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DATA ELEMENT NAME
PROGRAM SPONSOR INFORMATION
Employer Identification Number
Program Number
Sponsor Name
Doing Business As (DBA)
Sponsor Type - Educational Institution
Sponsor Type - Government
Sponsor Type - Non-Governmental Organizations
Parent Organization/National Affiliation

Sponsor Address - Line 1
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 Headquarters Address Question

Sponsor Place of Business Address - Line 1
Sponsor Place of Business Address - Line 2
Sponsor Place of Business Address - City
Sponsor Place of Business Address - State
Sponsor Place of Business Address - Zip Code
Sponsor Place of Business Point of Contact - Last Name
Sponsor Place of Business Point of Contact - First Name
Sponsor Place of Business Point of Contact - Middle Initial
Sponsor Place of Business Point of Contact - Title
Sponsor Place of Business Point of Contact - Telephone Number
Sponsor Place of Business Point of Contact - Email Address
Sponsor Employer
Multiple States/Territories - Question 1
Multiple States/Territories - Question 2
Program Type
Joint Labor-Management Program
Registration Type
National Guideline Standards of Apprenticeship Program Name
National Guideline Standards for Apprenticeship Certification Number

ETPL
Collective Bargaining Agreement - Status
Collective Bargaining Agreement - Name
Collective Bargaining Agreement - Union Waivers
Size of Workforce
Sponsor NAICS (Industry) Code
Incarcerated Individuals Program
Equitable Recruitment Written Plan
EEO in RA Implementation
Sponsor Financial Capacity
Unreimbursed Costs
Unreimbursed Costs - Detail
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

Compalint 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	
Occupational Information, Wage Information, and Minimum Qualifiation Requirements	
Suitable Occupation Name	
Sponsor Occupation Title	
Occupation RAPIDS Code	
Occupation O*NET Code	
Term Length - OJT	
Probationary Period	
Work Process Schedule	
National Occupational Standards for Apprenticeship Certification Number	
National Occupational Standards for Apprenticeship Certification Number	
End-Point Assessment - Type	

End-Point Assessment - Detail
Ratio - Apprentices
Ratio - Journeyworkers
Number of Journeyworkers Employed
Documentation of Tranferred Apprentices' Transfer Information
Instructor and Trainer Qualifications
Health and Safety Trainings
Health and Safety Trainings - Narrative
Assessment and Feedback Process
Advanced Standing Policy
RELATED INSTRUCTION INFORMATION
Primary - Related Instruction Provider Name
Primary - Related Instruction Provider Address - Line 1
Primary - Related Instruction Provider Address - Line 2
Primary - Related Instruction Provider Address - City
Primary - Related Instruction Provider Address - State
Primary - Related Instruction Provider Address - Zip Code
Primary - Related Instruction Provider Website

Primary - Related Instruction - Instruction Method
Primary - Related Instruction Provider Type
Primary - Related Instruction Length
Primary - Related Instruction Outline Plan
Primary - Wages Paid During Related Instruction
Primary - Hours When Related Instruction is Provided
Secondary - Contact Person First Name
Secondary - Contact Person Last Name
Secondary - Contact Person Telephone Number
Secondary - Contact Person Email Address
Secondary - Related Instruction Provider Name
Secondary - Related Instruction Provider Address - Line 1
Secondary - Related Instruction Provider Address - Line 2
Secondary - Related Instruction Provider Address - City
Secondary - Related Instruction Provider Address - State

Secondary - Related Instruction Provider Address - Zip Code
Secondary - Related Instruction Provider Website
Secondary - Related Instruction - Instruction Method
Secondary - Related Instruction Provider Type
Secondary - Related Instruction Length
Secondary - Related Instruction Outline Plan
Secondary - Wages Paid During Related Instruction
Secondary - Hours When Related Instruction is Provided
Secondary - Contact Person First Name
Secondary - Contact Person Last Name
Secondary - Contact Person Telephone Number
Secondary - Contact Person Email Address
PRE-APPRENTICESHIP AND SUPPORTIVE SERVICE INFORMATION
Pre-Apprenticeship Documented Partnership

