

OMB Control No. 1205-0NEV
Expiration Date: XX/XX/XXX

DATA ELEMENT NO.
B-100
B-101
B-102
B-103
B-104
B-105
B-106
B-107
B-108
B-109
B-110
B-111
B-112
B-113
B-114
B-115
B-116
B-117
B-118
B-119
B-120
B-121

B-122
B-123
B-124
B-125
B-126
B-127
B-128
B-129
B-130
B-131

B-132
B-133
B-134
B-135
B-136
B-137
B-138
B-139
B-140
B-141
B-142
B-143
B-144
B-145
B-146
B-147
B-148
B-149

B-150
B-151
B-152
B-153
B-154
B-155
B-156
B-157
B-158
B - 200
B - 201
B - 202
B - 203
B - 204
B - 205
B - 206
B - 207
B - 208

B - 209
B - 210
B - 211
B - 212
B - 213
B - 214
B - 215
B - 216
B - 217
B - 218
B - 219

B - 220
B - 221
B - 222
B - 300
B - 301
B - 302
B - 303
B - 304
B - 305
B - 306
B - 307
B - 308

B - 309
B - 310
B - 311
B - 312
B - 313
B - 314
B - 315
B - 316
B - 317
B - 318
B - 319
B - 320
B - 321
B - 322

B - 323
B - 324
B - 325
B - 326
B - 327
B - 328
B - 329
B - 330
B - 331
B - 332
B - 333
B- 400
B- 401

B- 402
B- 403
B- 404
B - 500
B - 501
B - 502
B - 503
B - 600

B - 601
B - 700
B - 701
B - 702
B - 703
B - 704
B - 705
B - 706
B - 707
B - 708
B - 709
B - 710
B - 711

B - 712
B - 713
B - 714
B - 715
B - 716
B - 717
B - 718
B - 719
B - 720
B - 721
B - 722
B - 723
B - 724
B - 725
B - 726
B - 727
B - 728
B - 729
B - 730
B - 731
B - 732

B - 733
B - 734
B - 735
B - 736
B - 737
B - 738
B - 739
B - 740
B - 741
B - 742

B - 743
B - 744
B - 800
B - 801
B - 802
B - 803
B - 804

B - 805

B - 806

B - 807

B - 808

B - 809

B - 810

B - 811

B - 812

B - 813

B - 814

B - 815

B - 816

B - 817

B- 900

B- 901
B- 902
B- 903
B- 904
B- 905
B- 906
B- 907
B- 908
B- 909
B- 910
B- 911

B - 1000
B - 1001
B - 1002
B - 1003
B - 1004
B - 1005
B - 1006
B - 1007
B - 1008

✓

DATA ELEMENT NAME
PROGRAM SPONSOR INFORMATION
Employer Identification Number
Program Number
Sponsor Name
Program Registration Status
Doing Business As (DBA)
Sponsor Address - Line 1
Sponsor Address - Line 2
Sponsor Address - City
Sponsor Address - State
Sponsor Address - Zip Code
Sponsor Address - County
Sponsor Website
Sponsor Telephone Number
Sponsor Cell Phone Number
Sponsor Email Address
Sponsor Relevant Recruitment Area
Sponsor Point of Contact - Last Name
Sponsor Point of Contact - First Name
Sponsor Point of Contact - Middle Initial
Sponsor Point of Contact - Title
Sponsor Point of Contact's Address - Line 1
Sponsor Point of Contact's Address - Line 2

Sponsor Point of Contact's - City
Sponsor Point of Contact's - State
Sponsor Point of Contact's - Zip Code
Sponsor Point of Contact's - County
Sponsor Point of Contact's Telephone Number
Sponsor Point of Contact's Cell Phone Number
Sponsor Point of Contact's Email Address
Sponsor Type
Sponsor NAICS (Industry) Code
Perkins Eligible Recipient/Institution

Perkins Eligible Recipient/Institution - Designated Intermediary
Registration Agency Name
State CTE Agency Name
Collective Bargaining Agreement - Status
Collective Bargaining Agreement - Name
Collective Bargaining Agreement - Union Waivers
Incarcerated Individuals Program
Program Outcome Description
OJT Employment Description
Competency Attainment Measurement
Advanced Standing Status
Advanced Standing Verification
Complaint Contact - Last Name
Complaint Contact - First Name
Complaint Contact - Middle Initial
Complaint Contact - Title
Complaint Contact - Address - Line 1
Complaint Contact - Address - Line 2

Complaint Contact - Address - City
Complaint Contact - State
Complaint Contact - Zip Code
Complaint Contact - Phone Number
Complaint Contact - Cell Phone Number
Complaint Contact - Email Address
Program Initial Application Date
Program Registration Date
Date of Most Recent Revision to Program's Standards
INDUSTRY SKILLS FRAMEWORK AND CTE APPRENTICE EMPLOYMENT AND PROGRAM INFORMATION
CTE Apprentice Job Title
CTE Apprentice Job Title O*NET Code
Term Length - CTE Apprenticeship RI
Term Length - OJT
Probationary Period
On-The-Job Training Outline
Industry Skills Framework Name
Industry Skills Framework Certification Number
ISF RAPIDS Code

ISF NAICS (Industry) Code
Ratio - CTE Apprentices
Ratio - Journeyworkers
Number of Journeyworkers Employed
Unreimbursed Costs
Unreimbursed Costs - Detail
Advance Standing Process Description
Advance Standing Wage Progression
Instructor and Trainer Qualifications
Health and Safety Trainings
Health and Safety Trainings - Narrative

Hours When OJT is Conducted
Wages Paid During CTE Apprenticeship-Related Instruction
Hours When CTE Apprenticeship-Related Instruction is Provided
RELATED INSTRUCTION INFORMATION
Primary - CTE Apprenticeship-Related Instruction Provider Name
Primary - CTE Apprenticeship-Related Instruction Provider Address - Line 1
Primary - CTE Apprenticeship-Related Instruction Provider Address - Line 2
Primary - CTE Apprenticeship-Related Instruction Provider Address - City
Primary - CTE Apprenticeship-Related Instruction Provider Address - State
Primary - CTE Apprenticeship-Related Instruction Provider Address - Zip Code
Primary - CTE Apprenticeship-Related Instruction Provider Website
Primary - Name of State-approved CTE Program
Primary - Postsecondary Credit Hours Awarded

Primary - CTE Apprenticeship-Related Instruction - Instruction Method
Primary - CTE Apprenticeship-Related Instruction Provider Type
Primary - CTE Apprenticeship-Related Instruction Length
Primary - CTE Apprenticeship-Related Instruction Outline Plan
Secondary - Contact Person First Name
Secondary - Contact Person Last Name
Secondary - Contact Person Telephone Number
Secondary - Contact Person Email Address
Secondary - CTE Apprenticeship-Related Instruction Provider Name
Secondary - CTE Apprenticeship-Related Instruction Provider Address - Line 1
Secondary - CTE Apprenticeship-Related Instruction Provider Address - Line 2
Secondary - CTE Apprenticeship-Related Instruction Provider Address - City
Secondary - CTE Apprenticeship-Related Instruction Provider Address - State
Secondary - CTE Apprenticeship-Related Instruction Provider Address - Zip Code

Secondary - CTE Apprenticeship-Related Instruction Provider Website
Secondary - Name of State-approved CTE Program
Secondary - Postsecondary Credit Hours Awarded
Secondary - CTE Apprenticeship-Related Instruction - Instruction Method
Secondary - CTE Apprenticeship-Related Instruction Provider Type
Secondary - CTE Apprenticeship-Related Instruction Length
Secondary - CTE Apprenticeship-Related Instruction Outline Plan
Secondary - Contact Person First Name
Secondary - Contact Person Last Name
Secondary - Contact Person Telephone Number
Secondary - Contact Person Email Address
REGISTERED APPRENTICESHIP PROGRAM PARTNERSHIP
Registered Apprenticeship Program Partnership
Registered Apprenticeship Program Partnership - Narrative

Registered Apprenticeship Advanced Standing

Registered Apprenticeship Advanced Standing - OJT Credit

Registered Apprenticeship Advanced Standing - RI Credit

INSTITUTION OF HIGHER EDUCATION PARTNERSHIP

Institution of Higher Education Partnership

Institution of Higher Education Partnership - Narrative

Institution of Higher Education Enrollment

Institution of Higher Education Credit

SUPPORTIVE SERVICE INFORMATION

Supportive Services



Supportive Services Types

PROGRESSIVE WAGE SCHEDULE INFORMATION	
---------------------------------------	--

CTE Apprentice's Entry Wage (Dollars Per Hour)
--

CTE Apprentice's Final Wage (Dollars Per Hour)

Wage Rate Duration #1

Wage Rate Competencies #1

Wage Rate #1 (Dollars Per Hour)

Wage Rate #1 (% of CTE Apprentice Final Wage)

Wage Rate Duration #2	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20
21	21
22	22
23	23
24	24
25	25
26	26
27	27
28	28
29	29
30	30
31	31
32	32
33	33
34	34
35	35
36	36
37	37
38	38
39	39
40	40
41	41
42	42
43	43
44	44
45	45
46	46
47	47
48	48
49	49
50	50
51	51
52	52
53	53
54	54
55	55
56	56
57	57
58	58
59	59
60	60
61	61
62	62
63	63
64	64
65	65
66	66
67	67
68	68
69	69
70	70
71	71
72	72
73	73
74	74
75	75
76	76
77	77
78	78
79	79
80	80
81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Wage Rate Competencies #2

Wage Rate #2 (Dollars Per Hour)	
---------------------------------	--

Wage Rate #2 (% of CTE Apprentice Final Wage)

Wage Rate Duration #3

Wage Rate Competencies #3
Wage Rate #3 (Dollars Per Hour)
Wage Rate #3 (% of CTE Apprentice Final Wage)
Wage Rate Duration #4
Wage Rate Competencies #4
Wage Rate #4 (Dollars Per Hour)
Wage Rate #4 (% of CTE Apprentice Final Wage)
Wage Rate Duration #5
Wage Rate Competencies #5
Wage Rate #5 (Dollars Per Hour)
Wage Rate #5 (% of CTE Apprentice Final Wage)
Wage Rate Duration #6
Wage Rate Competencies #6
Wage Rate #6 (Dollars Per Hour)
Wage Rate #6 (% of CTE Apprentice Final Wage)
Wage Rate Duration #7
Wage Rate Competencies #7
Wage Rate #7 (Dollars Per Hour)
Wage Rate #7 (% of CTE Apprentice Final Wage)
Wage Rate Duration #8
Wage Rate Competencies #8

