**Attachment A**

**Apprenticeship Evidence-Building Portfolio**

**Scaling Apprenticeship Through Sector-Based Strategies Grants and Closing the Skills Gap Grants Grantee Survey**

Apprenticeship Evidence-Building Portfolio

**Scaling Apprenticeship Through Sector-Based Strategies Grants and Closing the Skills Gap Grants**

Grantee Survey

Thank you for taking the time to participate in the Survey of Scaling Apprenticeship Through Sector-Based Strategies grantees and Apprenticeships: Closing the Skills Gap grantees.

* **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 Scaling Apprenticeship and Closing the Skills Gap grantprograms, which includes this survey.
* **What is the purpose of the survey?** This survey will collect information from all grantees that received Scaling Apprenticeship and Closing the Skills Gap grants and document the range of grantee characteristics and service populations/areas, employer engagement efforts, goals, activities, and lessons learned that emerged from grant experiences. It will provide information about promising strategies for developing and implementing effective apprenticeship programs.
* **How long will it take to complete?**  This survey will take approximately 3 hours. You may stop and return to the survey to continue and complete it.
* **Is participation mandatory?** Your participation is voluntary; however, please consider that the provisions in your grant agreement with DOL require grantees to participate in evaluation activities sponsored by DOL, including surveys.
* **Who will see my responses?** The Urban Institute treats the information you provide as private and we will not share your individual responses. Only a few members of the research team will see your responses, in order to tabulate and aggregate responses across grantees. 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 3 hours, 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 Chiefevaluationoffice@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**, so you can 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.

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

1. Respondent Contact Information
2. Basic Information about Your Grant
3. Grant Context
4. Apprenticeship Expansion Strategies
5. Employer Recruitment and Engagement
6. Apprentice Target Population, Recruitment, and Intake
7. Overview of Apprenticeship Programs and On-the-Job Training/Work-Based Learning and Mentorship Component
8. Related Technical Instruction/Educational and Instructional Components
9. Services to Support Apprentice Persistence and Completion
10. Partnering Organizations
11. Pre-apprenticeship (For Closing the Skills Grants only)
12. Sustainability Plans and Lessons Learned

## *Suggested Reference Documents:* It may be necessary or helpful to have the following documents on hand while completing the survey, particularly:

* the original grant application and any grant modifications;
* internal planning documents; and
* performance reports submitted to DOL.

*Scope of Questions:* Unless otherwise indicated, survey questions refer to the [Scaling Apprenticeship or Closing the Skills Gap] grant led by your institution and partnering organizations. Please answer as appropriate if any of your [Scaling Apprenticeship or Closing the Skills Gap] grant-funded activities had the experience in question. We recognize that your [Scaling Apprenticeship or Closing the Skills Gap] grant activities may be part of a larger effort by your organization but please answer the questions to the best of your ability as they *relate* to the [Scaling Apprenticeship or Closing the Skills Gap] grant activities.

1. **Respondent Contact Information**

We have the following contact information in our records. Please correct the information as needed:

[Note to Programmer: Questions highlighted in green font will be pre-loaded from the grant agreement or other documents.]

A1. Name of institution or organization: XXX

A2. Grant number: XXX

A3 Name of primary person completing the survey: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A4. Job title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A5. Contact information of primary person completing the survey

* 1. Mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	4. Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
1. **Basic Information about Your Grant**

[Note to Programmer: Glossary should include definitions of registered apprenticeship, unregistered apprenticeship, and pre-apprenticeship.]

B1. For your grant activities, which industries are you focusing on? (Check all that apply.)

1. Information Technology (IT) and IT-related industries 🡪 if selection, ask B2
2. Healthcare
3. Advanced manufacturing
4. Financial services
5. Educational services
6. Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_

B2. Do your grant activities target any of the following areas**?** (Check all that apply.)

1. Yes, cybersecurity
2. Yes, artificial intelligence (AI)
3. No

B3. Please list the specific occupations you are targeting for your grant activities.

 Occupation #1 \_\_\_\_\_\_\_

 Occupation #2 \_\_\_\_\_\_\_

 [Programmer: Please allow for respondents to list up to 25 occupations.]

B4. For each occupation, have employers hired apprentices to date?

|  |  |
| --- | --- |
| Occupation #1 [populated from B3] | \_\_\_ Yes, employers have hired apprentices\_\_\_ No, employers have not hired apprentices but plan to do so\_\_\_ No, employers have not hired apprentices and do not plan to do so\_\_\_ Do not know |
| Occupation #2 [populated from B3] | [continue] |
| [continue] | [continue] |

B5. How many *newly developed* and/or *enhanced existing* **Registered Apprenticeship programs** have you developed to date?

 \_\_\_\_# of *newly developed* registered apprenticeship programs

 \_\_\_\_# of *enhanced* *existing* registered apprenticeship programs

B6. How many *newly developed* and/or *enhanced existing* **Unregistered Apprenticeship programs** have you developed to date?

 \_\_\_\_# of *newly developed* unregistered apprenticeship programs

 \_\_\_\_# of *enhanced* *existing* unregistered apprenticeship programs

B7. How many *newly developed* and/or *enhanced existing* **Pre-apprenticeship programs** have you developed to date? [for Scaling Apprenticeship grantees only]

 \_\_\_\_# of *newly developed* pre-apprenticeship programs

 \_\_\_\_# of *enhanced* *existing* pre-apprenticeship programs

1. **Grant Context**

C1. What has been your organization’s previous experience with apprenticeships (before the grant)? (Check all that apply.)

1. None
2. Conducted employer apprenticeship marketing/engagement activities
3. Served as an apprenticeship program sponsor
4. Helped develop an apprenticeship program
5. Partnered with an apprenticeship program sponsor
6. Provided related technical instruction for an apprenticeship program
7. Served on a state apprenticeship council
8. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C2. In your opinion, to what extent have the industries targeted by your grant in the geographic area(s) served been impacted by changing economic conditions *since the start of your grant*?