Pre-Apprenticeship Documented Partnership - Narrative
Pre-Apprenticeship Advanced Standing
Pre-Apprenticeship Advanced Standing - OJT Credit
Pre-Apprenticeship Advanced Standing - RI Credit
Supportive Services
Supportive Services Types
REGISTERED CAREER AND TECHNICAL EDUCATION (CTE) APPRENTICESHIP PARTNERSHIP
Registered CTE Apprenticeship Program Partnership
Registered CTE Apprenticeship Program Partnership - Narrative
Registered CTE Apprenticeship Advanced Standing
Registered CTE Apprenticeship Advanced Standing - OJT Credit

Registered CTE Apprenticeship Advanced Standing - RI Credit
PROGRESSIVE WAGE SCHEDULE INFORMATION
Wage Rate
Apprentice's Entry Wage (Dollars Per Hour)
Apprentice's Final Wage (Dollars Per Hour)
Journeyworker's (i.e. Experienced Worker's) Entry Wage (Dollars Per Hour)
Wage Rate Duration #1
Wage Rate Competencies #1
Wage Rate #1 (Dollars Per Hour)
Wage Rate #1 (% of Journeyworker Wage)
Wage Rate Duration #2
Wage Rate Competencies #2
Wage Rate #2 (Dollars Per Hour)
Wage Rate #2 (% of Journeyworker Wage)
Wage Rate Duration #3
Wage Rate Competencies #3
Wage Rate #3 (Dollars Per Hour)
Wage Rate #3 (% of Journeyworker Wage)
Wage Rate Duration #4
Wage Rate Competencies #4
Wage Rate #4 (Dollars Per Hour)

Wage Rate #4 (% of Journeyworker Wage)	
Wage Rate Duration #5	
Wage Rate Competencies #5	
Wage Rate #5 (Dollars Per Hour)	
Wage Rate #5 (% of Journeyworker Wage)	
Wage Rate Duration #6	
Wage Rate Competencies #6	
Wage Rate #6 (Dollars Per Hour)	
Wage Rate #6 (% of Journeyworker Wage)	
Wage Rate Duration #7	
Wage Rate Competencies #7	
Wage Rate #7 (Dollars Per Hour)	
Wage Rate #7 (% of Journeyworker Wage)	
Wage Rate Duration #8	
Wage Rate Competencies #8	
Wage Rate #8 (Dollars Per Hour)	
Wage Rate #8 (% of Journeyworker Wage)	
Wage Rate Duration #9	
Wage Rate Competencies #9	
Wage Rate #9 (Dollars Per Hour)	

Wage Rate #9 (% of Journeyworker Wage)	
Wage Rate Duration #10	
Wage Rate Competencies #10	
Wage Rate #10 (Dollars Per Hour)	
Wage Rate #10 (% of Journeyworker Wage)	
Fringe Benefits	
Fringe Benefits - Approximate Value	
Academic Credit and Interim Credentials	
Academic Credit provided	
Academic Credit - Name of Entity Providing Credit	
Academic Credit - Entity EIN Number	
Academic Credit - Hours	
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
Selection Procedures
Selection Procedures
Selection Procedure - Description
Selection Procedures - Veterans Preference
Selection Procedures - Veterans Preference Description
Minimimum Eligibility Requirements - Age
Minimimum Eligibility Requirements - Education
Minimimum Eligibility Requirements - Physical
Minimimum Eligibility Requirements - Aptitude Tests
Minimimum Eligibility Requirements - Other
Program Application Approval Questions

DATA TYPE/ FIELD LENGTH KEY:

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 yyyymmdd 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
AN 25
IN 3
IN 4
IN 7
AN 25

AN 50
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AN 2
IN 5
IN 3
AN 200
IN 9
IN 9
AN 20
AN 2500
AN 20
AN 20
AN 1
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AN 25
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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.

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.

If the sponsor is an Educational Institution, record the applicable types of institutions:
Record 1 if the sponsor is a Local Education Agency. Local Educational Agency means the term given in section 8101 of the Elementary and Secondary Education Act of 1965 (https://oese.ed.gov/offices/office-of-formula-grants/school-support-and-accountability/well-rounded-education-student-centered-funding-demonstration-grants/eligibility/).
Record 2 if the sponsor is an Institution of Higher Education - Community College.
Record 3 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 0 if the sponsor is not an educational instution.