Wage Rate #8 (Dollars Per Hour)
Wage Rate #8 (% of CTE Apprentice Final Wage)
Wage Rate Duration #9
Wage Rate Competencies #9
Wage Rate #9 (Dollars Per Hour)
Wage Rate #9 (% of CTE Apprentice Final Wage)
Wage Rate Duration #10
Wage Rate Competencies #10
Wage Rate #10 (Dollars Per Hour)
Wage Rate #10 (% of JCTE Apprentice Final Wage)

Fringe Benefits

Fringe Benefits - Approximate Value	
-------------------------------------	--

ACADEMIC CREDIT AND INTERIM CREDENTIALS	
---	--

High School Diploma

High School Equivalency

Postsecondary Credit Hours - Requirement
--

Postsecondary Credit Hours - Name of Entity Providing Credit	

Postsecondary Credit Hours - Total	
------------------------------------	--

Interim Credentials provided

Interim Credential #1 - Type

Interim Credential #1 - Name

Interim Credential #1 - Name of Entity Awarding Credential

Interim Credential #1 - Type of Entity Awarding Credential

Interim Credential #2 - Type

Interim Credential #2 - Name

Interim Credential #2 - Name of Entity Awarding Credential

Interim Credential #2 - Type of Entity Awarding Credential

Interim Credential #3 - Type

Interim Credential #3 - Name

Interim Credential #3 - Name of Entity Awarding Credential

Interim Credential #3 - Type of Entity Awarding Credential

REGISTERED CTE APPRENTICESHIP SPONSOR PROGRAM REGISTRATION WRITTEN PLAN
--

Written Plan - Equity

Written Plan - Industry Skills Framework
Written Plan - Credit Hours
Written Plan - Safety
Written Plan - Career and Supportive Services
Written Plan - Oversight
Written Plan - EEO Implementation
Written Plan - EEO POC
Written Plan - EEO Pledge
Written Plan - EEO Orientation
Written Plan - EEO Recruitment Source
Written Plan - EEO Anti- Harassment
PROGRAM ELIGIBILITY AND SELECTION PROCEDURES

Selection Procedures
Selection Procedure - Description
Selection Procedures - Veterans Preference
Selection Procedures - Veterans Preference Description
Minimum Eligibility Requirements - Age
Minimum Eligibility Requirements - Education
Minimum Eligibility Requirements - Physical
Minimum Eligibility Requirements - Aptitude Tests
Minimum Eligibility Requirements - Other
Program Application Approval Questions

DATA TYPE/ FIELD LENGTH KEY:

This column is composed of two parts: (1) the data type, which is represented by a two letter code, and (2) a number, which represents the maximum length of a response for that element. This means that an "IN 1" element with 4 options (1,2,3,4) can only report one of those 4 options, but an "IN 4" element with 4 options can report any combination of those 4 (e.g. 124, 13, 4, etc).

Data Type Codes:

AN = AlphaNumeric, aka numbers and letters allowed, sometimes called a text field

IN = Integer, only whole numbers allowed

DT = Date, typically dates are best reported yyyyymmdd to simplify sorting/ordering

DE = Decimal floating point, used for numeric values where a decimal point is needed, such as a wage/earnings value

DATA TYPE/ FIELD LENGTH
IN 9
AN 13
AN 25
IN 1
AN 25
AN 50
AN 10
AN 25
AN 2
IN 5
IN 3
AN 200
AN 55
AN 55
AN 20
AN 2500
AN 20
AN 20
AN 1
AN 20
AN 50
AN 10

AN 25
AN 2
IN 5
IN 3
AN 55
AN 55
AN 20
IN 7
IN 6
IN 1

IN 2
AN 100
AN 100
IN 1
AN 25
IN 1
IN 1
AN 3000
AN 3000
AN 3000
IN 1
AN 2500
AN 20
AN 20
AN 1
AN 20
AN 50
AN 10

AN 25
AN 2
IN 5
AN 55
AN 55
AN 20
DT 8
DT 8
DT 8
N
AN 100
IN 8
IN 5
IN 5
IN 5
IN 1
AN 255
AN 255
IN 11

IN 6
IN 2
IN 2
IN 5
IN 1
AN 3000
AN 3000
IN 1
IN 1
IN 1
AN 3000

IN 5
DE 9.2
IN 3
AN 25
AN 50
AN 10
AN 25
AN 2
IN 5
AN 200
AN 255
IN 3

IN 3
IN 5
IN 5
IN 1
AN 20
AN 20
IN 9
AN 20
AN 25
AN 50
AN 10
AN 25
AN 2
IN 5

AN 255
IN 3
IN 3
IN 5
IN 5
IN 1
AN 20
AN 20
AN 55
AN 20
IN 1
AN 3000

IN 1
IN 3
IN 3
IN 1
AN 3000
IN 1
IN 3
IN 2

IN 6
IN 1
DE 6.2
DE 6.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4

IN 2
DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4
IN 2

DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2
IN 4
IN 2
DE 6.2
DE 4.2

IN 7
DE 6.2
IN 1
IN 1
IN 1
AN 25
IN 4

IN 1
IN 1
AN 25
AN 25
IN 1
IN 1
AN 25
AN 25

IN 1
IN 1
AN 25
AN 25
IN 1
AN 5000

AN 5000
AN 5000
AN 5000
AN 5000
AN 5000
AN 5000
AN 5000
AN 5001
AN 5002
AN 5003
AN 5004
AN 5005

IN 1
AN 3000
IN 1
AN 3000
IN 2
AN 1000
AN 1000
AN 1000
AN 1000

DATA ELEMENT DEFINITIONS/INSTRUCTIONS
For any sponsor that is also an employer, record the Federal Employer Identification Number of the Sponsor.
Record the Program Number assigned by the Registration Agency.
Record the name of the program's sponsor.
Record the current registration status of the program. Record 1 if the program was active during the report period. Record 2 if the program voluntarily deregistered during the report period. Record 3 if the program's registration was suspended during the report period.
If the sponsor is doing business as a name other than the name recorded as their Sponsor Name, record the name that the sponsor is doing business as.
Record the street address of the sponsor's primary location. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
Record the Apartment/Suite/Unit/Room number, if applicable.
Record the city of the sponsor's primary location.
Record the 2 letter USPS state code for the state of the sponsor's primary location.
Report the 5-digit zip code of the sponsor's primary location. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
Report the 3-digit FIPS code of the county of the sponsor's primary location.
Record the URL of the sponsor's website.
Record the sponsor's primary telephone contact number, including extensions if applicable.
Record the sponsor's cellphone contact number, if different from the Sponsor Telephone Number.
Record the sponsor's primary email address contact.
Record a description of the sponsor's relevant recruitment area for the program.
Record the last name of the Sponsor's designated point of contact.
Record the first name of the Sponsor's designated point of contact.
Record the middle initial of the Sponsor's designated point of contact.
Record the title of the Sponsor's designated point of contact.
If different from the sponsor's primary location, record the street address of the sponsor's point of contact's address. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
If different from the sponsor's primary location, record the sponsor's point of contact's Apartment/Suite/Unit/Room number, if applicable.

If different from the sponsor's primary location, record the city of the the sponsor's point of contact's address.
If different from the sponsor's primary location, record the 2 letter USPS state code for the state of the sponsor's point of contact's address.
If different from the sponsor's primary location, report the 5-digit zip code of the sponsor's point of contact's address.
Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
If different from the sponsor's primary location, report the 3-digit FIPS code of the county the sponsor's point of contact's address.
If different from the sponsor's telephone number, record the sponsor's point of contact's telephone number, including extensions if applicable.
Record the sponsor point of contact's cellphone number, if different from the Sponsor Point of Contact's Telephone Number.
Record the sponsor point of contact's email address.
Record the sponsor's applicable types of organizations: Record 1 if the sponsor is an Institution of Higher Education - Community College. Institution of Higher Education means the term given in sec. 101(a) of the Higher Education Act of 1965 (https://www.law.cornell.edu/uscode/text/20/1001). Record 2 if the sponsor is an Institution of Higher Education - 4-Year Degree Granting Institution. Institution of Higher Education means the term given in sec. 101(a) of the Higher Education Act of 1965 (https://www.law.cornell.edu/uscode/text/20/1001). REcord 3 if the sponsor is an intermediary. Record 4 if the sponsor is a Local Education Agency. Record 5 if the sponsor is a State CTE Agency Record 6 if the sponsor is a State Educational Agency. Record 7 if the sponsor is a type other than those provided above.
Record the North American Industry Classification System (NAICS) Code associated with the sponsor. The NAICS Code means the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. For more information on NAICS, please go to the following website: https://www.census.gov/naics/ .
Record 1 if the program sponsor is a Perkin's eligible recipient or institution. Record 0 if the program sponsor is not a Perkin's eligible recipient or institutuion.

