Appendix A: Web Survey Consent Language and Instrument

**Research to Support the Partnership on Inclusive Apprenticeship**

**Partner Survey**

Thank you for taking the time to participate in the Survey of the Partnership on Inclusive Apprenticeship (PIA) and Its Partners.

* **Who is administering this survey?** The Urban Institute, a nonprofit, nonpartisan research organization, is under contract with the U.S. Department of Labor (DOL), to conduct an implementation evaluation of the Partnership on Inclusive Apprenticeship, which includes this survey.
* **What is the purpose of the survey?** This survey will collect information from PIA partners, including AIOs; identified partners of AIOs, including employers and apprenticeship program sponsors; and PIA community of practice participants. The survey will document the range of partner characteristics, activities, goals, challenges, and lessons learned from developing and supporting inclusive apprenticeship programs. It will provide information about promising strategies for developing and implementing effective inclusive apprenticeship programs.
* **How long will it take to complete?**  This survey will take approximately 30 minutes. You may stop and return to the survey to continue and complete it because your answers from prior sessions will be saved.
* **Is participation mandatory?** Your participation is voluntary. Participation in the survey is voluntary, and if you choose to participate you can decline to answer any question in the survey.
* **Who will see my responses?** The Urban Institute treats the information you provide as private and we will not share your individual responses. All evaluation reports based on the survey will report findings at the aggregate level and responses to the survey will not be identified by organization or person in any publication.
* **Who can I contact with questions?** If you have any questions, please contact: XXXX at (202) 261-XXXX or XXXXX@urban.org

Thank you again for participating in this survey. We greatly appreciate your time and assistance.

***Please submit your completed survey by XXXX.***

**OMB Burden Statement:**According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays an Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection is XXXX-XXXX. The time required to complete this collection of information is estimated to average 30 minutes, including the time to review instructions, search existing data resources, gather the data needed and complete and review the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to [**odep@dol.gov**](mailto:odep@dol.gov)and reference the OMB Control Number XXXX-0NEW.

**Instructions:**

*Technical Instructions:*

* **This web-based survey can be saved and completed in several sittings** by simply clicking the "Next" button at the bottom of the page to save your work.  If you stop and return to the survey, you will be automatically directed to the last question you completed.

* **The survey allows for multiple respondents**, which allows you to delegate sections of the survey to individuals who might have more in-depth information on a particular program or section. To share the survey, simply forward the original email invitation. Please note that two users cannot simultaneously enter information into the survey at the same time.
* **If you prefer to complete the survey on paper rather than computer**, we will either mail you a paper version or email you a Microsoft Word document version of this survey. To request a survey in an alternative format, please contact XXXX at (202) 261-xxxx or [XXXXX@urban.org](mailto:CBJTIsurvey@urban.org).

*Survey Contents:* The survey is divided into the following sections:

1. **Basic Information about Your Organization**
2. **Apprenticeship Intermediary Organization Questions**
3. **Wheelhouse Group and Apprenticeship Intermediary Organization Partner Questions**
4. **Community of Practice Partner Questions**
5. **Expansion Strategies**
6. **Basic Information about Your Organization**

A1. What is the best description of your organization? [select all that apply]

1. Non-profit organization
2. Employer, but not an employer of apprentices
3. College or university
4. State or local government agency
5. State or local workforce board or AJC
6. Registered apprenticeship program sponsor or employer
7. Unregistered apprenticeship program employer
8. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A2. You have been asked to participate in this survey because your organization has been identified as partner involved in the Partnership on Inclusive Apprenticeship (PIA) or as a partner of one of PIA’s Apprenticeship Intermediary Organization partners. What activities have you been involved with as a partner? [select all that apply]

1. My organization works with PIA as an Apprenticeship Intermediary Organization
2. My organization works with Wheelhouse Group on PIA, but not as an Apprenticeship Intermediary Organization
3. My organization works as a partner of one of the PIA’s Apprenticeship Intermediary Organizations
4. My organization participates in the PIA Community of Practice
5. I do not know.