1. Positive impact on industry sectors
2. Negative impact on industry sectors
3. No impact on industry sectors

C3. Please answer the next series of questions about the extent to which you think changing economic conditions and the COVID-19 pandemic have affected employment and apprenticeship activities in the area(s) you serve.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Since the start of the grant, to what extent do you think…*** | **1****Decreased a lot** | **2 Decreased somewhat** | **3****No change** | **4 Increased somewhat** | **5 Increased a lot** |
| a) … *employment opportunities* within the industries targeted by your grant have changed in your service area(s)? |  |  |  |  |  |
| b) …*apprenticeship opportunities* within the industries targeted under your grant have changed in your service area(s)? |  |  |  |  |  |
| c) …that the COVID-19 pandemic has affected *employment opportunities* within the industries you have targeted? |  |  |  |  |  |
| d) …that the COVID-19 pandemic has affected *apprenticeship opportunities* within the industries you have targeted? |  |  |  |  |  |
| e) …that the COVID-19 pandemic has affected the *willingness of* *individuals’ (e.g., workers, unemployed/underemployed individuals, incumbent workers)* to consider apprenticeship opportunities within the industries you have targeted? |  |  |  |  |  |
| f) …that the COVID-19 pandemic has affected the *willingness of employers* to consider establishing new or expanding existing apprenticeship programs within the industries you have targeted? |  |  |  |  |  |

C4. To what extent has the start-up and early implementation of your grant been impacted by the COVID-19 pandemic?

1. Substantially slowed start-up/early implementation of grant activities
2. Somewhat slowed start-up/early implementation of grant activities
3. No effect on start-up/early implementation of grant activities
4. Somewhat accelerated start-up/early implementation of grant activities
5. Substantially accelerated start-up/early implementation of grant activities
6. Don’t know/unsure

C5. If COVID-19 has had an effect on the start-up and implementation of your grant, in what ways has the pandemic impacted your grant? \_\_\_\_\_\_\_\_\_\_ [open-ended box]

1. **Apprenticeship Expansion Strategies Under Your Grant**

D1. What **changes at institutions of higher education (e.g., community and technical colleges, universities)** have been implemented to support apprenticeship expansion as a part of or as a result the grant?

1. Enrollment policy changes
2. Credit for prior learning or work experience
3. Articulation and transfer policies
4. New data elements collected on apprentices
5. Other; please specify

D2. What changes did your organization develop **new or enhance existing policies or procedures** to support apprenticeship expansion that were adopted across your grant partners as appropriate?

1. New or improved apprentice safety procedures
2. New or improved hiring policies to improve apprentice diversity
3. New or improved policies or procedures on apprentice supervision
4. Policies on other aspects of apprenticeship (e.g., wage progression)
5. Not aware of any changes to internal policies and procedures
6. Other; please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D3. Have your or your partners developed new/adapted existing **occupational standards** for the apprenticeship programs? ? [Programmer Note: pipe in occupations listed in B3]

|  |  |
| --- | --- |
| Occupation #1 [populated from B3] | \_\_\_ Yes, *developed* standards for this occupation\_\_\_ Yes, *adapted existing* standards for this occupation\_\_\_ Yes, *currently developing* standards for this occupation\_\_\_ Yes, *currently adapting existing* standards for this occupation\_\_\_ No, have not developed standards |
| Occupation #2 [populated from B3] | [continue] |
| [continue] | [continue] |

D4. What types of **industry-approved/recognized credentials** have you and your partners developed to be awarded for a particular occupation or industry as a part of the grant? [Programmer Note: pipe in occupations listed in B3]

|  |  |  |
| --- | --- | --- |
| Occupation #1 [populated from B3] | 1. Apprenticeship completion credential
2. Certificate of one year or less awarded by an institution of higher education or other training provider
3. Certificate of one to two years awarded by an institution of higher education or other training provider
4. Associates (two-year) degree
5. Bachelors (four-year) degree
6. Certification of skills by a third party (e.g., industry certification)
7. State license
8. Digital badge
9. Other credential #1, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Other credential #2, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. Other credential #3, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. None
 | Industry recognized and/or approved? (yes/no) |
| Occupation #2 [populated from B3] | [continue] | [continue] |
| [continue] | [continue] | [continue] |

D5. Have you or your partners developed **new or adapted/enhanced existing curriculum** for the apprenticeship programs implemented under your grant?

|  |  |
| --- | --- |
| Occupation #1 [populated from B3] | 1. Developed new curriculum
2. Adapted/enhanced existing curriculum
3. Both developed new and adapted/enhanced existing curriculum
4. Did not developed new and adapted/enhanced existing curriculum
 |
| Occupation #2 [populated from B3] | [continue] |
| [continue] | [continue] |

D6. How have you and your partners implemented **sector-based activities or** **strategies to facilitate industry-wide use and acceptance** of apprenticeship as a training model? How effective has each activity or strategy been for reaching and engaging individual employers to participate in an apprenticeship program?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Activity or strategy | Implemented activity or strategy? (yes/no) | Not effective at all(1) | (2) | (3) | (4) | Very effective (5) |
| 1. Participated in an industry or sector partnership
 |  |  |  |  |  |  |
| 1. Worked with an employer intermediary to assist with enlisting a wide network of employers
 |  |  |  |  |  |  |
| 1. Created career pathway that embedded apprenticeship models in partnership with industry
 |  |  |  |  |  |  |
| 1. Coordinated outreach to groups of small- to medium-sized employers within an industry
 |  |  |  |  |  |  |
| 1. Presented at industry conferences, meetings or convenings on apprenticeship
 |  |  |  |  |  |  |
| 1. Met directly with industry representatives and employers
 |  |  |  |  |  |  |
| 1. Provided marketing materials on apprenticeship
 |  |  |  |  |  |  |
| 1. Created a website on apprenticeship in the industry
 |  |  |  |  |  |  |
| 1. Hired staff to directly reach out to and engage industry representatives and employers
 |  |  |  |  |  |  |
| 1. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |  |  |  |  |  |  |

D7. Have you offered and provided **technical assistance** to apprenticeship sponsors as a part of your grant?