Record 1 if the sponsor has been designated by a Perkins eligible recipient or institution, State CTE Agency, or State Educational Agency as an intermediary. Record 2 if the sponsor has not been designated by a Perkins eligible recipient or institution, State CTE Agency, or State Educational Agency as an intermediary. Record 0 if the sponsor is a Perkins eligible recipient or institution.
Record the name of Registration Agency that will review the program registration for approval.
Record the name of the State CTE Agency that approved the CTE Program included in the CTE apprenticeship-related instruction.
Record 1 if the program is covered by a Collective Bargaining Agreement. Record 0 if the program is not covered by a Collective Bargaining Agreement.
If the program is covered by a Collective Bargaining Agreement, record the name of the agreement.
Record 1 if the union waives any privileges under this program in instances where: (1) a program is registered by an employer or employers' association, (2) a collective bargaining agreement exists, and (3) the union elects not to participate in the operation of substantive matters of the apprenticeship program. Record 2 if the union does not waive any privileges under this program in instances where (1) a program is registered by an employer or employers' association, (2) a collective bargaining agreement exists, and (3) the union elects not to participate in the operation of substantive matters of the apprenticeship program. Record 0 if the program does not have a Collective Bargaining Agreement.
Record 1 if the program allows incarcerated individuals to be CTE apprentices. Record 0 if the program does not allow incarcerated individuals to be CTE apprentices.
Describe how completion of the program will result in CTE apprentices' selection into an apprenticeship program registered under 29 CFR Part 29 subpart A (including any advanced standing granted), enrollment in a postsecondary educational program, or employment.
Describe the employment in which CTE apprentices will be employed in on-the-job training.
Provide a description of the methods used during the course of the registered CTE apprenticeship program to measure progress on competency attainment
Record 1 if the program provides advanced standing to CTE apprentices with previous education or experience. Record 0 if the program does not provide advanced standing to apprenticeship with previous education or experience.
Describe how the program verifies credit for advanced standing
Record the last name of the Sponsor's complaint contact.
Record the first name of the Sponsor's complaint contact.
Record the middle initial of the Sponsor's complaint contact.
Record the title of the Sponsor's complaint contact.
Record the street address of the sponsor's complaint contact's address.
Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
Record the sponsor's complaint contact's Apartment/Suite/Unit/Room number, if applicable.

Record the city of the the sponsor's complaint contact's address.
Record the 2 letter USPS state code for the state of the sponsor's complaint contact's address.
Report the 5-digit zip code of the sponsor's complaint contact's address. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
Record the sponsor's complaint contact's telephone number, including extensions if applicable.
Record the sponsor's complaint contact's cellphone number, if different from the sponsorcomplaint contact's telephone number.
Record the sponsor complaint contact's email address.
Record the date on which the program initially submitted a complete application.
Record the date on which the program was registered.
Record the most recent date on which the program's standards were revised. If the standards have not been revised since the first registration date, leave this element blank.
Report the CTE apprentice's job title, based off the description of the CTE apprentice's on-the-job training employment.
Record the 8-digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that best describes the occupation associated with the program. Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits.
Record the number of hours of CTE-apprenticeship related instruction that will be provided to the CTE apprentice prior to completion of the program.
Record the number of hours of on-the-job training that will be provided to the CTE apprentice prior to completion of the program.
Record the number of hours of on-the-job training that the apprentice will serve as the CTE apprentice's probationary period. Note: the probationary period cannot exceed 25 percent of the term length of the program, or one (1) year, whichever is shorter.
Record 1 if there is an OJT outline aligned to an approved Industry Skills Framework for the program. This OJT outline must be shared in a separate attachment. Record 0 if there is not an OJT outline aligned to an approved Industry Skills Framework for the program. Sponsors without an OJT outline aligned to an approved Industry Skills Framework must work with the Registration Agency to develop a work process schedule.
Record the name of the approved Industry Skills Framework.
Record the Industry Skills Framework certification number.
Record the Occupation RAPIDS code for the occupation associated with the program.

Record the North American Industry Classification System (NAICS) Code associated with the Industry Skills Framework. The NAICS Code means the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. For more information on NAICS, please go to the following website: <https://www.census.gov/naics/>.

Record the number of CTE apprentices in the CTE Apprentice to Journeyworker Ratio.

Record the number of journeyworkers in the CTE Apprentice to Journeyworker Ratio.

Record the number of Journeyworkers currently employed as of the end of the report period.

Record 1 if the sponsor charges any unreimbursed costs, fees, and expenses to CTE apprentices.

Record 0 if the sponsor does not charge any unreimbursed costs, fees, and expenses to apprentices.

If the sponsor charges unreimbursed costs, fees, or expenses, report a description of each cost and the approximate amount for each.

Describe the process by which the sponsor will reduce the usual term of on-the-job training or CTE apprenticeship-related instruction as a result of a registered CTE apprentice's prior learning, training, or acquired experience, or as a result of accelerated progress in the attainment of occupational competencies that is made by an apprentice during their participation in the registered CTE apprenticeship program. Such process must be fair, transparent, and equitable in objectively identifying, assessing, and documenting a CTE apprentice's prior learning, training, acquired experience, or accelerated progress.

Record 1 if the the sponsor provides an increased wage for a CTE apprentice that is commensurate with any progression granted by the sponsor.

Record 0 if the sponsor does not provide an increased wage for a CTE apprentice that is commensurate with any progression granted by the sponsor

Record 1 if the sponsor has provided documentation showing that the qualification and experience of the trainings and instructors that provide on-the-job trainings and CTE apprenticeship-related instruction to CTE apprentices satisfies the requirements described in 29 CFR § 29.12 and § 29.8(a)(7).

Record 0 if the sponsor has not provided the documentation described above.

Record 1 if the program provides industry-recognized health or safety trainings to CTE apprentices during the program.

Record 0 if the program does not provide industry-recognized health or safety trainings to CTE apprentices during the program.

If the program provides industry-recognized health or safety trainings to CTE apprentices during the program, list the names of those trainings.

Record all of the allotment of hours types when the OJT component of the registered CTE apprenticeship program is to be conducted.

Record 1 if OJT is conducted during the day.

Record 2 if OJT is conducted during the night.

Record 3 if OJT is conducted during the weekends.

Record 4 if OJT is conducted during the summer.

Record 5 if OJT is conducted during school hours.

For programs with more than one allotment of hours type applies, please provide all applicable in this field. For example, if both "nights" and "weekends" apply, record "23"

Record the total amount of wages paid during the CTE apprenticeship-related instruction. If wages are not paid during CTE apprenticeship-related instruction, report "000000.00"

Record 1 if CTE Apprenticeship-Related Instruction is provided only during work hours.

Record 2 if CTE Apprenticeship-Related Instruction is provided only outside of work hours.

Record 3 if CTE Apprenticeship-Related Instruction is provided both during and outside of work hours.

Record the name of the primary CTE apprenticeship-related instruction provider.

Record the street address of the Primary CTE Apprenticeship-Related Instruction Provider's primary location.

Please verify the address and zip code using the USPS address validation system:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Record the Apartment/Suite/Unit/Room number of the CTE Apprenticeship-Related Instruction Provider's primary location, if applicable.

Record the city of the CTE Apprenticeship-Related Instruction Provider's primary location.

Record the 2 letter USPS state code for the state of the CTE Apprenticeship-Related Instruction Provider's primary location.

Report the 5-digit zip code of the CTE Apprenticeship-Related Instruction Provider's primary location

Please verify the address and zip code using the USPS address validation system:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Record the URL of the CTE Apprenticeship-Related Instruction Provider's website.

Record the name of the State-approved CTE Program.

Record the number of postsecondary credit hours the CTE Apprenticeship-related instruction provider will award toward the required 12 postsecondary credit hours.

Indicate the instruction method of the CTE Apprenticeship-Related Instruction:

Record 1 for Classroom/In-person

Record 2 for Correspondence

Record 3 for Virtual/Web-based

For programs with more than one CTE apprenticeship-related instruction method, please report all that apply in this field. For example, if both "Classroom/In-person" and "Virtual/Web-based" apply, record "13"

Indicate the provider type for the CTE Apprenticeship-Related Instruction:

Record 1 if the provider is the program sponsor.

Record 2 if the provider is a community college.

Record 3 if the provider is a technical school.

Record 4 if the provider is a vocational school.

Record 5 if the provider is a 4-year degree granting institution

Record 6 if the provider is a type other than those provided above.

For programs with where more than one provider type applies, please provide all applicable in this field. For example, if both "program sponsor" and "technical school" apply, record "13"

Record the number of hours required to complete the program.

Record 1 if there is an established CTE apprenticeship-related instruction outline. These outlines must be provided in a separate attachment.

Record 0 if there is not an established CTE apprenticeship-related instruction outline.

Sponsors must work with the Registration Agency to develop an outline/plan.

Record the first name of the Sponsor's complaint contact.

Record the last name of the Sponsor's complaint contact.

Record the sponsor's complaint contact's telephone number.

Record the sponsor complaint contact's email address.

Record the name of the primary CTE apprenticeship-related instruction provider.

Record the street address of the Primary CTE Apprenticeship-Related Instruction Provider's primary location.

Please verify the address and zip code using the USPS address validation system:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Record the Apartment/Suite/Unit/Room number of the CTE Apprenticeship-Related Instruction Provider's primary location, if applicable.

Record the city of the of the CTE Apprenticeship-Related Instruction Provider's primary location.

Record the 2 letter USPS state code for the state of the of the CTE Apprenticeship-Related Instruction Provider's primary location.

Report the 5-digit zip code of the CTE Apprenticeship-Related Instruction Provider's primary location

Please verify the address and zip code using the USPS address validation system:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Record the URL of the CTE Apprenticeship-Related Instruction Provider's website.
Record the name of the State-approved CTE Program. Leave blank if the State-approved CTE Program does not apply to the secondary CTE apprenticeship-related instruction provider.
Record the number of postsecondary credit hours the CTE Apprenticeship-related instruction provider will award toward the required 12 postsecondary credit hours.
Indicate the instruction method of the CTE Apprenticeship-Related Instruction: Record 1 for Classroom/In-person Record 2 for Correspondence Record 3 for Virtual/Web-based For programs with more than one CTE apprenticeship-related instruction method, please report all that apply in this field. For example, if both "Classroom/In-person" and "Virtual/Web-based" apply, record "13"
Indicate the provider type for the CTE Apprenticeship-Related Instruction: Record 1 if the provider is the program sponsor. Record 2 if the provider is a community college. Record 3 if the provider is a technical school. Record 4 if the provider is a vocational school. Record 5 if the provider is a 4-year degree granting institution. Record 6 if the provider is a type other than those provided above. For programs with where more than one provider type applies, please provide all applicable in this field. For example, if both "program sponsor" and "technical school" apply, record "13"
Record the number of hours required to complete the program.
Record 1 if there is an established CTE apprenticeship-related instruction outline. These outlines must be provided in a separate attachment. Record 0 if there is not an established CTE apprenticeship-related instruction outline. Sponsors must work with the Registration Agency to develop an outline/plan.
Record the first name of the Sponsor's complaint contact.
Record the last name of the Sponsor's complaint contact.
Record the sponsor's complaint contact's telephone number.
Record the sponsor complaint contact's email address.
Record 1 if the program has a documented partnership with any with a registered apprenticeship program under subpart A for the placement of apprentices. Record 0 if the program does not have a documented partnership with any with a registered apprenticeship program under subpart A for the placement of CTE apprentices.
Record the list of the names of the registered apprenticeship program under subpart A in which the sponsor has a documented partnership for the placement of CTE apprentices. Leave blank if the program does not have a documented partnerships with any with a registered apprenticeship program under subpart A for the placement of apprentices.