A3. What has been your organization’s experience with apprenticeship prior to 2020, when PIA began its work? [Please check all that apply]

1. None
2. Partner with the Apprenticeship Inclusion Model (AIM) pilot
3. Employer marketing/engagement activities to create new programs or expand existing
4. Technical assistance to employers
5. Apprenticeship program sponsor
6. Curriculum development for apprenticeship programs
7. Related technical instruction for apprenticeship programs
8. Supportive services to apprentices
9. State apprenticeship council
10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A4. What has been your organization’s experience working with people with disabilities prior to 2020?

1. None
2. Partner with the Apprenticeship Inclusion Model (AIM) pilot
3. Providing services and supports to people with disabilities to obtain and retain employment
4. Providing technical assistance to employers for understanding self-identification of disability status
5. Providing technical assistance to employers on accommodation of people with disabilities
6. Providing technical assistance to employers, educational institutions, or training providers on inclusive program design or Universal Design for Learning
7. Disability rights advocacy
8. Employer of people with disabilities
9. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[IF answered (a.) to A2, THEN Proceed to Section B. ELSE, skip]

1. **Apprenticeship Intermediary Organization Questions**

B1. How many new inclusive registered apprenticeship programs have you helped develop to date as a part of your partnership with the Partnership on Inclusive Apprenticeship?

\_\_\_\_# of programs

B2. How many existing registered apprenticeship programs have you helped enhance or expand to be inclusive registered apprenticeship programs as a part of your partnership with the Partnership on Inclusive Apprenticeship?

\_\_\_\_# of programs

B3. How many new inclusive pre-apprenticeship programs have you helped develop to date as a part of your partnership with the Partnership on Inclusive Apprenticeship?

\_\_\_\_# of programs

B4. Approximately how many apprentices have been registered across all apprenticeship programs that you have supported in your work with the Partnership on Inclusive Apprenticeship? [Please estimate all apprentices, regardless of disability status]

\_\_\_\_# of apprentices

B5. In your capacity as an Apprenticeship Intermediary Organization for the Partnership on Inclusive Apprenticeship, what types of assistance do you provide to employers? [select all that apply]

1. Assistance developing apprenticeship standards and registering new apprenticeship programs
2. Assistance designing on-the-job training that is inclusive of people with disabilities
3. Assistance designing related technical instruction that is inclusive of people with disabilities
4. Technical assistance to help employers comply with the Americans with Disabilities Act
5. Technical assistance to help employers comply with apprenticeship equal employment opportunity rules
6. Technical assistance to help employers understand the process for self-identification of apprentices’ disability status
7. Technical assistance to help employers identify accommodations for individual apprentices with disabilities
8. Assistance with apprentice recruitment
9. Assistance with supportive services for apprentices
10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B6. Company policies and practices influence every aspect of apprentices’ experience on the job. These policies and practices can relate to hiring and onboarding; scheduling shifts; performance evaluation and expectations; work processes; discipline; and relationships with mentors. Please describe the policies and practices you have advised employers on in your capacity as an Apprenticeship Intermediary Organization for the Partnership on Inclusive Apprenticeship.

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B7. In your capacity as an Apprenticeship Intermediary Organization for the Partnership on Inclusive Apprenticeship, what partners did you work with to develop inclusive apprenticeship programs? [select all that apply]

1. Vocational rehabilitation agencies
2. American Job Centers (AJCs) or Workforce Boards
3. Federal agencies
4. State agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
5. Local agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
6. Disability rights advocacy organizations or non-profits
7. Veterans advocacy organizations or non-profits
8. Industry associations
9. Technical or community colleges
10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B8. Tools and technologies can help to accommodate apprentices with disabilities or make work more inclusive for all apprentices. Please describe the tools and technologies that you have recommended or have advised employers on in your capacity as an Apprenticeship Intermediary Organization for the Partnership on Inclusive Apprenticeship.

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B9. Supportive services can help apprentices persist in and complete their apprenticeships. These services may address the specific needs of individual apprentices with disabilities or make the program more inclusive for all apprentices. Please describe the supportive services that you have recommended or have advised employers on in your capacity as an Apprenticeship Intermediary Organization for the Partnership on Inclusive Apprenticeship.