\_\_\_ Yes

\_\_\_ No [If no, skip to D10]

D8. On what topics have you offered and provided technical assistance to apprenticeship sponsors as a part of your grant?

1. Recruitment of apprentices
2. Supervision of apprentices
3. Mentorship of apprentices
4. Assessment of apprentice skill gains
5. Related training instruction or educational or instructional components of apprenticeship
6. Occupational standards
7. Safety procedures
8. Reporting of information/data on apprentices
9. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D9. Have you and your partners developed **new metrics and data elements** to track activities and results of the apprenticeship program in addition to the grant performance measures?

\_\_\_ Yes, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ No

1. **Employer Recruitment and Engagement Under Your Grant**

E1. Under your grant, have you funded any staff who **market, recruit, and/or engage employers** to participate in an apprenticeship program? (You can check one or both a) and b) or only c).)

1. Yes, staff employed at my organization.
2. Yes, staff employed at our partner(s).
3. No

E2. In the past year, how many **full-time staff equivalents (FTEs)** did the grant fund through your organization and partners to conduct employer outreach, recruitment, and engagement effort?

\_\_\_\_\_\_\_\_\_\_FTEs (during the past year of the grant)

E3. Under your grant, how helpful were the following **methods for marketing apprenticeship** to employers? Please rate these on a scale of 1 to 5, where 1=”Not helpful” and 5=”Very helpful.”

| Method | Was method used? (Yes/No) | 1Not helpful | 2 | 3 | 4 | 5Very helpful |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Word of mouth
 |  |  |  |  |  |  |
| 1. Community or career college instructors
 |  |  |  |  |  |  |
| 1. Workforce boards or WIOA-sponsored job center
 |  |  |  |  |  |  |
| 1. Networking using staff connections
 |  |  |  |  |  |  |
| 1. Cold calling employers
 |  |  |  |  |  |  |
| 1. In-person visits to employers
 |  |  |  |  |  |  |
| 1. Attendance at conferences or other convenings
 |  |  |  |  |  |  |
| 1. Meetings with employers (in-person or virtual)
 |  |  |  |  |  |  |
| 1. Cooperation with state apprenticeship agency
 |  |  |  |  |  |  |
| 1. Coordination with the local chamber of commerce or industry association
 |  |  |  |  |  |  |
| 1. Advertising through traditional media
 |  |  |  |  |  |  |
| 1. Social media
 |  |  |  |  |  |  |
| 1. Creation of a dedicated website or webpages
 |  |  |  |  |  |  |
| 1. Other (specify)
 |  |  |  |  |  |  |

E4. Under your grant, how effective have the following **selling points** been to market apprenticeship to employers? Please rate these on a scale of 1 to 5, where 1=”Not helpful” and 5=”Very helpful.”

| Selling point | Selling point used(Yes/No) | 1Not effective | 2 | 3 | 4 | 5Very effective |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Funding for related training instruction or on-the-job training are available to employers that sponsor apprentices
 |  |  |  |  |  |  |
| 1. Apprenticeship leads to improvements in worker productivity
 |  |  |  |  |  |  |
| 1. Apprenticeship develops a customized skill set that is specific to an employer’s needs
 |  |  |  |  |  |  |
| 1. Apprenticeship develops workers’ skill set without them leaving the workforce
 |  |  |  |  |  |  |
| 1. Apprenticeship provides a steady source of skilled workers that are difficult to hire directly
 |  |  |  |  |  |  |
| 1. Apprenticeship reduces turnover
 |  |  |  |  |  |  |
| 1. Apprenticeship helps make workers self-sufficient
 |  |  |  |  |  |  |
| 1. Apprenticeship has broader social benefits such as reducing inequality or closing the skills gap
 |  |  |  |  |  |  |
| 1. Local related technical instruction providers have valuable training opportunities that can be accessed through apprenticeship
 |  |  |  |  |  |  |
| 1. Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_
 |  |  |  |  |  |  |

E5. On average, when initially contacted about apprenticeship, about *what percentage* of **employers express an interest in apprenticeship**?

 \_\_\_\_\_%

 \_\_\_\_\_ do not track this information

E6. On average, once an employer is interested in establishing an apprenticeship program, *how many months* does it take employers to go through **the process of designing, registering, and establishing an apprenticeship program**?

\_\_\_\_\_\_\_\_\_\_months (on average) between initial contact and registration or establishment of an apprenticeship program

E7. Once an employer is interested in establishing an apprenticeship program, what is the *shortest and longest time* in months that it has taken for an employer to go through **the process of designing, registering, and establishing an apprenticeship program**?

\_\_\_\_\_\_\_\_\_\_shortest number of months between initial contact and registration or establishment of an apprenticeship program

\_\_\_\_\_\_\_\_\_\_longest number of months between initial contact and registration or establishment of an apprenticeship program

E8. Have you had a large enough **pool of potential employers** to engage in your grant activities?

* 1. Yes
	2. No
	3. Don’t know/unsure

E9. Under your grant, have **more employers been interested** in participating in apprenticeship than can be accommodated (e.g., is there a waiting list for employers to join)?

1. Yes
2. No
3. Don’t know/unsure

E10. Under your grant, which of the following has been **challenges** to conducting outreach to and engaging employers? (Check all that apply.)

1. Not enough of a pool of employers in the area served that are aware of apprenticeships
2. Not enough of a pool of employers interested in apprenticeship
3. Lack of employers hiring
4. Lack of employer facing shortages of skilled workers
5. COVID-19 pandemic
6. Other, please specify: \_\_\_\_
7. No challenges
8. Don’t know/unsure

E11. When reached by grant staff, what are the **reasons employers give** when they are not interested in apprenticeship? (Check all that apply.)

1. Employer does not have need to upskill/train workers
2. Apprenticeship training is too expensive
3. Apprentices might be hired or “poached” by competitors after completing their training
4. The employer cannot spare the time of other workers to provide mentorship or on-the-job training
5. Employer has a training program they are currently happy with
6. The registration process is too complicated
7. Regulatory compliance costs associated with apprenticeship are too high
8. Apprenticeship may encourage unionization efforts
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

E12. How many **employers have adopted or expanded apprenticeship programs** as a result of your grant to date?