Record 1 if the program awards advanced standing for completion of a registered CTE apprenticeship program for the placement of CTE apprentices.

Record 0 if the program does not award advanced standing for the completion of a registered CTE apprenticeship program for the placement of CTE apprentices.

Record the number of OJT credit hours that the program awards to CTE apprentices for completion of the registered CTE apprenticeship program. Leave blank if the program does not have a documented partnership with a with a registered apprenticeship program under subpart A.

Record the number of Related Instruction credit hours that the program awards to CTE apprentices for completion of a registered CTE apprenticeship program. Leave blank if the program does not have a documented partnership with a with a registered apprenticeship program under subpart A.

Record 1 if the program has a documented partnership with any institutions of higher education to facilitate the enrollment of CTE apprentices in a credit-bearing program. Record 0 if the program does not have a documented partnership with any institution of higher education to facilitate the enrollment of CTE apprentices in a credit-bearing program.

Record the list of the names of the instituions of higher education in which the sponsor has a documented partnership for the enrollment of CTE apprentices. Leave blank if the program does not have a documented partnership with any institutions of higher education to facilitate the enrollment of CTE apprentices in a credit-bearing program leave this blank.

Record 1 if any of the listed institutions of higher education award credit that counts toward a culminating postsecondary recognized credential, including a degree, for the completion of a registered CTE apprenticeship program?

Record 0 if none of the listed institutions of higher education award credit that counts toward a culminating postsecondary recognized credential, including a degree, for the completion of a registered CTE apprenticeship program.

Record the number of credit hours that count toward a culminating degree awarded to the CTE apprentice for completion of the registered CTE apprenticeship program. Leave blank if the program does not have a documented partnership with any instituion of higher education or if none of the listed instituions of higher education award credit to a CTE apprentice for completing a registered CTE apprenticeship program.

Record 1 if the program provides CTE apprentices access to supportive services provided by the sponsor during the program.

Record 2 if the program provides CTE apprentices access to supportive services provided only by someone other than the sponsor during the program.

Record 0 if the program does not provide CTE apprentices access to supportive services during the program.

Record all of the types of supportive services provided, whether funded directly by the program or another source.

Record 1 if Transportation assistance is provided.

Record 2 if Housing assistance is provided.

Record 3 if Tools, Supplies, or Uniforms assistance is provided.

Record 4 if Child/Dependent Care assistance is provided

Record 5 if Needs Related Payments are provided.

Record 6 if supportive services other than those listed above are provided.

Record 0 if supportive services are not provided.

For programs with where more than one supportive service type applies, please provide all applicable in this field. For example, if both "transportation" and "housing" apply, record "12"

Record 1 if the wage rates for all wage progressions are expressed as a percentage (%) of the CTE apprentice's final wage.

Record 2 if the wage rates for all wage progressions are expressed in dollars (\$) per hour.

Record 3 if the wage rates for all wage progressions are expressed as a percentage (%) of the CTE apprentice's Final Wage or in dollars (\$) per hour, depending on which wage progression the CTE Apprentice is in.

Record the number associated with the CTE apprentice's entry wage rate for this program, expressed in dollars per hour .

Record the number associated with the CTE apprentice's final wage rate for this program, expressed in dollars per hour .

Record the duration in number of hours that wage rate #1 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #1.

If wage progression #1 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #1 for this program.

If wage progression #1 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #1 for this program.

Record the duration in number of hours that wage rate #2 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #2.

If wage progression #2 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #2 for this program.

If wage progression #2 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #2 for this program.

Record the duration in number of hours that wage rate #3 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #3.
If wage progression #3 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #3 for this program.
If wage progression #3 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #3 for this program.
Record the duration in number of hours that wage rate #4 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #4.
If wage progression #4 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #4 for this program.
If wage progression #4 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #4 for this program.
Record the duration in number of hours that wage rate #5 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #5.
If wage progression #5 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #5 for this program.
If wage progression #5 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #5 for this program.
Record the duration in number of hours that wage rate #6 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #6.
If wage progression #6 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #6 for this program.
If wage progression #6 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #6 for this program.
Record the duration in number of hours that wage rate #7 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #7.
If wage progression #7 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #7 for this program.
If wage progression #7 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #7 for this program.
Record the duration in number of hours that wage rate #8 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #8.

If wage progression #8 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #8 for this program.

If wage progression #8 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #8 for this program.

Record the duration in number of hours that wage rate #9 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #9.

If wage progression #9 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #9 for this program.

If wage progression #9 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #9 for this program.

Record the duration in number of hours that wage rate #10 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #10.

If wage progression #10 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #10 for this program.

If wage progression #10 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #10 for this program.

If the sponsor or any participating employer provides fringe benefits to CTE apprentices, record all of the types of benefits that apply:

Record 1 if the sponsor or any participating employer provides Health Insurance Contributions.

Record 2 if the sponsor or any participating employer provides Life Insurance.

Record 3 if the sponsor or any participating employer provides Pension/Retirement Contributions.

Record 4 if the sponsor or any participating employer provides paid vacation days.

Record 5 if the sponsor or any participating employer provides paid sick leave.

Record 6 if the sponsor or any participating employer provides paid holidays.

Record 7 if the sponsor or any participating employer provides other "bona fide" fringe benefits.

Record 0 if the sponsor or any participating employer does not provide fringe benefits.

If the sponsor or any participating employer provides more than one applicable type fringe benefit, please provide all applicable in this field. For example, if both "paid sick leave" and "paid holiday" apply, record "56"

Fringe Benefits refers to contributions irrevocably made to a trustee or third party pursuant to a bona fide fringe benefit fund plan or program; and/or the rate of costs incurred in providing bona fide fringe benefits pursuant to an enforceable commitment to carry out a financially responsible plan or program and communicated to the CTE apprentices in writing. However, payments required by Federal, State, or local law are not fringe benefit contributions; accordingly, payments required to fund Social Security, unemployment compensation, and workers' compensation programs, as required by law, do not count as fringe benefits. For more information, visit:
<https://www.dol.gov/agencies/whd/government-contracts/construction/faq/fringe-benefits>.

If the sponsor or any participating employer provides fringe benefits, record the approximate hourly value of the fringe benefits provided.

Record 1 if program participants receive a high school diploma for participating in the registered CTE apprenticeship program.

Record 0 if program participants do not receive a high school diploma for participating in the registered CTE apprenticeship program.

Record 1 if program participants receive a high school equivalency for participating in the registered CTE apprenticeship program.

Record 0 if program participants do not receive a high school equivalency for participating in the registered CTE apprenticeship program.

Record 1 if the program provides at least 12 postsecondary credit hours.

Record 0 if the program does not provide at least 12 postsecondary credit hours.

Record the name of the entity awarding the postsecondary credit hours provided through this program. Leave blank if this does not apply.

Record the total number of postsecondary credit hours awarded for completing this program.

Record 1 if there are interim credentials awarded at any point during and as a result of participation in this program.
Record 0 if there are no interim credentials awarded during and as a result of participation in this program.

Indicate the type of interim credential awarded :

Record 1 for industry recognized certificate.
Record 2 for industry certification.
Record 3 for license recognized by local, State or Federal Government.
Record 4 for Associate's Degree.
Record 5 for Bachelor's Degree.
Record 6 for Master's Degree.
Record 7 for Doctorate Degree.

Record the name of the interim credential.

Record the name of the entity awarding the credential.

If more than 1 interim credentials can be awarded, indicate the entity type that awarded the 2nd credential:

Record 1 if the entity is a secondary school.
Record 2 if the entity is a community college.
Record 3 if the entity is a technical school.
Record 4 if the entity is a vocational school.
Record 5 if the entity is a 4-year degree granting instituon.
Record 6 if the entity is a labor union.
Record 7 if the entity is a federal, state, or local government.
Record 8 if the entity is an industry association.
Record 9 if the entity is an organization other than those listed above.

If more than 1 interim credentials can be awarded, indicate the 2nd type of interim credential awarded :

Record 1 for industry recognized certificate.
Record 2 for industry certification.
Record 3 for license recognized by local, State or Federal Government.
Record 4 for Associate's Degree.
Record 5 for Bachelor's Degree.
Record 6 for Master's Degree.
Record 7 for Doctorate Degree.

If more than 1 interim credentials can be awarded, record the name of the 2nd interim credential.

If more than 1 interim credentials can be awarded, record the name of the entity awarding the 2nd credential.

If more than 1 interim credentials can be awarded, indicate the entity type that awarded the 2nd credential:

- Record 1 if the entity is a secondary school.
- Record 2 if the entity is a community college.
- Record 3 if the entity is a technical school.
- Record 4 if the entity is a vocational school.
- Record 5 if the entity is a 4-year degree granting instituion.
- Record 6 if the entity is a labor union.
- Record 7 if the entity is a federal, state, or local government.
- Record 8 if the entity is an industry association.
- Record 9 if the entity is an organization other than those listed above.

If more than 2 interim credentials can be awarded, indicate the 3rd type of interim credential awarded :

- Record 1 for industry recognized certificate.
- Record 2 for industry certification.
- Record 3 for license recognized by local, State or Federal Government.
- Record 4 for Associate's Degree.
- Record 5 for Bachelor's Degree.
- Record 6 for Master's Degree.
- Record 7 for Doctorate Degree.

If more than 2 interim credentials can be awarded, record the name of the 3rd interim credential.

If more than 2 interim credentials can be awarded, record the name of the entity awarding the 3rd credential.

If more than 2 interim credentials can be awarded, indicate the entity type that awarded the 3rd credential:

- Record 1 if the entity is a secondary school.
- Record 2 if the entity is a community college.
- Record 3 if the entity is a technical school.
- Record 4 if the entity is a vocational school.
- Record 5 if the entity is a 4-year degree granting instituion.
- Record 6 if the entity is a labor union.
- Record 7 if the entity is a federal, state, or local government.
- Record 8 if the entity is an industry association.
- Record 9 if the entity is an organization other than those listed above.