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[IF answered (b.) OR (c.) to A2 AND did not answer (a.) to A2, THEN Proceed to Section C. ELSE, skip]

1. **Wheelhouse Group and Apprenticeship Intermediary Organization Partner Questions**

C1. How many new inclusive registered apprenticeship programs have you helped develop to date as a part of your partnership with the Partnership on Inclusive Apprenticeship?

\_\_\_\_# of programs

C2. How many existing registered apprenticeship programs have you helped enhance or expand to be inclusive registered apprenticeship programs as a part of your partnership with the Partnership on Inclusive Apprenticeship?

\_\_\_\_# of programs

C3. How many new inclusive pre-apprenticeship programs have you helped develop to date as a part of your partnership with the Partnership on Inclusive Apprenticeship?

\_\_\_\_# of programs

C4. Approximately how many apprentices have been registered across all apprenticeship programs that you have supported in your work with the Partnership on Inclusive Apprenticeship? [Please estimate all apprentices, regardless of disability status]

\_\_\_\_# of apprentices

C5. In your capacity as a partner of the Partnership on Inclusive Apprenticeship, what types of assistance do you provide to employers? [select all that apply]

1. Assistance developing apprenticeship standards and registering new apprenticeship programs
2. Assistance designing on-the-job training that is inclusive of people with disabilities
3. Assistance designing related technical instruction that is inclusive of people with disabilities
4. Technical assistance to help employers comply with the Americans with Disabilities Act
5. Technical assistance to help employers comply with apprenticeship equal employment opportunity rules
6. Technical assistance to help employers understand the process for self-identification of apprentices’ disability status
7. Technical assistance to help employers identify accommodations for individual apprentices with disabilities
8. Assistance with apprentice recruitment
9. Assistance with supportive services for apprentices
10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. None.

C6. Company policies and practices influence every aspect of apprentices’ experience on the job. These policies and practices can relate to hiring and onboarding; scheduling shifts; performance evaluation, performance expectations; and relationships with mentors. Please describe the policies and practices you have advised employers on in your capacity as a partner with the Partnership on Inclusive Apprenticeship.

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C7. In your capacity as a partner with the Partnership on Inclusive Apprenticeship, what partners did you work with to develop inclusive apprenticeship programs? [select all that apply]

1. Vocational rehabilitation agencies
2. American Job Centers (AJCs) or Workforce Boards
3. Federal agencies
4. State agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
5. Local agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
6. Disability rights advocacy organizations or non-profits
7. Veterans advocacy organizations or non-profits
8. Industry associations
9. Technical or community colleges
10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C8. Tools and technologies can help to accommodate apprentices with disabilities or make work more inclusive for all apprentices. Please describe the tools and technologies that you have recommended or have advised employers on in your capacity as a partner with the Partnership on Inclusive Apprenticeship.

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C9. Supportive services can help apprentices persist in and complete their apprenticeships. These services may address the specific needs of individual apprentices with disabilities or make the program more inclusive for all apprentices. Please describe the supportive services that you have recommended or have advised employers on in your capacity as a partner with the Partnership on Inclusive Apprenticeship.

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[IF answered (d.) to A2, THEN Proceed to Section D. ELSE, skip]

1. **Community of Practice Partner Questions**

D1. Approximately how many times per year do you convene, in person or virtually, for the Partnership on Inclusive Apprenticeship community of practice?

\_\_\_\_# of times per year

D2. How do you typically use the Partnership on Inclusive Apprenticeship community of practice? [please select one]

1. I share information about inclusive apprenticeship with the community of practice
2. I learn information about inclusive apprenticeship from the community of practice, but typically do not share information
3. I both share and learn information about inclusive apprenticeship with the community of practice

D3. What types of organizations participating in the Partnership on Inclusive Apprenticeship community of practice provided the most helpful information for your organization? [select all that apply]

1. Wheelhouse Group
2. Apprenticeship Intermediary Organizations partnered with Wheelhouse Group
3. Subject matter experts
4. Vocational rehabilitation agencies
5. American Job Centers (AJCs) or Workforce Boards
6. Federal agencies
7. State agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
8. Local agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
9. Disability rights advocacy organizations or non-profits
10. Veterans advocacy organizations or non-profits
11. Industry associations
12. Technical or community colleges
13. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[IF answered (a.), (b.), OR (c.) to A2, THEN skip to Section E, ELSE answer question D4]

D4. Company policies and practices influence every aspect of apprentices’ experience on the job. These policies and practices can relate to hiring and onboarding; scheduling shifts; performance evaluation, performance expectations; and relationships with mentors. Please describe the policies and practices you have advised employers on in your capacity as a partner with the Partnership on Inclusive Apprenticeship.