\_\_\_\_\_ employers have *adopted* apprenticeship programs

\_\_\_\_\_ employers have *expanded* apprenticeship programs

E13. What is the **size of the employers** that have adopted or expanded apprenticeship programs as a result of your grant to date?

1. Employers have fewer than 25 employees: \_\_\_ employers
2. Employers have between 25 -99 employees: \_\_\_ employers
3. Employers have 100 or more employees: \_\_\_ employers
4. Don’t know/unsure

E14. How many **apprentices** have these employers that have adopted or expanded apprenticeship programs as a result of your grant to date?

1. Employers currently has 0 apprentices: \_\_\_ employers
2. Employers currently has 1-5 apprentices: \_\_\_ employers
3. Employers are currently has 6-10 apprentices: \_\_\_ employers
4. Employers are currently has 11-25 apprentices: \_\_\_ employers
5. Employers are currently has 26-50 apprentices: \_\_\_ employers
6. Employers are currently has 51-100 apprentices: \_\_\_ employers
7. Employers are currently has more than 100 apprentices: \_\_\_ employers
8. Don’t know/unsure

E15. Under your grant, how many apprentices does the **largest participating employer** have?

\_\_\_\_\_ apprentices

E16. Please list up to **five employers** with which you have the most apprentices enrolled to date under your grant (in order from the employer with the highest number of apprentices). These can be registered and unregistered apprenticeship programs. Please do not include any pre-apprenticeship programs.

[Programmer Note; Insert drop down list of all 2-digit NAICS codes for column 2; pipe in occupations listed in B3 for column 3)

| Employer’s name | Employer’s primary industry sector (two-digit NAICS Code) | Occupation(s) of focus for the apprenticeship program | # of Apprentices Enrolled to Date Under Grant (Across All Apprenticeship Programs at Employer) |
| --- | --- | --- | --- |
| Employer 1:\_\_\_ |  |  |  |
| Employer 2:\_\_\_ |  |  |  |
| Employer 3:\_\_\_ |  |  |  |
| Employer 4:\_\_\_ |  |  |  |
| Employer 5:\_\_\_ |  |  |  |

E17. Under the grant, what **types of assistance** have been provided to employers to help them in planning and initiating apprenticeship programs? (Check all that apply.)

1. Help specifying an occupation that fits the employer’s requirements
2. Help identifying a related technical instruction provider and/or curriculum
3. Help with training apprentice supervisors
4. Help with mentor training
5. Help developing standards of apprenticeship
6. Help developing wage structure and schedule
7. Help completing relevant forms and registering the apprenticeship program
8. Help communicating with the DOL Office of Apprenticeship or State Apprenticeship Agency and/or handling the paperwork for the employer
9. Help reporting to RAPIDS or equivalent state reporting
10. Other; please specify: \_\_\_\_

E18. What **financial supports** have been offered to encourage employer engagement using grant funds? [If select e), skip to F1.]

* 1. Tuition reimbursement
	2. Reimbursement for on-the-job training costs
	3. Reimbursement for registration costs
	4. Reimbursement for mentor wages
	5. No financial supports offered

E19. Under your grant, have you **reimbursed any employers** (with 50 or fewer employees) for a portion of the apprentice’s on-the-job training costs?

1. Yes
2. No
3. **Apprentice Target Population, Recruitment, and Intake Under Your Grant**

F1. Under your grant, which of the following types of **workers are you targeting**?

(Check all that apply.)

* 1. Unemployed workers
	2. Underemployed workers
	3. Incumbent workers
	4. Workers employed before apprenticeship (but not at apprenticeship sponsor)

F2. Under your grant, which of the following **populations are you targeting**? (Check all that apply.)

* 1. Veterans
	2. Military spouses
	3. Transitioning service members
	4. Women
	5. People of color
	6. People with disabilities
	7. People previously involved in the justice system
	8. Public workforce system clients
	9. College students
	10. Graduating high school students
	11. Out-of-school youth
	12. Other individuals who are not traditionally represented in apprenticeship programs; please specify: \_\_\_\_
	13. None of the above

F3. Under your grant, how has your organization and its partners **marketed apprenticeships** directly to potential participants? (Check all that apply.)

* 1. Distribution of flyers, posters or other educational/informational materials
	2. Program staff outreach presentations
	3. Career fairs (in-person and virtual)
	4. Informational websites
	5. Toll-free informational hotlines
	6. Outreach campaigns using media (e.g., PSAs, TV, radio, newspaper, ads on buses/bus shelters)
	7. Social media (e.g., LinkedIn, Facebook, Twitter, Instagram, etc.)
	8. Direct mail campaigns
	9. Word-of-mouth
	10. Did not market apprenticeship directly to potential participants
	11. Other, please specify: \_\_\_\_

F4. Under your grant, what organizations have **provided referrals** of prospective participants and how important have they been as a referral source? (Check all that apply.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Referral Source | Serving as a referral source (yes/no) | Not important at all(1) | (2) | (3) | (4) | Very Important (5) |
| 1. Employers
 |  |  |  |  |  |  |
| 1. Professional and industry organizations
 |  |  |  |  |  |  |
| 1. Unions
 |  |  |  |  |  |  |
| 1. Workforce development boards
 |  |  |  |  |  |  |
| 1. American Job Centers
 |  |  |  |  |  |  |
| 1. Job Corps program
 |  |  |  |  |  |  |
| 1. YouthBuild program
 |  |  |  |  |  |  |
| 1. Pre-apprenticeship programs
 |  |  |  |  |  |  |
| 1. Secondary (K-12) schools/school districts
 |  |  |  |  |  |  |
| 1. Community and technical colleges
 |  |  |  |  |  |  |
| 1. Four-year postsecondary institutions
 |  |  |  |  |  |  |
| 1. Other postsecondary institution
 |  |  |  |  |  |  |
| 1. Community/faith-based organizations
 |  |  |  |  |  |  |
| 1. Re-engagement centers (i.e., to link youth that have dropped out of school back to school or other types of training)
 |  |  |  |  |  |  |
| 1. Courts/correctional system/juvenile justice/probation officers
 |  |  |  |  |  |  |
| 1. Public and non-profit human service agencies (e.g., TANF, SNAP, public housing authorities)
 |  |  |  |  |  |  |
| 1. Other; please specify: \_\_\_\_\_\_\_\_\_\_
 |  |  |  |  |  |  |

F5. Under your grant, has there been **enough prospective apprentices** to fill all the available apprenticeship slots?