Describe how the program will ensure the students who are selected to participate in the registered CTE apprenticeship program reflect a diverse and inclusive cross-section of the current student body enrollment of the participating secondary or postsecondary school(s) consistent with the requirements of 29 CFR part 30.

Describe how the CTE program's training and curriculum align with an approved Industry Skills Framework.

Provide a description of the secondary credits or recognized postsecondary credit hours and credentials the program may provide, including how the program confers such credits and credentials, and its usefulness for CTE apprentices' entry into employment, a registered apprenticeship program under subpart A of this part, or a postsecondary educational program.

Provide a description how you as the sponsor will ensure each employer has an established record of maintaining a safe and inclusive workplace that is free from discrimination, violence, harassment, intimidation, and retaliation against employees.

Provide a description of how the CTE apprentices participating in the program will have access to a broad range of career services and supportive services that enable participation in, and successful completion of, the registered CTE apprenticeship program.

Provide a description of the routine monitoring and oversight conducted by the sponsor of all aspects of the registered CTE apprenticeship program.

Provide a description of how the sponsor will implement, upon registration, the affirmative steps to provide equal employment opportunity in apprenticeship required by 29 CFR § 30.3(b).

Identify the individual or individuals that will be responsible and accountable for overseeing the sponsor's commitment to equal opportunity in registered CTE apprenticeship

Identify the publications or other documents where the sponsor's equal opportunity pledge will be published and the physical or digital locations where the sponsor's equal opportunity pledge will be posted.

Describe the planned schedule for orientation and information sessions for individuals connected with the administration or operation of the registered CTE apprenticeship program, including all CTE apprentices and journeyworkers who regularly work with CTE apprentices, to inform and remind such individuals of the sponsor's EEO policy with regard to registered CTE apprenticeship.

Provide a list of current recruitment sources that will generate referrals from all demographic groups within the relevant recruitment area, including the identity of a contact person, mailing address, telephone number, and email address for each recruitment source.

Describe the sponsor's procedures to ensure that its CTE apprentices are not harassed or otherwise subjected to discrimination because of their race, color, religion, national origin, sex, sexual orientation, age (40 or older), genetic information, or disability and to ensure that its apprenticeship program is free from intimidation and retaliation. This description must specifically include: (1) the planned schedule and content source for the required anti-harassment training to all individuals connected with the administration or operation of the registered CTE apprenticeship program; and (2) the sponsor's procedures for handling and resolving complaints about harassment and intimidation.

Record 1 if the program has an established Selection Procedure. Record 0 if the program does not have an established Selection Procedure.
Describe the selection procedures.
Record 1 if the program provides a preference to veteran applicants or specifically provides outreach to veterans as part of its selection procedures Record 0 if the program does not provide a preference to veteran applicants or specifically provides outreach to veterans as part of its selection procedures
Describe the program's preference or strategy for hiring veterans.
If applicable, record the minimum age required for an individual to be eligible to enter the program (in years). If the program does not have a minimum age requirement, record 00.
If applicable, record a brief description of the minimum educational requirements for an individual to be eligible to enter the program.
If applicable, record a brief description of the physical requirements for an individual to be eligible to enter the program.
If applicable, record a brief description of the aptitude test requirements for an individual to be eligible to enter the program.
If applicable, record a brief description of any minimum requirements other than age, education, physical, and aptitude tests that are necessary for an individual to be eligible to enter the program.

CODE VALUE

XXXXXXXXXX

XXXXXXXXXXXXXXXXXX

XXXXXXXXXXXX

1 = Active
2 = Voluntary Deregistration
3 = Suspended

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XX

XXXXXX

XXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

X

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX
XX
XXXXX
XXX
XXXXXXXXXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX
1 =IHE - Community College 2 = IHE - 4-Year Degree Granting Institution 3 = Intermediary 4 = Local Education Agency 5 = State CTE Agency 6 = State Educational Agency 7 = Other
XXXXXX
1 = Yes 0 = No

1 = Yes 2 = No 0 = Not Applicable
XXXXXXXXXXXX
XXXXXXXXXXXX
1=Yes 0=No
XXXXXXXXXXXX
1=Yes 2=No 0=Not Applicable
1=Yes 0=No
XXXXXXXXXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX
1=Yes 0=No
XXXXXXXXXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX
X
XXXXXXXXXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX

XXXXXXXXXXXX
XX
XXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX
YYYYMMDD
YYYYMMDD
YYYYMMDD
XXXXXXXXXXXX
XXXXXXXXX
XXXXXX
XXXXXX
XXXXXX
XXXXXX
1=Yes 0=No
XXXXXXXXXXXX
XXXXXXXXXXXX
XXXXXXXXXXXX

XXXXXX
XX
XX
XXXXX
1 = Has Unreimbursed Costs 0 = No Unreimbursed Costs
XXXXXXXXXX
XXXXXXXXXX
1 = Yes 0 - No
1 = Yes 0 - No
1 = Yes 0 = No
Text

1=Days
2=Nights
3=Weekends
4=During the Summer
5=During School Hours

XXXXXXXX.XX

1=During Work Hours
2=Not During Work Hours
3=Both During and Not During
Work Hours

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XX

XXXXX

XXXXXXXXXXXX

Text

XXX

1=Classroom/In-person
2=Correspondence
3=Virtual/Web-based

1=Sponsor
2=Community College
3=Technical School
4=Vocational School
5=4-Year Degree Granting Institution
6=Other

XXXXX

1=Yes
0=No

XXXXXXXXXXXX

XXXXXXXXXXXX

XXX-XXX-XXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XX

XXXXX

XXXXXXXXXX
XXX
1=Classroom/In-person 2=Correspondence 3=Virtual/Web-based
1=Sponsor 2=Community College 3=Technical School 4=Vocational School 5=4-Year Degree Granting Institution 6=Other
XXXXX
1=Yes 0=No
XXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXX
1 = Yes 0 = No
XXXXXXXXXX

1 = Advanced Standing
0 = No Advanced Standing

XXX

XXX

1 = Yes
0 = No

XXXXXXXXXX

1 = Advanced Standing
0 = No Advanced Standing

XXX

1=Yes, sponsor provided
2= Yes, other than sponsor
0=No

1 = Transportation
2 = Housing
3 = Tools, Supplies, Uniforms
4 = Child/Dependent Care
5 = Needs Related Payments
6 = Other
0 = No supportive services

1 = Percent of CTE Apprentice Final Wage
2 = Dollars per Hour
3 = Both

XXXX.XX

XXXX.XX

XXXX

XX

XXXX.XX

XX.XX

XXXX

XX

XXXX.XX

XX.XX

XXXX

XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX

XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX

1=Health Insurance Contributions
2=Life Insurance
3=Pension/Retirement
Contributions
4=Paid Vacation Days
5=Paid Sick Leave
6=Paid Holidays
7=Other "bona fide" fringr benefit

XXXXXX.XX

1=Yes
0=No

1=Yes
0=No

1=Yes
0=No

XXXXXXXXXX

XXXX

1=Yes
0=No

1=Industry Recognized Certificate
2=Industry Certification
3=License recognized by local,
State or Federal Government
4=Associate's Degree
5=Bachelor's Degree
6=Master's Degree
7=Doctorate Degree

XXXXXXXXXX

XXXXXXXXXX

1=Secondary School
2=Community College
3=Technical School
4=Vocational School
5=4-Year Degree Granting
Institution
6=Labor Union
7=Federal/State/Local Government
8=Industry Association
9=Other Credentialing
Organization

1=Industry Recognized Certificate
2=Industry Certification
3=License recognized by local,
State or Federal Government
4=Associate's Degree
5=Bachelor's Degree
6=Master's Degree
7=Doctorate Degree

XXXXXXXXXX

XXXXXXXXXX

1=Secondary School
2=Community College
3=Technical School
4=Vocational School
5=4-Year Degree Granting Institution
6=Labor Union
7=Federal/State/Local Government
8=Industry Association
9=Other Credentialing Organization

1=Industry Recognized Certificate
2=Industry Certification
3=License recognized by local, State or Federal Government
4=Associate's Degree
5=Bachelor's Degree
6=Master's Degree
7=Doctorate Degree

XXXXXXXXXX

XXXXXXXXXX

1=Secondary School
2=Community College
3=Technical School
4=Vocational School
5=4-Year Degree Granting Institution
6=Labor Union
7=Federal/State/Local Government
8=Industry Association
9=Other Credentialing Organization

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXXXX

1=Yes
0=No

XXXXXXXXXX

1=Yes
0=No

XXXXXXXXXX

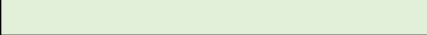
XX

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXX



OMB Control No. 1205-0NEW

Expiration Date: XX/XX/XXXX

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH
B - 1100	Employer Identification Number	IN 9
B - 1101	Employer's Name	AN 25
B - 1102	Employer Address - Line 1	AN 50
B - 1103	Employer Address - Line 2	AN 10
B - 1104	Employer Address - City	AN 25
B - 1105	Employer Address - State	AN 2
B - 1106	Employer Address - Zip Code	IN 5
B - 1107	Employer Address - County	IN 3
B - 1108	Employer Telephone Number	AN 55
B - 1109	Employer Email Address	AN 20
B - 1110	Employer NAICS (Industry) Code	IN 6
B - 1111	Size of Workforce	IN 6
B - 1112	Employer Primary Point of Contact - First Name	AN 20
B - 1113	Employer Primary Point of Contact - Last Name	AN 20
B - 1114	Employer Primary Point of Contact - Title	IN 9
B - 1115	Employer Primary Point of Contact - Phone Number	AN 20
B - 1116	Employer Primary Point of Contact - Email	AN 35
B - 1117	Employer Primary Point of Contact - Cell Phone Number	AN 20
B - 1118	Wage Rate	IN 1
B - 1119	CTE Apprentice's Entry Wage (Dollars Per Hour)	DE 6.2
B - 1120	CTE Apprentice's Final Wage (Dollars Per Hour)	DE 6.2
B - 1121	Wage Rate Duration #1	IN 4
B - 1122	Wage Rate Competencies #1	IN 2
B - 1123	Wage Rate #1 (Dollars Per Hour)	DE 6.2

