if the participant received services financially assisted under the Wagner-Peyser Act (29 USC 49 et seq.) WIA section 121 (b)(1)(B)(ii). Record 0 if the participant did not receive services financially assisted under the Wagner-Peyser Act. Record 9 if grantee is unable to track enrollment in the program.

Employment History

#	Data Element	Description
39	Pre-Apprentice weeks worked in prior 12 months	How many weeks did the Pre-Apprentice work in the prior 12 months?

	Pre-Apprentice Earnings in the prior 12 months	Numeric field. Approximate total earnings for individual apprentice from work, including tips and overtime pay during the past 12 months.
40		
	Employment status at participation	
41		
	Occupational Code of Most Recent Employment Prior to Participation (if available)	Enter the 8-digit O*NET code that best fits the apprenticeable occupation to which the individual trained (www.onetonline.org). NOTE: This code must match an Pre-Apprentice Provider occupation code.
42		

Exit Form

	Pre-Apprentice Final Status	
43		
	Pre-Apprenticeship End Date	Enter date the pre-apprentice completed/cancelled from the pre-apprenticeship program
44		
	Program Outcome	Choose only one
45		
		If apprenticeship/employment is choosen, is the program related to training?
	Occupation 8-digit O*NET Code for Occupational Specific Training	Enter the 8-digit O*NET code that best fits the apprenticeable occupation to which the individual trained (www.onetonline.org). NOTE: This code must match an Pre-Apprentice Provider occupation code.
46		

	Type of Recognized Credential Received	Use the appropriate code to record the type of recognized educational or occupational certificate/credential/diploma attained by the individual who received training services. Record 0 if the individual received education or training services but did not receive a recognized credential. Credentials must be attained either during participation or by the end of the third quarter after the quarter of exit from services (other than follow up services).
47		
	Receipt of Adult Basic Education (ABE)	participation in the pre-apprenticeship program Record 0 if the participant did not received Adult Basic Education at any time during participation in the pre-apprenticeship program Record 9 if information missing or unknown.
48		
	Number of Certificate/Credential Received	Enter certificate/Credential participant received upon completion of classroom and hands-on instruction
49		
	Receipt of Foundational Skills Instruction	Record 1 if the participant received Foundational Skills Instruction at any time during participation in the pre-apprenticeship program Record 0 if the participant did not received Foundational Skills Instruction at any time during participation in the pre-apprenticeship program Record 9 if information missing or unknown.
50		
	Receipt of Study Skills or Test Preparation Skills Instruction	participation in the pre-apprenticeship program Record 0 if the participant did not received study skills or test preparation at any time during participation in the pre-apprenticeship program
51		
	Receipt of Work-Based Learning Experience	work experience, job shadowing) Record 0 if the participant did not receive work-based learning experience Record 9 if information missing or unknown.
52		
	Work-Based Learning Experience - Hours Received	Record the number of hours of work-based learning experience completed by the individual.
53		
	Receipt of English as a Second Language (ESL)	apprenticeship program Record 0 if the participant did not received English as a Second Language instruction at any time during participation in the pre-apprenticeship program Record 9 if information missing or
54		

55	Receipt of Life Skills/Job Readiness Instruction	Record 1 if the participant received job readiness or life skills instruction Record 0 if the participant did not received job readiness/life skills instruction Record 9 if information missing or unknown.
56	Receipt of Pre-Occupational Skills or Basic Occupational Skills Instruction	entry into an apprenticeship program Record 0 if the participant did not received classroom instruction and/or hands-on experience to prepare the individual for entry into an apprenticeship program Record 9 if information missing or program
57	GED Instruction	Record 0 if the participant did not received GED instruction at any time during participation in the pre-apprenticeship program Record 9 if information missing or
58	Hours of Classroom and Hands-On Instruction received	Enter number of hours of classroom and hands-on instruction participant received

Support Services

59	Receipt of Case Management Assistance	management assistance Record 0 if the participant did not receive case management assistance Record 9 if information missing or unknown.
60	Child Care Assistance	grant funds Record 0 if the participant did not received assistance with childcare paid for with All grant funds Record 9 if information missing or unknown.
61	Transportation Assistance	Record 1 if the participant received transportation assistance (e.g, bus passes, gas reimburesement) paid for with All grant funds Record 0 if the participant did not received assistance with childcarepaid for with All grant funds Record 9 if information missing or unknown.
62	Work Clothes/Tools/Equipment	equipment paid for with All grant funds Record 0 if the participant did not received assistance with childcarepaid for with All grant funds Record 9 if information missing or unknown.
63	Other Supportive Services	funds Record 0 if the participant did not received assistance with childcarepaid for with All grant funds Record 9 if information missing or unknown

Code Value	Required (Yes/No)
	Y
	Y
	N
	Y
	N
xxxxxxxxx 999999999 = individual did not disclose	N
YYYYMMDD	
	Y
1 = Male 2 = Female 9 = Participant did not self-identify	
	Y
	Y
	Y
	Y
	Y
	Y

Y

Mobile
Home   N
Work

Y

N

N

N

N

1 = Yes
0 = No
9 = Participant did not self-identify

Y

1 = Yes
0 = No
9 = Unkown

Y

1 = currently married
2 = widowed
3 = divorced
4 = separated
5 = never married

Y

1 = Yes
0 = No
9 = Unkown

Y

1 = Yes
0 = No
9 = Unkown

Y

1 = Yes
0 = No
9 = Unkown

Y

#####

N

1 = Yes
0 = No
9 = Participant did not self-identify

Y

1 = American Indian or Alaska Native
2 = Asian
3 = Black or African American
4 = Native Hawaiian or Other Pacific
Islander
5 = White
6 = More than one race
7 = Do not wish to answer

Y

1 = Yes
0 = No
9 = Participant did not self-identify

Y

5 = Unknown
1 = 8th Grade or Less
2= 9th to 12th Grade
3= GED
4= High School Diploma
6= Post Secondary or Technical

Y

1= Currently receiving
2 = Received in last 12 months
9 = None

Y

1= Yes
0 = No
9 = Unknown

Y

1= Yes
0 = No
9 = Unknown

Y

1= Yes
0 = No
9 = Unknown

Y

1 = SSI
2 = SSDI
3 = Both
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

N

$0
$1 to $9,999
$10,000 to $19,999
$20,000 to $29,999
$30,000 to $39,999
$40,000 to $49,999
$50,000 or over

N

1 = Employed
0 = Unemployed
9 = Unknown

Y

N

CA = Cancelled
CO = Completed

Y

 YYYYMMDD

Y

1 = entering registered
apprenticeship program
2 = entering employment (not an
apprenticeship)
3 = entering military
4 = entering further education
9 = Unknown

 1 = Yes
 0 = No
 9 = Unknown

Y

xx-xxxx.xx

Y

1 = High School Diploma/GED or
other alternative HS credential
2 = Occupational Skills Licensure
3 = Occupational Skills
Certificate/Credential
4 = Other Recognized Educational or
Occupational Skills
Certificate/Credential
0 = No Recognized Credential

Y

1 = Yes
0 = No
9 = Unknown

Y

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

####

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y

1 = Yes
0 = No
9 = Unknown

Y