* 1. More than enough (e.g., waiting lists)
	2. Just enough
	3. Not enough
	4. Unsure

F6. Under your grant, what **challenges** have you encountered in recruiting new apprentices? (Check all that apply.)

1. Finding eligible participants
2. Some applicants have insufficient basic skill levels or do not have a high school credential
3. Some applicants are not interested or motivated to participate in apprenticeship
4. Apprenticeship period is too lengthy for some applicants
5. Apprenticeship wages were not high enough to encourage potential participants to enrolling in an apprenticeship program
6. Outreach strategies have not been effective
7. Partners did not provide a sufficient number of referrals
8. Some applicants have difficulty getting to the program/employer location
9. Did not have enough resources for recruitment
10. Changing economic conditions in the areas has made recruitment more challenging
11. Other\_\_\_\_\_
12. No challenges encountered

F7. Under your grant, does your organization, employers, or other stakeholders typically **require potential apprentices** to provide or undergo any of the following before enrolling in the apprenticeship program? (Check all that apply.)

1. Written application
2. Documentation of being available to work in the United States
3. Resume
4. Documentation of High School Diploma or GED
5. Academic skill level as determined on assessment
6. Career aptitudes assessment
7. Career interest assessment
8. English language proficiency assessment
9. Support service needs assessment
10. Background check for felonies
11. Background check for misdemeanors
12. Drug screening
13. Physical or other medical exam
14. Occupational skill level
15. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

F8. What types of **organizations assist in the intake, screening, and enrollment** process for apprentices under your grant? (Check all that apply.)

1. Employer
2. Labor organization (e.g. union, labor association/labor federation)
3. Local government agency
4. State government agency
5. American Jobs Center
6. Nonprofit (e.g., community or faith-based) service/training provider
7. Industry association
8. Community or technical college
9. Four-year postsecondary institution
10. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

F9. By what methods do these **organizations conduct the intake, screening, and enrollment process** apprentices under your grant? (Check all that apply.)

1. Online forms
2. Hardcopy/paper forms
3. In-person one-on-one session with organization staff
4. Virtual one-on-one session with organization staff
5. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**G. Overview of and [On-the-Job Training/Work-Based Learning and Mentorship] Components for Selected Grant-Funded Apprenticeship Programs**

[Note for programmer: Use Related Training Instruction for SA grantees and Educational and Instructional Component for CSG grantees. Use On-the-Job Training for SA grantees and Work-Based Learning and Mentorship for CSG grantees.]

**FOR THREE APPRENTICESHIP OCCUPATION PROGRAMS UNDER THE GRANT WITH THE *LARGEST* ENROLLMENT OF APPRENTICES UNDER THE GRANT, PLEASE ANSWER QUESTIONS IN THIS SECTION.**

[Programmer Note: Pre-load the three apprenticeship programs from Question E16 above for three employers with the three largest number of apprentices enrolled (e.g., Apprentice Occupation #1 for Employers #1, #2, and #3, the apprenticeship programs which have the largest number of apprentices enrolled to date under the grant]

G1. What is the **typical duration** of the apprenticeship? \_\_\_\_Years \_\_\_Months \_\_\_\_Weeks

G2. What type of apprenticeship program is [Apprenticeship Occupation 1]?

1. Time-based
2. Competency based
3. Hybrid (both time-based and competency-based)

G3. Is [Apprenticeship Occupation 1] program **registered** (with the state apprenticeship agency or USDOL, recognized as an IRAP by a Standards Recognizing Entity) or unregistered?

* 1. Registered with state apprenticeship agency
	2. Registered with US Department of Labor
	3. Industry-recognized apprenticeship program
	4. Unregistered

G4. For the [Apprenticeship Occupation 1] apprenticeship program, what is the best description of the **training model**?

1. [Related technical instruction/educational and instructional component] and [on-the-job training/work-based learning and mentorship] is concurrent throughout program
2. Much or most of [related technical instruction/educational and instructional component] is taken in the beginning of the apprenticeship before any[on-the-job training/work-based learning and mentorship]
3. [Related technical instruction/educational and instructional component] and [on-the-job training/work-based learning and mentorship] alternate throughout apprenticeship
4. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

G5. What is the **typical duration** of the [on-the-job training/work-based learning and mentorship] component for the [Apprenticeship Occupation 1] program?

 \_\_Year(s) \_\_\_\_Month(s)

G6. Over the period of the apprenticeship (i.e., over the period indicated in G1), how many **total hours** would an apprentice typically complete for [on-the-job training/work-based learning and mentorship] component for the [Apprenticeship Occupation 1] program? \_\_\_ hours

G7. At how many points in the apprenticeship programs can participants receive a **wage increase**?

 \_\_\_\_\_ # of points

G8. What is the **starting, midpoint, and ending** (i.e. journeyperson or completion) hourly wages for the [Apprenticeship Occupation 1] program?

 Starting wage $\_\_\_\_\_\_\_\_\_\_

 Midpoints $\_\_\_\_\_\_\_\_\_\_ [Note: allow for as many midpoints minus ending wage in H3]

 Ending wage $\_\_\_\_\_\_\_\_\_\_

G9. What milestones trigger increases in **hourly wages** for the [Apprenticeship Occupation 1] program? (Check all that apply.)