B - 1124	Wage Rate #1 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1125	Wage Rate Duration #2	IN 4
B - 1126	Wage Rate Competencies #2	IN 2
B - 1127	Wage Rate #2 (Dollars Per Hour)	DE 6.2
B - 1128	Wage Rate #2 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1129	Wage Rate Duration #3	IN 4
B - 1130	Wage Rate Competencies #3	IN 2
B - 1131	Wage Rate #3 (Dollars Per Hour)	DE 6.2
B - 1132	Wage Rate #3 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1133	Wage Rate Duration #4	IN 4
B - 1134	Wage Rate Competencies #4	IN 2
B - 1135	Wage Rate #4 (Dollars Per Hour)	DE 6.2
B - 1136	Wage Rate #4 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1137	Wage Rate Duration #5	IN 4
B - 1138	Wage Rate Competencies #5	IN 2
B - 1139	Wage Rate #5 (Dollars Per Hour)	DE 6.2
B - 1140	Wage Rate #5 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1141	Wage Rate Duration #6	IN 4
B - 1142	Wage Rate Competencies #6	IN 2
B - 1143	Wage Rate #6 (Dollars Per Hour)	DE 6.2
B - 1144	Wage Rate #6 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1145	Wage Rate Duration #7	IN 4

B - 1146	Wage Rate Competencies #7	IN 2
B - 1147	Wage Rate #7 (Dollars Per Hour)	DE 6.2
B - 1148	Wage Rate #7 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1149	Wage Rate Duration #8	IN 4
B - 1150	Wage Rate Competencies #8	IN 2
B - 1151	Wage Rate #8 (Dollars Per Hour)	DE 6.2
B - 1152	Wage Rate #8 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1153	Wage Rate Duration #9	IN 4
B - 1154	Wage Rate Competencies #9	IN 2
B - 1155	Wage Rate #9 (Dollars Per Hour)	DE 6.2
B - 1156	Wage Rate #9 (% of CTE Apprentice Final Wage)	DE 4.2
B - 1157	Wage Rate Duration #10	IN 4
B - 1158	Wage Rate Competencies #10	IN 2
B - 1159	Wage Rate #10 (Dollars Per Hour)	DE 6.2
B - 1160	Wage Rate #10 (% of CTE Apprentice Final Wage)	DE 4.2

B - 1161	Fringe Benefits	IN 7
B - 1162	Fringe Benefits - Approximate Value	DE 6.2

DATA ELEMENT DEFINITIONS/INSTRUCTIONS

Record the Federal Employer Identification Number of the Sponsor.

Record the organizational name of the employer.

Record the street address of the employer's primary location.

Please verify the address and zip code using the USPS address validation system:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Record the Apartment/Suite/Unit/Room number, if applicable.

Record the city of the employer's primary location.

Record the 2 letter USPS state code for the state of the employer's primary location.

Report the 5-digit zip code of the employer's primary location.

Please verify the address and zip code using the USPS address validation system:
<https://tools.usps.com/go/ZipLookupAction!input.action>

Report the 3-digit FIPS code of the county of the employer's primary location.

Record the employer's primary telephone contact number.

Record the employer's primary email address contact.

Record the North American Industry Classification System (NAICS) Code associated with the employer. The NAICS Code means the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy. For more information on NAICS, please go to the following website: <https://www.census.gov/naics/>.

Record the total number of employees in the employer's workforce.

Record the first name of the Employer's Primary point of contact.

Record the last name of the Employer's Primary point of contact.

Record the title of the Employer's Primary point of contact.

Record the Employer's Primary point of contact's telephone number.

Record the sponsor complaint contact's email address.

Record the Employer's Primary point of contact's cellphone number.

Record 1 if the wage rates for all wage progressions are expressed as a percentage (%) of the CTE apprentice's final wage.

Record 2 if the wage rates for all wage progressions are expressed in dollars (\$) per hour.

Record 3 if the wage rates for all wage progressions are expressed as as a percentage (%) of the CTE apprentice's Final Wage or in dollars (\$) per hour, depending on which wage progression the CTE Apprentice is in.

Record the number associated with the CTE apprentice's entry wage rate for this program, expressed in dollars per hour .

Record the number associated with the CTE apprentice's final wage rate for this program, expressed in dollars per hour .

Record the duration in number of hours that wage rate #1 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #1.

If wage progression #1 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #1 for this program.

If wage progression #1 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #1 for this program.
Record the duration in number of hours that wage rate #2 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #2.
If wage progression #2 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #2 for this program.
If wage progression #2 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #2 for this program.
Record the duration in number of hours that wage rate #3 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #3.
If wage progression #3 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #3 for this program.
If wage progression #3 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #3 for this program.
Record the duration in number of hours that wage rate #4 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #4.
If wage progression #4 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #4 for this program.
If wage progression #4 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #4 for this program.
Record the duration in number of hours that wage rate #5 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #5.
If wage progression #5 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #5 for this program.
If wage progression #5 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #5 for this program.
Record the duration in number of hours that wage rate #6 will be applicable.
Record the number of competencies a CTE apprentice will obtain during wage progression #6.
If wage progression #6 is expressed in Dollars Per Hour, Record the wage rate in dollars per hour associated with the wage progression #6 for this program.
If wage progression #6 is expressed as a percent of CTE Apprentice Final Wage, Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #6 for this program.
Record the duration in number of hours that wage rate #7 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #7.

If wage progression #7 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #7 for this program.

If wage progression #7 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #7 for this program.

Record the duration in number of hours that wage rate #8 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #8.

If wage progression #8 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #8 for this program.

If wage progression #8 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #8 for this program.

Record the duration in number of hours that wage rate #9 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #9.

If wage progression #9 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #9 for this program.

If wage progression #9 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #9 for this program.

Record the duration in number of hours that wage rate #10 will be applicable.

Record the number of competencies a CTE apprentice will obtain during wage progression #10.

If wage progression #10 is expressed in Dollars Per Hour,
Record the wage rate in dollars per hour associated with the wage progression #10 for this program.

If wage progression #10 is expressed as a percent of CTE Apprentice Final Wage,
Record the wage rate in percent of CTE Apprentice Final Wage associated with the wage progression #10 for this program.

If the sponsor or any participating employer provides fringe benefits to CTE apprentices, record all of the types of benefits that apply:

Record 1 if the sponsor or any participating employer provides Health Insurance Contributions.

Record 2 if the sponsor or any participating employer provides Life Insurance.

Record 3 if the sponsor or any participating employer provides Pension/Retirement Contributions.

Record 4 if the sponsor or any participating employer provides paid vacation days.

Record 5 if the sponsor or any participating employer provides paid sick leave.

Record 6 if the sponsor or any participating employer provides paid holidays.

Record 7 if the sponsor or any participating employer provides other "bona fide" fringe benefits.

If the sponsor or any participating employer provides more than one applicable type fringe benefit, please provide all applicable in this field. For example, if both "paid sick leave" and "paid holiday" apply, record "56"

Record 0 if the sponsor or any participating employer does not provide fringe benefits.

Fringe Benefits refers to contributions irrevocably made to a trustee or third party pursuant to a bona fide fringe benefit fund plan or program; and/or the rate of costs incurred in providing bona fide fringe benefits pursuant to an enforceable commitment to carry out a financially responsible plan or program and communicated to the CTE apprentices in writing. However, payments required by Federal, State, or local law are not fringe benefit contributions; accordingly, payments required to fund Social Security, unemployment compensation, and workers' compensation programs, as required by law, do not count as fringe benefits. For more information, visit: <https://www.dol.gov/agencies/whd/government-contracts/construction/faq/fringe-benefits>.

If the sponsor or any participating employer provides fringe benefits, record the approximate hourly value of the fringe benefits provided.

ETA Form 9209

CODE VALUE

XXXXXXXXXX

XXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XX

XXXXX

XXX

XXXXXXXXXX

XXXXXXXXXXXX

XXXXXX

XXXXXX

XXXXXXXXXXXX

XXXXXXXXXXXX

XXXXXXXXXX

XXX-XXX-XXXX

XXXXXX@XXXXXX.XXX

XXX-XXX-XXXX

1 = Percent of CTE
Apprentice Final Wage

2 = Dollars per Hour

3 = Both

XXXX.XX

XXXX.XX

XXXX

XX

XXXX.XX

XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX

XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX
XXXX
XX
XXXX.XX
XX.XX

1=Health Insurance
Contributions
2=Life Insurance
3=Pension/Retirement
Contributions
4=Paid Vacation Days
5=Paid Sick Leave
6=Paid Holidays
7=Other "bona fide"
fringr benefit

XXXXXX.XX

B Control No. 1205-ONEW

Expiration Date: XX/XX/XXXX

DATA ELEMENT NO.	DATA ELEMENT NAME
	DEMOGRAPHIC INFORMATION
B - 1200	Program Number
B - 1201	CTE Apprentice Identification Number
B - 1202	First Name
B - 1203	Last Name
B - 1204	Middle Name
B - 1205	Suffix
B - 1206	Telephone Number
B - 1207	Email Address
B - 1208	Social Security Number
B - 1209	Date of Birth
B - 1210	Gender
B - 1211	Ethnicity: Hispanic/Latino
B - 1212	American Indian / Alaska Native

B - 1213	Asian
B - 1214	Black / African American
B - 1215	Native Hawaiian / Other Pacific Islander
B - 1216	White
B - 1217	Disability Status
B - 1218	Veteran Status

B - 1219	Education Level at Program Entry
CTE APPRENTICE STATUS UPDATES	
B - 1300	Apprenticeship Status
B - 1301	Most Recent Date of Change in Apprenticeship Status
B - 1302	Current Wage Progression
B - 1303	Date of most recent wage progression
B - 1304	Received Supportive Service

B - 1305	Supportive Service Types
B - 1306	Placement on a Job Site eligible for Apprenticeship-related tax credit
B - 1307	CTE Apprenticeship Agreement Start Date
B - 1308	Date CTE Apprentice begins on-the-job training
B - 1309	Date CTE Apprentice begins CTE-apprenticeship related instruction
	POSTSECONDARY CREDIT HOURS ATTAINED FROM/DURING REGISTERED CTE A
B - 1400	Postsecondary Credit Hours Attained #1
B - 1401	Most Recent Date Attained Credit Hours #1
B - 1402	Postsecondary Credit Hours Attained #2
B - 1403	Most Recent Date Attained Credit Hours #2
B - 1404	Postsecondary Credit Hours Attained #3
B - 1405	Most Recent Date Attained Credit Hours #3
B - 1406	Postsecondary Credit Hours Attained #4