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D5. In your capacity as a partner with the Partnership on Inclusive Apprenticeship, what partners did you work with to develop inclusive apprenticeship programs? [select all that apply]

1. Vocational rehabilitation agencies
2. American Job Centers (AJCs) or Workforce Boards
3. Federal agencies
4. State agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
5. Local agencies (besides vocational rehabilitation agencies, AJCs, or Workforce Boards)
6. Disability rights advocacy organizations or non-profits
7. Veterans advocacy organizations or non-profits
8. Industry associations
9. Technical or community colleges
10. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D6. Tools and technologies can help to accommodate apprentices with disabilities or make work more inclusive for all apprentices. Please describe the tools and technologies that you have recommended or have advised employers on in your capacity as a partner with the Partnership on Inclusive Apprenticeship.

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D7. Supportive services can help apprentices persist in and complete their apprenticeships. These services may address the specific needs of individual apprentices with disabilities or make the program more inclusive for all apprentices. Please describe the supportive services that you have recommended or have advised employers on in your capacity as a partner with the Partnership on Inclusive Apprenticeship.

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1. **Expansion Strategies**

E1. What public policy changes have you worked towards to support the expansion of inclusive apprenticeship programs as a part of or as a result of your work with the Partnership on Inclusive Apprenticeship?

1. Promoted state or local legislation

i\_\_\_Successfully passed

ii.\_\_\_ Did not pass

iii.\_\_\_ Has not yet been voted on

1. Encouraged the development of state or local policy guidance (e.g., on apprenticeship safety or supervision, equal employment opportunity)
2. Encouraged an increase in state or local government funding
3. Other; please specify

E2. Have your or your partners developed occupational standards for inclusive apprenticeship programs?

\_\_\_ Yes

\_\_\_ No

E3. [if yes] For what occupations did you develop standards?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E4. As a part of your work with the Partnership on Inclusive Apprenticeship, do you market to, recruit, and/or engage employers to consider establishing or expanding with apprenticeship program(s)?

1. Yes
2. No

E5. What are the key obstacles or reservations that employers cite to grantee staff when they are not interested in moving forward to establish an inclusive apprenticeship program or to make an existing apprenticeship program more inclusive? (Check all that apply.)

1. Apprenticeship training is too expensive
2. Accommodations are too expensive
3. Believes changes are unnecessary
4. Paperwork associated with apprenticeship is too burdensome
5. Concern that apprentices might be hired or “poached” by competitors after completing their training
6. The employer cannot spare the time of other workers to provide mentorship or on-the-job training
7. The registration process is too complicated
8. Regulatory compliance costs associated with apprenticeship are too high
9. Apprenticeship training is more intensive than the training that the employer needs
10. Business is experiencing instability and/or leadership change
11. Employers are concerned about liability
12. Fear of involvement with the government
13. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
14. None of the above
15. Don’t know/unsure

E6. As a part of your work with the partnership on inclusive apprenticeship, which of the following populations are you targeting besides people with a disability? (Check all that apply.)

* 1. Veterans or military spouses
  2. Women
  3. People of color
  4. People previously involved in the justice system
  5. Public workforce system clients
  6. College students
  7. High school students
  8. Other individuals who are not traditionally represented in apprenticeship programs; please specify: \_\_\_\_\_\_
  9. None of the above

Appendix B – Site Visit Interview Consent and Topic Guide

Research to Support the Partnership on Inclusive Apprenticeship - 102212 -0001-001

**INTRODUCTION**

I am/we are researchers with The Urban Institute a private research organization based in Washington, DC which conducts policy-related research on a variety of social welfare and economic issues.