1. Annual increases
2. Increases after a certain period of time less than a year
3. Increases after competencies are achieved at certain milestones
4. Completion of the related technical instruction component of the apprenticeship
5. Other

G10. Do apprentices in the [Apprenticeship Occupation 1] program receive any of the following **benefits** other than their wages during the apprenticeship program? (Check all that apply.)

1. Health benefits
2. Paid sick leave
3. Paid vacation time
4. Retirement benefits
5. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

G11. What **costs** for [Apprenticeship Occupation 1] program do employers pay for themselves? (Check all that apply.)

1. Wages for apprentices
2. Benefits for apprentices
3. Time on-the-clock spent by apprentice supervisor
4. Time on-the-clock spent by apprentice mentor
5. Time on-the-clock for [related technical instruction/educational and instructional component]
6. Tuition for [related technical instruction/educational and instructional component]
7. Fees, including lab fees and exams
8. Equipment/tools, including books and supplies
9. None
10. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

G12. Were apprentices provided a **mentor** as a part of [Apprenticeship Occupation 1] program?

 \_\_\_\_ Yes

 \_\_\_\_ No (Skip to H1)

G13. Approximately how much time per month do mentors and the apprentices spend together during the [Apprenticeship Occupation 1] program?

 \_\_\_\_\_ hours per month

G14. Do mentors and apprentices for [Apprenticeship Occupation 1] program meet in-person or virtually?

 \_\_\_ In-person

 \_\_\_ Virtually

 \_\_\_ Both

G15. What topics do mentors discuss with apprentices for [Apprenticeship Occupation 1] program?

1. Occupation/career goals
2. [On-the-job training/work-based learning] components
3. [Related technical instruction/educational and instructional component]
4. Work-life balance
5. Motivation
6. Challenges with supervisor or other employees
7. Support service needs
8. Other, please specify

G16. How effective have mentors been in supporting apprentice success for [Apprenticeship Occupation 1] program?

 \_\_\_\_Highly effective

 \_\_\_\_Somewhat effective

 \_\_\_\_Not effective at all

**H. [Related Training Instruction/Educational and Instructional Component] for Selected Grant-Funded Apprenticeship Programs**

H1. What organizations deliver [related technical instruction/educational and instructional component] for the [Apprenticeship Occupation 1] program? (Check all that apply.)

1. Delivered in-house by employer
2. Local community or technical college
3. Labor union
4. Industry association
5. Private, for-profit training provider
6. Community or faith-based organization
7. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H2. Are any of the following methods used as part of the [related technical instruction/educational and instructional component] for [Apprenticeship Occupation 1]?(Check all that apply.)

* 1. Accelerated learning modules
	2. Contextualized learning
	3. Team teaching with a technical and adult education instructor
	4. Self-paced learning
	5. Competency-based learning
	6. Prior learning assessments
	7. Technology-enabled learning, such as use of simulators for hands-on practice of skills
	8. On-line teaching/learning that was planned or anticipated before the COVID-19 pandemic
	9. On-line teaching/learning that was introduced as a result of the COVID-19 pandemic
	10. Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H3. How do [related technical instruction/educational and instructional component] instructors in the [Apprenticeship Occupation 1] program determine whether apprentices have successfully mastered requisite concepts? (Check all that apply.)

1. Grades from written tests, presentations, portfolios, etc.
2. Grades in college classes
3. Hands-on demonstration of skills using key concepts
4. Instructor assessment using a rubric or grading system that is different than a written test
5. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

H4.What credentials can apprentices in the [Apprenticeship Occupation 1] program earn over the course of a successfully completed apprenticeship and which are industry-approved and/or recognized? (Check all that apply.)

|  |  |  |
| --- | --- | --- |
| Credential | Yes/No | Industry Recognized and/or Approved? (yes/no) |
| Apprenticeship completion credential |  |  |
| Certificate of one year or less awarded by an institution of higher education or other training provider |  |  |
| Apprenticeship completion credential |  |  |
| Certificate of one year or less awarded by an institution of higher education or other training provider |  |  |
| Certificate of one to two years awarded by an institution of higher education or other training provider |  |  |
| Associates (two-year) degree |  |  |
| Bachelors (four-year) degree |  |  |
| Certification of skills by a third party (e.g., industry certification) |  |  |
| State license |  |  |
| Digital badge |  |  |
| Other credential #1, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| Other credential #2, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| Other credential #3, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

H5.Will apprentices in the [Apprenticeship Occupation 1] program receive college credits or hours for any course work they complete as a part of the [related technical instruction/educational and instructional component]?

1. Yes
2. No

H6. What is the total number of [related technical instruction/educational and instructional component] hours required for the [Apprenticeship Occupation 1] program? (If there are no required hours, for example, because the program is a competency-based program, please note that zero hours are required.) \_\_\_\_\_\_\_\_\_\_hours

H7. Are the credit hours for the [Apprenticeship Occupation 1] program articulated at other colleges? (Check all that apply.)

1. Yes, for a college certificate
2. Yes, for an associate degree
3. Yes, for a bachelor’s degree
4. No

H8. What costs for [related technical instruction/educational and instructional component] do apprentices in the [Apprenticeship Occupation 1] program pay themselves? (Check all that apply.)