B - 1407	Most Recent Date Attained Credit Hours #4
B - 1408	Postsecondary Credit Hours Attained #5
B - 1409	Most Recent Date Attained Credit Hours #5
B - 1410	Postsecondary Credit Hours Attained #6
B - 1411	Most Recent Date Attained Credit Hours #6
B - 1412	Total Postsecondary Credit Hours Attained
CREDENTIALS ATTAINED FROM/DURING REGISTERED CTE APPRENTICESHIP	
B - 1500	Date Attained Credential #1
B - 1501	Credential #1 Type
B - 1502	Date Attained Credential #2
B - 1503	Credential #2 Type
B - 1504	Date Attained Credential #3

B - 1505	Credential #3 Type
POST-PARTICIPATION OUTCOMES	
B - 1600	Date of Exit from Apprenticeship/Actual End Date of Apprenticeship
B - 1601	Type of Exit from Apprenticeship
B - 1602	Employed at Completion
B - 1603	Registered Apprenticeship at Completion

B - 1604	Postsecondary Education at Completion
B - 1605	Career Pathway Program at Completion

DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS
AN 13	Record the program number assigned by the Registration Agency to the Registered CTE Apprenticeship program the CTE apprentice is participating in.
AN12	Record the CTE Apprentice Identification Number assigned to the CTE apprentice by the Registration Agency.
AN35	Record the first name of the CTE apprentice .
AN35	Record the last name (sometimes called a surname or family name) of the CTE apprentice .
AN35	Record the middle name, if applicable, of the CTE apprentice .
AN4	Record the name suffix, if applicable, of the CTE apprentice (e.g. Jr., Sr., II, III, etc).
IN9	Record the CTE apprentice 's primary telephone contact number. Do not include any dashes.
AN35	Record the CTE apprentice 's primary email address contact.
IN9	Record the Social Security Number (SSN) assigned to the CTE apprentice .
DT8	Record the CTE Apprentice's Date of Birth
IN1	Record 1 if the participant indicates that he is male. Record 2 if the participant indicates that she is female. Record 3 if the participant indicates that they are non-binary. Record 9 if the participant did not self-identify their gender.
IN1	Record 1 if the participant indicates that they are a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race. Record 0 if the participant indicates that they do not meet any of these conditions. Record 9 if the participant did not self-identify their ethnicity.
IN1	Record 1 if the participant indicates that they are a member of an Indian tribe, band, nation, or other organized group or community, including any Alaska Native village or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) [43 U.S.C. 1601 et seq.], which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians. Record 0 if the participant indicates that they do not meet any of these conditions. Record 9 if the participant did not self-identify their race.

IN1	Record 1 if the participant indicates that they are a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent (e.g., India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. Record 0 if the participant indicates that they do not meet any of these conditions. Record 9 if the participant did not self-identify their race.
IN1	Record 1 if the participant indicates that they are a person having origins in any of the black racial groups of Africa. Record 0 if the participant indicates that they do not meet any of these conditions. Record 9 if the participant did not self-identify their race.
IN1	Record 1 if the participant indicates that they are a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. Record 0 if the participant indicates that they do not meet any of these conditions. Record 9 if the participant did not self-identify their race.
IN1	Record 1 if the participant indicates that they are a person having origins in any of the original peoples of Europe, the Middle East, or North Africa. Record 0 if the participant indicates that they do not meet any of these conditions. Record 9 if the participant did not self-identify their race.
IN1	Record 1 if the participant indicates that they have any "disability", as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. Record 0 if the participant indicates that they do not have a disability that meets the definition. Record 9 if the participant did not self-identify their disability status.
IN1	Record 1 if the participant is a person has served in the active military, naval, air, or space service of the United States, and who was discharged or released therefrom under conditions other than dishonorable. Record 2 if the participant is a person who is a dependent spouse or child—or the surviving spouse or child—of a Veteran, and who is eligible for certain G.I. Bill and other VA-administered educational assistance benefits provided under Title 38 of the U.S. Code. Record 3 if the participant is a Veteran who is eligible for certain G.I. Bill and other VA-administered educational assistance benefits provided under Title 38 of the U.S. Code. Record 0 if the participant does not meet the condition described above. Record 9 if participant does not disclose veteran status.

IN1	Use the appropriate code to record the participant's highest educational level completed by the participant at program entry. Record 1 if the participant attained a secondary school diploma or equivalent. Record 2 if the participant completed one or more years of postsecondary education. Record 3 if the participant attained an Associate's Degree. Record 4 if the participant attained a Bachelor's Degree. Record 5 if the participant attained a Master's Degree. Record 6 if the participant attained a Doctorate Degree. Record 0 if no educational level was attained.
IN 1	Record the current status of the CTE apprentice as of the date of the report. Record 1 if the CTE apprentice is active in the Registered CTE Apprenticeship program. Record 2 if the CTE apprentice is currently in suspended status. Record 3 if the CTE apprentice's participation in the Registered CTE Apprenticeship program was cancelled at the request of the CTE apprentice. Record 4 if the CTE apprentice's participation in the Registered CTE Apprenticeship program was cancelled as a result of a sponsor's determination. Record 0 if the CTE apprentice has completed the program.
DT 8	Record the most recent date that the CTE apprentice's status changed.
IN 2	Record the step number of the CTE apprentice's current wage progression.
DT 8	Record the most recent date that the step number of the CTE apprentice's wage progression status changed.
IN 4	Record the funding source(s) of the supportive services that were received by the CTE apprentice. Record 1 if the CTE apprentice received supportive services funded by a Workforce Innovation and Opportunity Act (WIOA) program. Record 2 if the CTE apprentice received supportive services funded by the program sponsor. Record 3 if the CTE apprentice received supportive services funded by an Apprenticeship grant. Record 4 if the CTE apprentice received supportive services funded by resources that were not federal resources and were not funded by the program sponsor. Record 0 if the CTE apprentice did not receive supportive services.

IN 6	Record all of the types of supportive services received by the CTE apprentice , whether funded directly by the program or another source. Record 1 if the CTE apprentice received Transportation assistance. Record 2 if the CTE apprentice received Housing assistance. Record 3 if the CTE apprentice received Tools, Supplies, or Uniforms assistance. Record 4 if the CTE apprentice received Child/Dependent Care assistance. Record 5 if the CTE apprentice received Needs Related Payments. Record 6 if the CTE apprentice received supportive services other than those listed above. Record 0 if the CTE apprentice did not receive supportive services. For CTE apprentice s where more than one supportive service type was recieved, please provide all applicable in this field. For example, if both "transportation" and "housing" apply, record "12"
IN 3	Record whether the CTE apprentice had, at any time during program participation, been placed on a job site that was eligible for any Apprenticeship-related tax credits: Record 1 if the CTE apprentice was placed at a job site that was eligible for Federal tax credit. Record 2 if the CTE apprentice was placed at a job site that was eligible for an State tax credit. Record 0 if the CTE apprentice was not placed at a job site that was eligible for a tax credit. For CTE apprentice s where more than one response is applicable, please provide all applicable in this field. For example, if both "IRA" and "Federal" apply, record "12"
DT 8	Record the Registered CTE Apprenticeship Start Date from the CTE Apprenticeship Agreement
DT 8	Record the date that the CTE apprentice began receiving on-the-job training.
DT 8	Record the date that the CTE apprentice began receiving CTE apprenticeship-related instruction.
PPRENTICESHIP	
IN 2	Record the number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained postsecondary credit hours #1.
IN 2	Record the number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained postsecondary credit hours #2.
IN 2	Record the number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained postsecondary credit hours #3.
IN 2	Record the number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.

DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained postsecondary credit hours #4.
IN 2	Record the number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained postsecondary credit hours #5.
IN 2	Record the number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained postsecondary credit hours #6.
IN 2	Record the total number of postsecondary credit hours that the CTE apprentice has attained from or during the Registered CTE Apprenticeship program.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained credential #1.
IN 1	Indicate the type of credential attained for Credential #1 : Record 1 for industry recognized certificate. Record 2 for industry certification. Record 3 for license recognized by local, State or Federal Government. Record 4 for Associate's Degree. Record 5 for Bachelor's Degree. Record 6 for Master's Degree. Record 7 for Doctorate Degree.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained credential #2.
IN 1	Indicate the type of credential attained for Credential #1 : Record 1 for industry recognized certificate. Record 2 for industry certification. Record 3 for license recognized by local, State or Federal Government. Record 4 for Associate's Degree. Record 5 for Bachelor's Degree. Record 6 for Master's Degree. Record 7 for Doctorate Degree.
DT 8	Record the date, from or during the Registered CTE Apprenticeship Program, that the CTE apprentice attained credential #3.

IN 1	Indicate the type of credential attained for Credential #1 : Record 1 for industry recognized certificate. Record 2 for industry certification. Record 3 for license recognized by local, State or Federal Government. Record 4 for Associate's Degree. Record 5 for Bachelor's Degree. Record 6 for Master's Degree. Record 7 for Doctorate Degree.
DT 8	Date that CTE Apprentice left their Registered CTE Apprenticeship program, including completion of the program, voluntary withdrawal from the program, or a forced withdrawal from the program as a results of events that prevent the CTE apprentice 's continued participation (including incarceration, hospitalization, and death).
IN 1	Record 1 if the CTE Apprentice exited the program because they completed the program. Record 2 if the CTE Apprentice exited the program because they voluntarily withdrew from the program. Record 3 if the CTE Apprentice transferred to another Registered CTE Apprenticeship program. Record 4 if the CTE Apprentice exited the program because they were forced to withdraw due to events that prevented the CTE apprentice 's continued participation (including incarceration, hospitalization, and death). Record 5 if the CTE Apprentice exited the program for reasons other than those described above.
IN 1	For CTE Apprentices who exited from the program because they completed the program: Record 1 if the CTE Apprentice was employed in unsubsidized employment at the time of completion of the program. Record 0 if the CTE Apprentice was not employed in unsubsidized employment at the time of completion of the program. Record 9 if the CTE Apprentice's employment status was unknown at the time of completion. Leave Blank if the CTE Apprentice has not exited the program or exited for reasons other than completion of the program.
IN 1	For CTE Apprentices who exited from the program because they completed the program: Record 1 if the CTE Apprentice was registered in a Registered Apprenticeship program at the time of completion of the program. Record 0 if the CTE Apprentice was not registered in a Registered Apprenticeship program at the time of completion of the program. Record 9 if the CTE Apprentice's Registered Apprenticeship status was unknown at the time of completion. Leave Blank if the CTE Apprentice has not exited the program or exited for reasons other than completion of the program.