This project is being conducted under contract to the U.S. Department of Labor. Our visit here today is part of the Research to Support the Partnership on Inclusive Apprenticeship project, a study sponsored by the U.S. Department of Labor. The study will learn how apprenticeship programs are designed to be inclusive of people with disabilities, and what advice, resources, and assistance employers need to develop and maintain inclusive apprenticeship programs. A major aim of the study is to learn more about the different models of inclusive apprenticeship being implemented. For each Partnership on Inclusive Apprenticeship partner we visit, we will be speaking with administrators and staff, program partners (including employers), and apprentices.

**Privacy Statement:** I/we know that you are busy and we will be as focused as possible and will only ask questions that are relevant to your experience. We have many questions and will be talking to many different people, so please do not feel as though we expect you to be able to answer every question. Your participation in this interview is voluntary and you may choose not to answer some or any of our questions. We will do everything we can to secure the privacy of the information you provide, but ask that you consider using headphones or finding a private space to talk so that other people cannot hear or see this conversation.

We believe the risks of participating in this study are minimal.

We believe there are no direct benefits to you, but we hope that the findings from this study will benefit the Research to Support the Partnership on Inclusive Apprenticeship project by providing research insights on how apprenticeship programs can benefit workers.

My colleague and I will be taking notes in order to document what we hear during our discussion, and we may audio record this discussion. We do not share these notes with anyone outside of our research team, including Department of Labor, and we will destroy these notes after the end of our project. When we compile our reports, the names of individual respondents will not be included. If we choose to quote you, you will only be identified by your title. You will not be quoted directly by name in any of our reports. While it is possible that you might be identified by your title, we will do our best to minimize the chance of that occurring.

Finally, to help us accurately capture the information you share, we would like to audio record this interview. The recording is just a back-up for our notes and will be kept within our small research team. The interview recording will be deleted once we have developed a full set of notes from the interview.

**OMB Burden Statement:** According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays an Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection is XXXX-XXXX. The time required to complete this collection of information is estimated to average 60 minutes, including the time to review instructions, search existing data resources, gather the data needed and complete and review the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to odep@dol.gov and reference the OMB Control Number XXXX-0NEW.

Do you have any questions before we begin?

[If we decide to record the interview] Are you okay with us audio recording the interview to improve the accuracy of our notes?

Do you agree to participate in this interview?

Site Visit Topic Guides

Site visit topics for discussion are provided below. The content of the detailed interview guides will be developed as the study team learns more about the work and structure of the Partnership on Inclusive Apprenticeship. At that time, we will develop a revised IRB memo with a new topic guide. Site visit topics will vary somewhat depending on PIA partner or stakeholder type. Topics are organized thematically, including “inputs and partnerships;” “programs and participants;” and “outcomes.” Some specific site visit topics may include:

Inputs and Partnerships

Who were the major partners involved with your work as a PIA partner, and what supports and services did they provide to you?

What were the qualifications and training of frontline staff working with apprenticeship programs at your organization?

What perceived challenges did apprenticeship intermediaries encounter in implementation, and how were those addressed?

What strategies did staff perceived as successful in collaborating with employers and apprenticeship intermediary organizations to establish inclusive apprenticeships and career pathways for people with disabilities?

What apprenticeship designs and inclusive materials were most needed by employers?

How were systems and partnerships built and maintained? What factors were considered during the development and maintenance of the systems and partnerships?

Programs and Participants

What are the characteristics of program services, infrastructure, and data management? How does implementation vary by organization type and target population?

What are the variations in the model, structure, governance, and partnerships across different inclusive apprenticeship programs? How were the programs developed and registered? Were they new programs, or expansions of existing programs? What factors did staff confront and consider during program implementation?

What are strategies for developing new or enhancing existing inclusive apprenticeship programs;

What are the characteristics of apprentices in participating programs? What factors affected enrollment, retention, and completion for apprentices with a disability?

What are the types and combinations of services and approaches provided? What were key factors in the service or service combinations for each project and its components?

Outcomes

What factors affected post-apprenticeship job placement and job retention for apprentices with a disability?

What appear to be promising or potentially promising practices in service enrollment, retention, and completion of apprentices with a disability?