1. Tuition
2. Fees, including lab fees
3. Equipment/tools, including books and supplies
4. None
5. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I.** **Services to Support Apprentice Persistence and Completion Under Your Grant**

I1. Which types of personal supports do you make available to apprentices under the grant? (Check all that apply.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Service | Provided by grantee | Provided by education and training partner(s) | Provided by employer(s) | Provided by other partner(s) |
| Yes? | Paid by grant? | Yes? | Paid by grant?  | Yes? | Paid by grant?  | Yes? | Paid by grant?  |
| a) Transportation |  |  |  |  |  |  |  |  |
| b) Childcare |  |  |  |  |  |  |  |  |
| c) Dependent care |  |  |  |  |  |  |  |  |
| d) Housing assistance |  |  |  |  |  |  |  |  |
| e) Needs-related payments that help an individual participate in grant activities |  |  |  |  |  |  |  |  |
| f) Other (please specify) |  |  |  |  |  |  |  |  |

I2. Which types of supports do you make available to apprentices to participate in related training instruction under the grant? (Check all that apply.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Service | Provided by grantee | Provided by education and training partner(s) | Provided by employer(s) | Provided by other partner(s) |
| Yes? | Paid by grant? | Yes? | Paid by grant?  | Yes? | Paid by grant?  | Yes? | Paid by grant?  |
| a) Academic advising/counseling |  |  |  |  |  |  |  |  |
| b) Tutoring |  |  |  |  |  |  |  |  |
| c) Tuition assistance |  |  |  |  |  |  |  |  |
| d) Basic skills instruction |  |  |  |  |  |  |  |  |
| e) Career counseling/coaching |  |  |  |  |  |  |  |  |
| f) Other (specify) |  |  |  |  |  |  |  |  |

I3. Have any limits been placed on a maximum amount of grant funding available to support an apprentice’s retention and completion (e.g., personal supports, supports for related technical instruction) of the apprenticeship program?

* 1. Yes; the maximum amount per apprentice is: $\_\_\_\_\_\_\_\_\_\_
	2. No

I4. Is there a **case manager, counselor, or coach** funded by the grant who is assigned to work one-on-one with apprentices to support them throughout the program in ways other than OJT mentorship and supervision? [If no, skip to I7.]

1. Yes, provided by the grantee
2. Yes, provided by a partner
3. No

I5. What are the responsibilities of the **case manager, counselor, or coach** assigned to work one-on-one with apprentices to support them throughout the program with each apprentice?

(Check all that apply.)

1. Apprentice monitoring and or case management
2. Career counseling
3. Financial counseling
4. Apprentice’s satisfaction with employer
5. Personal counseling
6. Referrals to services in the community
7. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I7. Are grant funds used to provide **gift cards** or other payments to encourage apprentices to provide information on their employment status after they leave the program?

1. Yes
2. No
	* 1. **Partnering Organizations Under Your Grant**

J1. Please list up to **five organizations** (other than employers or colleges in your consortium) that you regard as your most important partners under the grant and rate their role (1-substantial role, 2-somewhat of a role, or 3-no role) in the following activities:

| Partner name | Outreaching, Recruiting, or Referring Individuals for Placement in Apprenticeship Opportunities | Conducting Employer Outreach/ Engagement Activities About Apprenticeships | Helping with Apprenticeship Program or Curriculum Design | Serving as Apprenticeship Program Sponsor | Serving as Pre-Apprentice-ship Sponsor | Related Training Instruction Provider | Support Services Provider |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Partner # 1:\_\_\_ |  |  |  |  |  |  |  |
| Partner # 2:\_\_\_ |  |  |  |  |  |  |  |
| Partner # 3:\_\_\_ |  |  |  |  |  |  |  |
| Partner # 4:\_\_\_ |  |  |  |  |  |  |  |
| Partner # 5:\_\_\_ |  |  |  |  |  |  |  |

**K. Pre-Apprenticeship Program(s) Formed/Expanded Under Your Grant**

**[Note: Section is only to be completed by Scaling Apprenticeship Grants – Pre-Apprenticeship is not an allowable expenditure under the Closing the Skills Gap Grants]**

K1. Does your grant support one or more **pre-apprenticeship** programs?

1. Yes
2. No (Skip to Section L)

K2. List up to 3 of the **largest occupations** (by number of pre-apprentices served to date) for which you are operating a pre-apprenticeship program(s) and identify the planned number of pre-apprentices to be served and the number served to date. (Please answer for at least one row.)

|  | Occupation |  Number of pre-apprentices served to date (as of \_\_/\_\_/\_\_) | Has a direct pathway to an apprenticeship program |
| --- | --- | --- | --- |
| Pre-apprenticeship occupation 1 |  |  |  |
| Pre-apprenticeship occupation 2 |  |  |  |
| Pre-apprenticeship occupation 3 |  |  |  |

K3. What are the **goals** of your pre-apprenticeship program(s)? (Check all that apply across all pre-apprenticeship programs.)

1. To ensure that apprenticeship applicants have basic occupational skills
2. To serve as a recruitment source for the apprenticeship program
3. To strengthen pipeline of high school graduates into an apprenticeship program
4. To assess the skill levels of future applicants to the apprenticeship program
5. To make registered apprenticeship more accessible to youth
6. To strengthen an existing work-based learning program by linking it to registered apprenticeship
7. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

K4. How do individuals **apply** for pre-apprenticeship program(s) sponsored under your grant**?** (Check all that apply across all pre-apprenticeship programs.)

1. Fill out an application
2. Recommendation by a teacher or counselor
3. Interview
4. Other (Please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

K5. Are individual applicants to the pre-apprenticeship program(s) sponsored under your grant required to undergo any of the following **screenings**? (Check all that apply across all pre-apprenticeship programs.)

1. Background check for felonies
2. Background check for misdemeanors
3. Drug screening
4. Physical or other medical exam
5. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

K6. Are individual applicants to the pre-apprenticeship program(s) sponsored by your grant required to undergo any of the following **assessments**? (Check all that apply across all pre-apprenticeship programs.)

1. Basic academic skills
2. Learning styles
3. Career aptitudes
4. Career interests
5. English language proficiency
6. Support service needs
7. Job-readiness or “soft skills” (e.g., problem solving, appropriate workplace behavior)
8. Life skills (e.g., time management, personal hygiene)
9. Coping skills
10. Social skills (e.g., interpersonal skills)
11. Motivation
12. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

K7. On average, what is the **duration** in weeks of the pre-apprenticeship program(s)? \_\_\_\_\_weeks

K8. On average, how many classroom hours, including lab time, does pre-apprenticeship training include per week?

\_\_\_\_\_hours

K9. On average, how many **lab hours** are included in the pre-apprenticeship training per week?

(Enter “0” if there is no lab.)

\_\_\_\_\_hours

K10. What does the pre-apprenticeship **curriculum**(la) include? (Check all that apply across all pre-apprenticeship programs.)