If the sponsor is a governmental organization/agency, record the applicable types of organizations:
Record 1 if the sponsor is a Federal Government Agency.
Record 2 if the sponsor is a State Government Agency.
Record 3 if the sponsor is a City/County Government Agency.
Record 4 if the sponsor is a Workforce Development Board.
Record 0 if the sponsor is not a governmental organization/agency.

Record the sponsor's applicable types of organizations:
Record 1 if the sponsor is also a person or organization that employs apprentices during the on-the-job training component o the apprenticeship program pursuant to a program sponsor's approved set of standards of apprenticeship and the apprenticeship agreement.
Record 2 if the sponsos is a Union or Labor organization.
Record 3 if the sponsor is a business association.
Record 4 if the sponsor is an intermediary.
Record 5 if the sponsor is a Community Based Organization.
Record 6 if the sponsor is a foundation.
Record 7 if the sponsor is an Employee Leasing and/or Staffing Agency.
Record 8 if the sponsor is an organization type other than those listed above, and is not an Educational Insitution or governmental organization/agency.
Record 0 if the sponsor is not one of the types listed above.

If the sponsor is a part of a larger parent organization or national affiiliation, record the name of the parent organization or national affiiliation that the sponsor is a part of.

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 city of the sponsor's primary location.

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

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.

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, 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.

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 1 if the Program Sponsor's Address is different from the Program Sponsor's principal place of business in the United States.

Record 0 is the Program Sponsor's Address is the same as the Program Sponsor's principal place of business in the United Stat

If different from the sponsor's primary location, record the street address of the sponsor's headquarters 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 headquarters Apartment/Suite/Unit/Room number, if applicable.
If different from the sponsor's primary location, record the city of the the sponsor's headquarters address.
If different from the sponsor's primary location, record the 2 letter USPS state code for the state of the sponsor's headquarter address.
If different from the sponsor's primary location, report the 5-digit zip code of the sponsor's headquarters address. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction! input.action
Record the last name of the Sponsor's Place of Business designated point of contact.
Record the first name of the Sponsor's Place of Business designated point of contact.
Record the middle initial of the Sponsor's Place of Business designated point of contact.
Record the title of the Sponsor's Place of Business designated point of contact.
Record the sponsor's Place of Business primary telephone contact number.
Record the sponsor's Place of Business primary email address contact.
Record 1 if the program sponsor is different from the employer that employs apprentices in the program. Record 0 if the program sponsor employs the apprentices in the program.
Record 1 if the program employs apprentices in more than one U.S. state and/or territory Record 0 if the program employs apprentices in only one state and or territory.
Record two letter postal code(s) for states with which the program employs apprentices. Leave blank if data element does not apply to the program.
Record 1 if the program is a single employer program. Record 2 if the program is a group program.
If the program is a group program: Record 1 if the program is registered under local apprenticeship standards that are not linked to National Guideline Standards Record 2 if the program is registered under local apprenticeship standards that are linked to National Guideline Standards. Record 3 if the program is registered under National Program Standards.
If the program standards are based on National Guideline Standards (NGS) of Apprenticeship, record the NGS program name.
If the program standards are based on National Guideline Standards (NGS) of Apprenticeship, record the NGS certification number.

Record 1 if the sponsor is willing to be placed on the statewide Eligible Training Provider (ETP) List.
Record 0 if the sponsor is not willing to be placed on the statewide ETP list.

Record 1 if this program has a Collective Bargaining Agreement.
Record 0 if the program does not have a Collective Bargaining Agreement.

If the program has 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 employers' association, (2) a collective bargaining agreement exists, and (3) the union elects not to participate in the operatio 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 the total number of employees in the sponsor's workforce.
website: https://www.census.gov/naics/.

Record 1 if the program allows incarcerated individuals to be apprentices.
Record 0 if the program does not allow incarcerated individuals to be apprentices.

Provide the program's written plan outlining equitable recruitment and retention practices for apprentices.

Describe how the program sponsor will, upon registration, implement the equal employment opportunity in apprenticeship requirements as contained in 29 CFR § 30.3(b).

Describe whether the program sponsor possesses, and can maintain, the financial capacity and resources to operate the program.

Record 1 if the sponsor charges any unreimbursed costs, fees, and expenses to apprentices.
Record 0 if the sponsor does not charge any unreimbursed costs, fees, and expenses to apprentices.

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

Record 1 if the program provides advanced standing to 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.