IN 1	For CTE Apprentices who exited from the program because they completed the program: Record 1 if the CTE Apprentice was enrolled in Postsecondary Education at the time of completion of the program. Record 0 if the CTE Apprentice was not enrolled in Postsecondary Education at the time of completion of the program. Record 9 if the CTE Apprentice's Postsecondary Education status was unknown at the time of completion. Leave Blank if the CTE Apprentice has not exited the program or exited for reasons other than completion of the program.
IN 1	For CTE Apprentices who exited from the program because they completed the program: Record 1 if the CTE Apprentice was enrolled in a Career Pathway Program at the time of completion of the program. Record 0 if the CTE Apprentice was not enrolled in a Career Pathway Program at the time of completion of the program. Record 9 if the CTE Apprentice's Career Pathway Program status was unknown at the time of completion. Leave Blank if the CTE Apprentice has not exited the program or exited for reasons other than completion of the program.

ETA Form 9209

CODE VALUE

XXXXXXXXXXXXXX

XXXXXXXXXXXXXX

XXXXXXXXXXXXXX

XXXXXXXXXXXXXX

XXXXXXXXXXXXXX

XXXX

XXXXXXXXXXXXXX

XXXXXX@XXXXXX.XXX

XXXXXXXXXXXXXX

YYYYMMDD

1 = Male
2 = Female
3=Non-Binary
9 = Participant did not self-identify

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

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

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

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

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

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

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

1 = Veteran
2 = Non-Veteran, Other Eligible Individual
3 = Veteran, Eligible
0 = Non-Veteran
9 = Status not known

1 = High School Graduate
(including equivalency)
2 = Some College
3 = Associate's Degree
4 = Bachelor's Degree
5 = Master's Degree
6 = Doctorate Degree
0 = Not a High School
Graduate

1=Active Apprentice
2=Suspended
3=Cancelled (At CTE
Apprentice Request)
4=Cancelled (Sponsor
Determination)
0=Completed

YYYYMMDD

XX

YYYYMMDD

1= Funded by WIOA
2= Funded by the program
sponsor
3= Funded by
Apprenticeship Grants
4= Funded by non-federal
resources
0= Did Not Receive
Supportive Services

1 = Transportation
2 = Housing
3 = Tools, Supplies,
Uniforms
4 = Child/Dependent Care
5 = Needs Related Payments
6 = Other
0 = No supportive services

1= Other Federal Tax Credit
2= State Tax Credit
0= No

YYYYMMDD

YYYYMMDD

YYYYMMDD

XX

YYYYMMDD

XX

YYYYMMDD

XX

YYYYMMDD

XX

YYYYMMDD
XX
YYYYMMDD
XX
YYYYMMDD
XX
YYYYMMDD
1=Industry Recognized Certificate 2=Industry Certification 3=License recognized by local, State or Federal Government 4=Associate's Degree 5=Bachelor's Degree 6=Master's Degree 7=Doctorate Degree
YYYYMMDD
1=Industry Recognized Certificate 2=Industry Certification 3=License recognized by local, State or Federal Government 4=Associate's Degree 5=Bachelor's Degree 6=Master's Degree 7=Doctorate Degree
YYYYMMDD

1=Industry Recognized
Certificate
2=Industry Certification
3=License recognized by
local, State or Federal
Government
4=Associate's Degree
5=Bachelor's Degree
6=Master's Degree
7=Doctorate Degree

YYYYMMDD

1 = Completed
2 = Voluntary Withdraw
3 = Transferred
4 = Forced Withdraw
5 = Other

1 = Yes
2 = No
9 = Unknown

1 = Yes
0 = No
9 = Unknown

1 = Yes
0 = No
9 = Unknown

1 = Yes
0 = No
9 = Unknown

OMB Control No. 1205-0NEW

Expiration Date: XX/XX/XXXX

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH
B - 1700	Applicants Invited to Disclose	IN 5
B - 1701	CTE Apprentices Invited to Disclose	IN 5
B - 1702	Applicants that Disclosed a Disability	IN 5
B - 1703	CTE Apprentices that Disclosed a Disability	IN 5

DATA ELEMENT DEFINITIONS/INSTRUCTIONS

Record the number of applicants to the program during the past year that were invited to disclose a disability.

Record the number of CTE apprentices in the program during the past year that were invited to disclose a disability.
--

Record the number of applicants to the program during the past year who disclosed a disability.

Record the number of CTE apprentices in the program during the past year who disclosed a disability.
--

ETA Form 9209

CODE VALUE

XXXXX

XXXXX

XXXXX

XXXXX

DATA ELEMENT NO.	QUESTION ID	TIMING OF QUESTION
B- 1800	SCS-1	Post-Registration
B- 1801	SCS-1.a	Post-Registration

Sponsor Customer Satisfaction Questions - (Net Promoter Score Approach)

QUESTION

Based on your experience with the assistance and customer service of the Registration Agency (federal or state staff) who worked with you on developing your program, how likely are you to recommend Registered CTE Apprenticeship to a colleague?" 01 = Not at all likely and 10=extremely likely.

What is the primary reason for your score?

RESPONSE OPTIONS	DATA TYPE/ FIELD LENGTH
01,02,03,04,05,06,07,08,09,10	IN 2
Text	AN 1000

DATA ELEMENT NO.	QUESTION ID	TIMING OF QUESTION
B -1900	CTEACS-1	Within 3 Months of Becoming CTE Apprentice
B -1901	CTEACS-1.a	Within 3 Months of Becoming CTE Apprentice
B -1902	CTEACS-2	Annually at the Anniversary of their Registration
B -1903	CTEACS-2.a	Annually at the Anniversary of their Registration
B -1904	CTEACS-3	Within 30 Days of Completion or Cancellation
B -1905	CTEACS-3.a	Within 30 Days of Completion or Cancellation
B -1906	CTEACS-4	Within 365 Days of Completion
B -1907	CTEACS-4.a	Within 365 Days of Completion
B -1908	CTEACS-4.b	Within 365 Days of Completion
B -1909	CTEACS-4.c	Within 365 Days of Completion
B -1910	CTEACS-4.d	Within 365 Days of Completion

CTE Apprentice Customer Satisfaction Questions - (Net Promoter Score Approach)

QUESTION

Based on your experience with the Registered CTE Apprenticeship program, including:

- the process for applying and being selected,
- the on-the-job training you have received so far
- the CTE apprenticeship-related instruction you have received so far
- your trainers, instructors, and/or mentors (journeyworkers) in your program's effectiveness in establishing a safe, welcoming, and inclusive workplace environment

How likely are you to recommend Registered CTE Apprenticeship to a friend?"
01 = Not at all likely and 10=extremely likely.

What is the primary reason for your score?

Based on your experience with the Registered CTE Apprenticeship program, including:

- the quality of the registered CTE apprenticeship program in providing you the skills and competencies you need succeed in your occupation.
- the on-the-job training you have received so far
- the CTE apprenticeship-related instruction you have received so far

How likely are you to recommend Registered CTE Apprenticeship to a friend?"
01 = Not at all likely and 10=extremely likely.

What is the primary reason for your score?

Based on your experience with the Registered CTE Apprenticeship program, including:

- the quality of the registered CTE apprenticeship program in providing you the skills and competencies you need succeed in your postsecondary education, registered apprenticeship, or employment.
- the on-the-job training you have received
- the CTE apprenticeship-related instruction you have received

How likely are you to recommend Registered CTE Apprenticeship to a friend?"
00 = Not at all likely and 10=extremely likely.

What is the primary reason for your score?

Are you employed?

Are you receiving a wage that meets the essential financial needs of your household?

Are you currently enrolled in a postsecondary education program?

Are you currently enrolled in a Registered Apprenticeship program

Upon completion of a Registered CTE Apprenticeship program, do you feel you are on a career pathway, sequence, or progression towards the attainment of more advanced competencies and credentials in the industry skills and competencies for which you were trained?

h)	
RESPONSE OPTIONS	DATA TYPE/ FIELD LENGTH
01,02,03,04,05,06,07,08,09,10	IN 2
Text	AN 1000
01,02,03,04,05,06,07,08,09,10	IN 2
Text	AN 1000
01,02,03,04,05,06,07,08,09,10	IN 2
Text	AN 1000
Y/N	AN 1
Y/N	AN 1
Y/N	AN 1
Y/N	AN 1
Y/N	AN 1

OMB Control No. 1205-0NEW

Expiration Date: XX/XX/XXXX

DATA ELEMENT NO.	DATA ELEMENT NAME
B- 2000	Total Registered CTE Apprenticeship programs approved in a
B- 2001	Total Registered CTE Apprenticeship programs disapproved
B- 2002	Median time for Registered CTE Apprenticeship program reg
B- 2003	Customer satisfaction metric (total SCS #)
B- 2004	Customer satisfaction metric (average score of SCS)

DATA TYPE/ FIELD LENGTH
IN 5
IN 5
IN 3
IN 5
DE 3.1

DATA ELEMENT DEFINITIONS/INSTRUCTIONS

Report the total number of Registered CTE Apprenticeship programs approved by the Registration Agency in the past year.

Report the total number of Registered CTE Apprenticeship programs disapproved by the Registration Agency in the past year.
--

Report the median amount of time (in days) between Registered CTE Apprenticeship program application through program approval.
--

Report the total number of respondents to the sponsor customer satisfaction survey in the past year.
--

Report the average score reported on the sponsor customer satisfaction survey for the surveys received in the past year.
--

ETA Form 9209

CODE VALUE
XXXXX
XXXXX
XXX
XXXXX
XX.X