Appendix D – Apprenticeship Program Apprentice Focus Group Recruitment Materials: Recruitment Email and Informed Consent

Research to Support the Partnership on Inclusive Apprenticeship - 102212 -0001-001

**Initial recruitment email**

Hello [name],

We hope this email finds you well. We are a team of researchers at the Urban Institute, a non-profit, independent social policy research organization. We’re working on a project, under a contract from the Office of Disability Employment Policy (ODEP) at the U.S. Department of Labor to gather insights into how apprenticeship programs can be more inclusive of people with disabilities, and how inclusive apprenticeship programs influence the outcomes of registered apprentices, including both those who identify as having a disability and those who do not. We are interested in learning directly from apprentices about their experiences, including both apprentices who identify as having a disability and those who do not. We identified you as a potential participant due to enrollment in [registered apprenticeship program].

**We want to invite you to participate in a group conversation by video call.** **The conversation will be approximately 90 minutes long and will include up to nine other registered apprentices.** **Participation is voluntary and not affiliated with your registered apprenticeship program.** **That means that you do not have to participate. It also means that if you do choose to participate you can choose not to answer any question that you do not want to answer, and you can stop participating at any time. Your employer will not know whether you choose to participate, and participation will have no consequences for your apprenticeship program. You will receive a $25 gift card as a thank you for your participation.**

If you are interested in participating, please respond to this email indicating your interest and the best phone number that we can reach you at to schedule the interview and answer any questions that you have. A member of our study team will then confirm whether there is space available, and if so, we will send you a scheduling link to identify times that work for you over the next few weeks to set up the group video call.

Information collected from the conversation will be kept private by the research team, and no quotes will be directly attributed to you. **To protect your privacy, we will not identify the name of your apprenticeship program when we report our findings.**

We understand that it’s a busy time with everything surrounding COVID-19, and we greatly appreciate you taking the time to speak with us. We look forward to hearing from you,

[team names]

**Follow-up phone call script**

Hello [name],

We appreciate your interest in learning more about participating in our study. As a reminder, participation in this study is voluntary and is not affiliated with [apprenticeship program]. That means that you do not have to participate. It also means that if you do choose to participate you can choose not to answer any question that you do not want to answer, and you can stop participating at any time. Your employer will not know whether you choose to participate, and participation will have no consequences for your apprenticeship program. The conversation will be approximately 90 minutes long and will include up to nine other registered apprentices.

Information collected from the interviews will be kept private by the research team, and no quotes will be directly attributed to you. To save time on the call, we would like to take 5-10 minutes to talk with you about the study, interview guidelines, and a Zoom tutorial.

First we want to make sure you understand the research project.

We are researchers with the Urban Institute, a private research organization based in Washington, DC which conducts policy-related research on a variety of social welfare and economic issues.

This project is part of the Research to Support the Partnership on Inclusive Apprenticeship project, sponsored by the U.S. Department of Labor’s Office of Disability Employment Policy. The study will learn how apprenticeship programs can be more inclusive of people with disabilities, and how inclusive apprenticeship programs influence the outcomes of registered apprentices, including both those who identify as having a disability and those who do not. We are conducting a focus group to learn about your experiences in the [apprenticeship program name]. In addition to our conversation with you, we are also conducting interviews with program staff and program partners.

**Informed Consent**

**Participation is voluntary and not affiliated with your registered apprenticeship program. That means that you do not have to participate. It also means that if you do choose to participate you can choose not to answer any question that you do not want to answer, and you can stop participating at any time. Your employer will not know whether you choose to participate, and participation will have no consequences for your apprenticeship program. Regardless of whether or not you answer all of our questions, you will receive a $25 gift card as a thank you. Although we hope you’ll stay for the entire discussion, if you need to leave, just let us know, and we can pause and make sure you get signed out and receive your $25 gift card.**

**Would you prefer to have a gift card to Amazon.com, CVS, Target, or Wal-Mart?**

**What is a reliable email address where we can send the gift card?**

We expect this discussion to last about 90 minutes.

To make sure that you understand what we are asking, could you explain in your own words what you are being asked to do and what it means when we say that your participations is voluntary? Do you have any questions?