Record the sponsor's complaint contact's cellphone number, if different from the sponsorcomplaint contact's telephone numl

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 Suitable Occupation Name of the program, based off of OA's title for suitable occupations

suitable occupation name, leave this blank.

Record the Occupation RAPIDS code for the occupation associated with the program.

Record the O*NET code for the occupation associated with the program.

Record the number of hours of on-the-job training that will be provided to the apprentice prior to completion of the program.

Record the number of hours of on-the-job training that the apprentice will serve as the 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 established work process schedule for the program. This work process schedule must be shared in a
separate attachment.
Record 0 if there is not an established work process schedule for the program. Sponsors without an established work process
schedule must work with the Registration Agency to develop a work process schedule.

Record 1 if the work process schedule is associated with a National Occupational Standard.
Record 0 if the work process schedule is not associated with a National Occupational Standard.
Leave blank if there is no work process schedule.

If the program standards are based on National Occupational Standards (NOS) for Apprenticeship, record the NOS certification
number.

Record 1 if the end-point assessment is based on an indsutry standardized test, occupational license, or utilizes an end-point
assessment identified in a National Occupational Standard.
Record 2 if the end-point assessment is sponsor-specific assessment.
Record 3 if the end-point assessment is a type other than those provided above.

Explain the program's end-point assessment process for certifying the apprentice's attainment of relevant occupational knowledge, skills, and competencies at the close of the apprenticeship program.

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

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

Record the number of Journeyworkers currently employed.

Record 1 if the sponsor provides documentation of the transferring apprentice's accrued related instruction and on-the-job training for apprentices that transfer from the program to another apprenticeship program involving the same occupation.
Record 0 if the sponsor does not provide documentation of the transferring apprentice's accrued related instruction and on-the-job training for apprentices that transfer from the program to another apprenticeship program involving the same occupation.

Record 1 if the sponsor has provided documentation showing that the qualification and experience of the trainings and instructors that provide on-the-job trainers and related instruction to apprentices satisfies the requirements described in 29 C § 29.12 and § 29.8(a)(7).
Record 0 is the sponsor has not provided the documentation described above.

Record 1 if the program provides industry-recognized health or safety trainings to apprentices during the program.
Record 0 if the program does not provide industry-recognized health or safety trainings to apprentices during the program.

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

Describe the program's process and frequency of regularly assessing and providing feedback to apprentices on the acquisition job-related knowledge, skills, and competencies during the on-the-job component of the apprenticeship.

Explain how the usual terms or duration of the program's on-the-job training and related instruction will be reduced (a) as a result of the apprentice's prior learning, training, or experience; or (b) as a result of accelerated attainment of occupational competencies.

Record the name of the primary related instruction provider.

Record the street address of the Primary 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 Related Instruction Provider's primary location, if applicable.

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

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

Report the 5-digit zip code of the 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 Related Instruction Provider's website if the provider is different than sponsor.

Indicate the instruction method of the Related Instruction:

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

For programs with more than one 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 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 related instruction outline.   These outlines must be provided in a separate attachment.
Record 0 if there is not an established related instruction outline. Sponsors must work with the Registration Agency to develop an outline/plan.

Record the total amount of wages paid during the related instruction. If wages are not paid during related instruction, report "0000000.00"

Record 1 if Related Instruction is provided only during work hours.
Record 2 if Related Instruction is provided only outside of work hours.
Record 3 if Related Instruction is provide both during and outside of work hours.

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 related instruction provider.

Record the street address of the Primary 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 Related Instruction Provider's primary location, if applicable.

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

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

Report the 5-digit zip code of the 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 Related Instruction Provider's website if the provider is different than sponsor.

Indicate the instruction method of the Related Instruction:

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

For programs with more than one 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 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 related instruction outline.   These outlines must be provided in a separate attachment.
Record 0 if there is not an established related instruction outline. Sponsors must work with the Registration Agency to develop an outline/plan.

Record the total amount of wages paid during the related instruction. If wages are not paid during related instruction, report "0000000.00"

Record 1 if Related Instruction is provided only during work hours.
Record 2 if Related Instruction is provided only outside of work hours.
Record 3 if Related Instruction is provide both during and outside of work hours.

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 written agreement or partnership with any pre-apprenticeship programs for the placement of apprentices.
Record 0 if the program does not have any written agreements or partnerships with any pre-apprenticeship programs for the placement of apprentices.