1. Orientation or introduction to an industry/occupation
2. Approved training curriculum approved by industry standards

Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Occupational skills
2. Financial literacy training
3. Professional/employability skills training

Please specify topics covered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Basic computer skills training
2. Basic math skills
3. Advanced math skills
4. Basic reading skills
5. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

K11. Do pre-apprentices receive **certificates** for completing or progressing through the program(s)?

1. Yes
2. No
3. It varies by program

K12. What methods do you use to help pre-apprentices **transition to an apprenticeship**?

(Check all that apply.)

1. Formal relationship with labor union
2. Selection of the strongest candidates for grantee-funded apprenticeship program
3. Formal relationship with employers
4. Pre-apprentices who successfully complete the program are automatically offered an apprenticeship slot
5. Pre-apprenticeship training is part of a career pathway leading to middle and high-wage occupations
6. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

K13. Does the pre-apprenticeship program(s) expect to **place all graduates** in apprenticeship slots?

1. Yes (Skip to K15)
2. No

K14. If you do not expect to place all graduates in apprenticeship slots, **why not**? (Check all that apply.)

1. Not enough apprenticeship slots
2. Pre-apprentices elected to pursue post-secondary education
3. Pre-apprentices elected to pursue a different type of work-based training program
4. Pre-apprentice decided to pursue a different occupation
5. Pre-apprentices found work
6. Some pre-apprentices disengage from the program
7. Some pre-apprentices do not meet industry requirements
8. Other

K15. Does your program offer any **support services** for pre-apprentices?

1. Yes
2. No (skip to Section K18)

K16. Which types of **personal supports** do you make available to pre-apprentices under the grant? (Check all that apply.)

|  |  |  |
| --- | --- | --- |
| Service | Provided by grantee | Provided by a partner  |
| a) Transportation |  |  |
| b) Childcare |  |  |
| c) Dependent care |  |  |
| d) Housing assistance |  |  |
| e) Needs-related payments that help an individual participate in grant activities |  |  |
| f) Other (please specify) |  |  |

K17. Which types of **supports** do you make available to pre-apprentices to participate in education and training activities under the grant? (Check all that apply.)

|  |  |  |
| --- | --- | --- |
| Service | Provided by grantee | Provided by a partner  |
| a) Academic advising/counseling |  |  |
| b) Tutoring |  |  |
| c) Tuition assistance |  |  |
| d) Basic skills instruction |  |  |
| e) Career counseling/coaching |  |  |
| f) Other (specify) |  |  |

K18. Is there **a case manager, counselor, or coach** assigned to work one-on-one with pre-apprentices to support them throughout the program?

1. Yes, provided by the grantee
2. Yes, provided by a partner
3. No (Skip to L)

K19. What are the **responsibilities of** **a case manager, counselor, or coach** assigned to work one-on-one with each apprentice to support them throughout the program with pre-apprentices?

(Check all that apply.)

1. Pre-apprenticeship monitoring and case management
2. Career counseling
3. Financial counseling
4. Apprentice’s satisfaction with employer
5. Personal counseling
6. Referrals to services in the community
7. Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**L. Sustainability and Lessons Learned**

L1. Do you anticipate that the **apprenticeship programs** established with grant funds will continue when your grant ends? Skip to L3 if answer a) or d).

1. All apprenticeship programs will likely continue
2. Some, but not all apprenticeship programs will likely continue
3. None of the apprenticeship programs will likely continue
4. Unsure

L2. If some or none of your apprenticeship programs are likely to continue, what are **the reasons**? (Check all that apply.)

1. Lack of funding to support the programs
2. Lack of interest/willingness of employers to continue apprenticeship programs
3. Lack of interest among populations targeted by apprenticeship programs
4. Other: (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Unsure

L3. Do you anticipate that the **pre-apprenticeship programs** established with grant funds will continue when your grant ends? [Note: for Scaling Grantees only.]

1. All pre-apprenticeship programs will likely continue
2. Some, but not all pre-apprenticeship programs will likely continue
3. None of the pre-apprenticeship programs will likely continue
4. Unsure
5. Grant funds did not support pre-apprenticeship programs.

L4. If some or none of your pre-apprenticeship programs are likely to continue, what are **the reasons**? (Check all that apply.) [Note: for Scaling Grantees only]

1. Lack of funding to support the programs
2. Lack of interest/willingness of employers to continue pre-apprenticeship programs
3. Lack of interest among population targeted for pre-apprenticeship programs
4. Other: (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Unsure

L5. Have you developed a **sustainability plan** for the apprenticeship programs implemented under the grant?

1. Yes
2. Not yet, but plan to develop sustainability plan [Skip to L7]
3. No, and no plans to develop sustainability plan [Skip to L7]
4. Unsure

L6. Do you feel that **your sustainability plan (including partnership commitments and resources from other sources) are sufficient** to sustain your grant activities after the completion of the grant?

1. Yes
2. No
3. Unsure

L7. Which **partnerships** with the following partners will be sustained after the grant period? (Check all that apply.)

1. Postsecondary institutions
2. Other education and training providers
3. Employers
4. Industry associations
5. Unions
6. State Apprenticeship Agency
7. CBOs/FBOs
8. Secondary schools/K-12 school districts
9. American Job Centers
10. Local workforce development boards
11. Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Allow up to 5 additional partner types]

L8. To date, what do you consider to be your **three most important accomplishments** under the grant? [open-ended box]

1. Accomplishment #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Accomplishment #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Accomplishment #3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

L8. To date, what do you consider to be your **three biggest challenges** under the grant? [open-ended box]

1. Challenge #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Challenge #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Challenge #3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

L9. To date, what do you believe to be the **main lessons learned** from your grant for apprenticeship/pre-apprenticeship program design and operations? [open-ended box]

1. Lesson #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Lesson #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Lesson #3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

L10. Please feel free to add anything else you want to mention in the box below. [open-ended box]

Thank you for taking the time to complete this survey. We appreciate your time!