**Privacy Statement:** We consider what you say in the focus group as private and will do everything we can to secure the privacy of the information you provide. Although my colleague and I will be taking notes, when we report information from the discussion, we will not include your name. We do not share these notes with anyone outside of our research team, including Department of Labor, and we will destroy these notes after the end of our project. When we compile our reports, the names of individual respondents will not be included. If we choose to quote you, you will only be identified as “an apprentice.” You will not be quoted directly by name in any of our reports.

Information from this discussion may be included in a public report, but none of the information you share will be attributed to you. While we can assure you that no one on the research team will share what you say outside of this conversation, we cannot control what other people will do with the information they hear. Because of that, we encourage all participants to think about whether they would be upset if someone repeated what they said outside of this conversation when deciding to share something with the group. We also encourage each of you to be respectful of one another and treat the information you hear as private. We also ask that you consider using headphones or finding a private space to talk so that other people cannot hear or see this conversation.

Potential risks may include the possibility that other focus group participants could divulge your participation and statements, although we believe these risks of participating in this study are minimal.

We believe there are no direct benefits to you, but we hope that the findings from this study will benefit the Partnership on Inclusive Apprenticeship and apprenticeship programs more broadly by providing research insights on how apprenticeship programs can be more inclusive.

Do you have any questions?

Finally, to help us accurately capture the information you share, we would like to audio record this conversation. The recording is just a back-up for our notes and will be kept securely within our small research team. The recording will be deleted once we have developed a full set of notes from the interview.

Next, we will ask for your consent to participate in the focus group discussion.

Do you agree to participate in the group conversation or focus group?

Do you consent to being recorded as a part of this group conversation or focus group and do you understand that if you choose not to be recorded you can still participate in the focus group and that your preference has no bearing on your participation?

There are a few things we ask that you keep in mind, since the conversation will be virtual and will involve more than one person:

1) Please enter the Zoom call at the start time. We will not be admitting people 5 minutes after the start of the call.

2) Please do your best to ensure privacy in your space/room while participating in the conversation. This can be an indoor or outdoor space that is as private from other people as possible. We recommend that if you are unable to be alone in a space that you plan to log on using headphones.

3) If possible, please participate in the video portion of the Zoom call.

4) Please do not use the virtual background option.

5) To respect others' privacy, please do not record, take screenshots, or otherwise document the contents of the discussion. And please do not discuss the conversation with others.

6) The research team might change the name you log on to Zoom with to a participant ID prior to letting you into the Zoom meeting in order to protect your privacy. If so, we will let you know the ID that you have been assigned.

Do you have any questions about these guidelines? Do you agree to these guidelines?

If you have questions or need additional information before agreeing, please contact us at [dkuehn@urban.org](mailto:dkuehn@urban.org).

We also want you to know that this research has been reviewed according to the Urban Institute Institutional Research Board procedures for research involving human subjects.

[If the apprentice consents]: We will send the call-in information for the group conversation by email. We understand that it’s a busy time with everything surrounding COVID-19, and we greatly appreciate you taking the time to speak with us. We look forward to speaking with you,

Appendix E – Apprenticeship Program Apprentice Focus Group Discussion Guide

Research to Support the Partnership on Inclusive Apprenticeship - 102212 -0001-001

**Introduction**

Thank you for taking the time to speak with us today. We work for the Urban Institute, an independent research organization based in Washington, D.C. The U.S. Department of Labor’s Office of Disability Employment Policy has contracted with the Urban Institute to conduct research on apprenticeship programs that are inclusive of people with disabilities to support the Partnership on Inclusive Apprenticeship.

As we discussed with each of you on the phone, participation is voluntary and not affiliated with your registered apprenticeship program. That means that you do not have to participate. It also means that if you do choose to participate you can choose not to answer any question that you do not want to answer, and you can stop participating at any time. Your employer will not know whether you choose to participate, and participation will have no consequences for your apprenticeship program. [OPTIONAL: Regardless of whether or not you answer all of our questions, you will receive a $25 gift card as a thank you. Although we hope you’ll stay for the entire discussion, if you need to leave, just let us know, and we can pause and make sure you get signed out and receive your $25 gift card.] We expect this discussion to last about 90 minutes.