Record the list of the names of the pre-apprenticeship programs in which the sponsor has a written agreement or partnership for the placement of apprentices.

Record 1 if the program awards advanced standing for completion of pre-apprenticeship programs for placement of apprentic Record 0 if the program does not award advanced standing of completion of pre-apprenticeship programs for placement of apprentices.

Record the number of OJT credit hours that the program awards to apprentices for completion of the pre-apprenticeship program. Leave blank if the program does not have a documented partnership with a pre-apprenticeship program.

Record the number of Related Instruction credit hours that the program awards to apprentices for completion of the pre-apprenticeship program. Leave blank if the program does not have a documented partnership with a pre-apprenticeship program.

Record 1 if the program provides apprentices access to supportive services provided by the sponsor during the program.
Record 2 if the program provides apprentices access to supportive services provided only by someone other than the sponsor during the program.
Record 0 if the program does not provide 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 suportive service type applies, please provide all applicable in this field. For example both "transportation" and "housing" apply, record "12"

Record 1 if the program has a written agreement or partnership with any registered CTE apprenticeship programs for the placement of apprentices.
Record 0 if the program does not have any written agreements or partnerships with any registered CTE apprenticeship progra for the placement of apprentices.

Record the list of the names of the registered CTE apprenticeship programs in which the sponsor has a written agreement or partnership for the placement of apprentices.

Record 1 if the program awards advanced standing for completion of registered CTE apprenticeship programs for placement o apprentices.
Record 0 if the program does not award advanced standing of completion of registered CTE apprenticeship programs for placement of apprentices.

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

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

Record 1 if the wage rates for all wage progressions are expressed as a percentage (%) of the Journeyworker Entry Wage.
Record 2 if the wage rates for all wage progressions are expressed in dollars ($) per hour.
Record 3 if the wage rates for all wage progressions are expressed as as a percentage (%) of the Journeyworker Entry Wage or dollars ($) per hour, depending on which wage progression the Apprentice is in.

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

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

Record the number associated with the journeyworker's entry 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 an apprentice will obtain during wage progression #1.

Record the wage rate in dollars per hour associated with the wage progression #1 for this program.

Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage,
Record the wage rate in percent of Journeyworker Wage associated with the wage progression #10 for this program.

If the sponsor or any participating employer provides fringe benefits to apprentices, record all of the types of benefits that ap
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 applicab
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 commitm
to carry out a financially responsible plan or program and communicated to the 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 benefi
provided.

Record 1 if the program provides academic credit.
Record 0 if the program does not provide academic credit

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

Record the Federal Employer Idenitification Number of the entity awarding the academic credit.

Record the number of academic 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.

Record 7 if the entity is an organization other than those listed above.

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

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.

ETA Form 9205
CODE VALUE
XXXXXXXXX
XXXXXXXXXXXX
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XXXXXXXXXX
1 = Local Education Agency 2 =IHE - Community College 3 = IHE - 4-Year Degree Granting Institution 0 = Not an educational insitution
1 = Federal Agency 2 = State Agency 3 = City/County Agency 4 = Workforce Development Board 0 = Not a governmental organiztion.
1=Employer 2=Union/Labor 3=Business Association 4=Intermediary 5=Community Based Organization 6=Foundation 7=Employee Leasing/Staffing Agency 8 = Other 0 = Not a non-governmental organization
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1=Yes 0=No

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1=Yes 0=No
1=Yes 0=No
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1= Single Employer 2=Group
1 = Joint Labor-Management
1= Local Apprenticeship Standards 2= Local Apprenticeship Standards (linked to National Guideline Standards) 3= National Program Standards
XXXXXXXXXX
XXXXXXXXXX

1=Yes 0=No
1=Yes 0=No
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1=Yes 2=No 0=Not Applicable
XXXXXX
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1=Yes 0=No
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1 = Has Unreimbursed Costs 0 = No Unreimbursed Costs
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1=Yes 0=No
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1=Yes 0=No
1=Yes 0=No
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1= Industry Standardized Test or Exam 2=Sponsor-specfic Assessment 3=Other

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1 = Yes, provided 0 = No, not provided
1 = Yes 0 - No
1 = Yes 0 = No
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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
XXXXXXX.XX
1=During Work Hours 2=Not During Work Hours 3=Both During and Not During Work Hours
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XX

XXXXX
XXXXXXXXXX
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
XXXXXXX.XX
1=During Work Hours 2=Not During Work Hours 3=Both During and Not During Work Hours
XXXXXXXXXX
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XXX-XXX-XXXX
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1=Yes 0=No

Text
1 = Advanced Standing 0 = No Advanced Standing
XXXX
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 = Advanced Standing 0 = No Advanced Standing
Text
1 = Advanced Standing 0 = No Advanced Standing
XXX

XXX

1 = Percent of Journeyworker
2 = Dollars per Hour
3 = Both

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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

Text

XXXXXXXXX

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
XXXXXXXXX
XXXXXXXXX
Organization
7=Doctorate Degree
XXXXXXXXX
XXXXXXXXX
1=Community College 2=Vocational School 3=4-Year Degree Granting Institution 4=Labor Union 5=Federal/State/Local Government 6=Industry Association 7=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
XXXXXXXXX
XXXXXXXXX

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

1=Yes
0=No

XXXXXXXXX

1=Yes
0=No

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DATA ELEMENT NO.	DATA ELEMENT NO.	DATA ELEMENT NAME
	900	Employer Identification Number
	901	Employer's Name
	902	Employer Address - Line 1
	903	Employer Address - Line 2
	904	Employer Address - City
	905	Employer Address - State
	906	Employer Address - Zip Code
	907	Employer Address - County
	908	Employer Telephone Number
	909	Employer Email Address
	910	Employer NAICS (Industry) Code
	911	Size of Workforce
	912	Employer Primary Point of Contact - First Name
	913	Employer Primary Point of Contact - Last Name
	914	Employer Primary Point of Contact - Title
	915	Employer Primary Point of Contact - Phone Number
	916	Employer Primary Point of Contact - Email
	917	Employer Primary Point of Contact - Cell Phone Numb
	918	Wage Rate
	919	Apprentice's Entry Wage (Dollars Per Hour)
	920	Apprentice's Final Wage (Dollars Per Hour)
	921	Journeyworker's (i.e. Experienced Worker's) Entry Wa
	922	Wage Rate Duration #1
	923	Wage Rate Competencies #1
	924	Wage Rate #1 (Dollars Per Hour)

925	Wage Rate #1 (% of Journeyworker Wage)
926	Wage Rate Duration #2
927	Wage Rate Competencies #2
928	Wage Rate #2 (Dollars Per Hour)
929	Wage Rate #2 (% of Journeyworker Wage)
930	Wage Rate Duration #3
931	Wage Rate Competencies #3
932	Wage Rate #3 (Dollars Per Hour)
933	Wage Rate #3 (% of Journeyworker Wage)
934	Wage Rate Duration #4
935	Wage Rate Competencies #4
936	Wage Rate #4 (Dollars Per Hour)
937	Wage Rate #4 (% of Journeyworker Wage)
938	Wage Rate Duration #5
939	Wage Rate Competencies #5
940	Wage Rate #5 (Dollars Per Hour)
941	Wage Rate #5 (% of Journeyworker Wage)
942	Wage Rate Duration #6
943	Wage Rate Competencies #6
944	Wage Rate #6 (Dollars Per Hour)
945	Wage Rate #6 (% of Journeyworker Wage)
946	Wage Rate Duration #7
947	Wage Rate Competencies #7
948	Wage Rate #7 (Dollars Per Hour)

949	Wage Rate #7 (% of Journeyworker Wage)
950	Wage Rate Duration #8
951	Wage Rate Competencies #8
952	Wage Rate #8 (Dollars Per Hour)
953	Wage Rate #8 (% of Journeyworker Wage)
954	Wage Rate Duration #9
955	Wage Rate Competencies #9
956	Wage Rate #9 (Dollars Per Hour)
957	Wage Rate #9 (% of Journeyworker Wage)
958	Wage Rate Duration #10
959	Wage Rate Competencies #10
960	Wage Rate #10 (Dollars Per Hour)
961	Wage Rate #10 (% of Journeyworker Wage)

962	Fringe Benefits
963	Fringe Benefits - Approximate Value

DATA TYPE/ FIELD LENGTH
IN 9
AN 25
AN 50
AN 10
AN 25
AN 2
IN 5
IN 3
AN 55
AN 20
IN 6
IN 6
AN 20
AN 20
IN 9
AN 20
AN 35
AN 20
IN 1
DE 6.2
DE 6.2
DE 6.2
IN 4
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IN 2
DE 6.2
DE 4.2