Privacy Statement: We consider what you say in this focus group as private and will do everything we can to secure the privacy of the information you provide. Although we will be taking notes, when we report information from the discussion, we will not include your name. We do not share these notes with anyone outside of our research team, including Department of Labor, and we will destroy these notes after the end of our project. Information from this discussion may be included in a public report, but none of the information you share will be attributed to you. While we can assure you that no one on the research team will share what you say today outside of this conversation, we cannot control what other people will do with the information they hear. Because of that, we encourage all participants to think about whether they would be upset if someone repeated what they said outside of this conversation when deciding to share something with the group. We also encourage each of you to be respectful of one another and treat the information you hear today as private. We also ask that you consider using headphones or finding a private space to talk so that other people cannot hear or see this conversation.

Potential risks may include the possibility that other focus group participants could divulge your participation and statements, although we believe these risks of participating in this study are minimal.

We believe there are no direct benefits to you, but we hope that the findings from this study will benefit the Research to Support the Partnership on Inclusive Apprenticeship project by providing research insights on how apprenticeship programs can benefit workers.

Finally, to help us accurately capture the information you share, we would like to audio record this conversation. The recording is just a back-up for our notes and will be kept securely within our small research team. The recording will be deleted once we have developed a full set of notes from the interview.

In a phone conversation we previously discussed the nature of this research, that your participation is completely voluntary, and the costs and benefits of your participation in the research. Can you confirm that you agree to participate in this focus group in the chat box either by responding “I agree to participate in this discussion” or “I do not agree to participate in this discussion”? Please send the message directly to [focus group lead].

Do you have any questions about what we are going to do before we begin?

There are a few things we ask that you keep in mind, since the conversation will be virtual and will involve more than one person:

1) Please enter the Zoom call at the start time. We will not be admitting people 5 minutes after the start of the call.

2) Please do your best to ensure privacy in your space/room while participating in the conversation. This can be an indoor or outdoor space that is as private from other people as possible. We recommend that if you are unable to be alone in a space that you plan to log on using headphones.

3) If possible, please participate in the video portion of the Zoom call.

4) Please do not use the virtual background option.

5) To respect others' privacy, please do not record, take screenshots, or otherwise document the contents of the discussion. And please do not discuss the conversation with others.

6) The research team might change the name you log on to Zoom with to a participant ID prior to letting you into the Zoom meeting in order to protect your privacy. If so, we will let you know the ID that you have been assigned.

Do you have any questions about these guidelines? Do you agree to these guidelines?

1. How did you hear about your apprenticeship program? What was the application and hiring process like?
   1. Did you face any barriers or obstacles when you applied to your apprenticeship program?
   2. Did your employer or program sponsor help to over come those barriers or obstacles? If so, how?
   3. If your employer or program sponsor didn’t help you overcome those barriers to applying, is there something they could have done that would have made it easier for you to participate?
2. What attracted you to the apprenticeship opportunity? Why did you apply?
3. Do you know if the Wheelhouse Group, the Partnership on Inclusive Apprenticeship, or any of its partners [name AIOs] played a role in the recruitment and hiring process for your apprenticeship program? If so, how did you interact with these organizations?
4. Has your employer provided you with the opportunity to self-identify your disability status (either that you have or do not have a disability)? If they did, when and how did they provide this opportunity?
5. Besides providing an opportunity for apprentices to self-identify their disability status, has your employer ever discussed company policy or practice for ensuring that the apprenticeship program is fair and inclusive of people with disabilities? If they did, can you describe what they mentioned?
6. Can you describe what it would mean to you for an apprenticeship program to be inclusive of people with disabilities? [Probe:]
   1. Are there program features that all inclusive apprenticeship programs should have in your opinion?
   2. Are there hiring and recruitment practices that all inclusive apprenticeship programs should use?
   3. Are there certain tools or technologies that an employer in your industry should utilize?
7. Have you ever needed special accommodations from your employer? If so, did you request those accommodations or were they provided? Can you describe the experience?
8. If there was one area where your employer could improve, to make your apprenticeship program more inclusive, what would that be?
9. Did participating in your apprenticeship program help you to,
   1. Improve your skills? How?
   2. Earn credentials?
   3. Secure an increase in pay?
10. What do you like most about your apprenticeship program? What do you like least?
11. Do you have thoughts on what could make your apprenticeship program more inclusive of people with disabilities?