IN 7

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 Journeyworker Entry Wage. Record 2 if the wage rates for all wage progressions are expressed in dollars ($) per hour. Record 3 if the wage rates for all wage progressions are expressed as as a percentage (%) of the Journeyworker Entry Wage or in dollars ($) per hour, depending on which wage progression the Apprentice is in.
Record the number associated with the apprentice's entry wage rate for this program, expressed in dollars per hour .
Record the number associated with the apprentice's final wage rate for this program, expressed in dollars per hour .
Record the number associated with the journeyworker's entry 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker 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 an 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 Journeyworker Wage, Record the wage rate in percent of Journeyworker Wage associated with the wage progression #10 for this program.

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 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. or any participating employer provides other "bona fide" fringe benefits.
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 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.

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1 = Percent of Journeyworker 2 = Dollars per Hour 3 = Both
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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

DATA ELEMENT NO.	DATA ELEMENT NAME
	DEMOGRAPHIC INFORMATION - Apprenticeship Agreement Info 671 II
1000	Program Number
1001	Apprentice Identification Number
1002	First Name
1003	Last Name
1004	Middle Name
1005	Suffix
1006	Telephone Number
1007	Email Address
1008	Social Security Number
1009	Date of Birth
1010	Gender
1011	Ethnicity: Hispanic/Latino
1012	American Indian / Alaska Native
1013	Asian

1014	Black / African American
1015	Native Hawaiian / Other Pacific Islander
1016	White
1017	Disability Status
1018	Veteran Status
1019	Education Level at Program Entry

1020	Employment Status of Apprentice at Program Entry
PRE-APPRENTICESHIP AND SUPPORTIVE SERVICE INFORMATION	
1100	Participated in Pre-Apprenticeship
1101	Referral Source
1102	Pre-Apprenticeship Program Name
1103	Pre-Apprenticeship Program Address - Line 1
1104	Pre-Apprenticeship Program Address - Line 2
1105	Pre-Apprenticeship Program Address - City
1106	Pre-Apprenticeship Program Address - State
1107	Pre-Apprenticeship Program Address - Zip Code
APPRENTICE STATUS UPDATES	

1200	Apprenticeship Status
1201	Most Recent Date of Change in Apprenticeship Status
1202	Current Wage Progression
1203	Date of most recent wage progression
1204	Received Supportive Service
1205	Supportive Service Types

1206	Placement on a Job Site eligible for Apprenticeship-related tax credit
1207	Apprentice Placed on a Job Site to perform Davis Bacon Activities?
1208	Apprenticeship Agreement Start Date
1209	Date Apprentice begins on-the-job training
1210	Date Apprentice begins related instruction
	CREDENTIALS ATTAINED FROM/DURING APPRENTICESHIP
1300	Date Attained Credential #1
1301	Credential #1 Type
1302	Date Attained Credential #2
1303	Credential #2 Type

1304	Date Attained Credential #3
1305	Credential #3 Type
POST-PARTICIPATION OUTCOMES	
1400	Date of Exit from Apprenticeship/Actual End Date of Apprenticeship
1401	Type of Exit from Apprenticeship
1402	Employed at Completion

1403	Postsecondary Education at Completion
1404	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 Apprenticeship program the apprentice is participating in.
AN12	Record the Aprentice Idenification Number assigned to the apprentice by the Registration Agency.
AN35	Record the first name of the apprentice.
AN35	Record the last name (sometimes called a surname or family name) of the apprentice.
AN35	Record the middle name, if applicable, of the apprentice.
AN4	Record the name suffix, if applicable, of the apprentice (e.g. Jr., Sr., II, III, etc).
IN9	Record the apprentice's primary telephone contact number. Do not include any dashes.
AN35	Record the apprentice's primary email address contact.
IN9	Record the Social Security Number (SSN) assigned to the apprentice.
DT8	Record the Apprentice's Date of Birth
IN1	Record 1 if the apprentice indicates that he is male. Record 2 if the apprentice indicates that she is female. Record 3 if the apprentice indicates that they are non-binary. Record 9 if the apprentice did not self-identify their gender.
IN1	Record 1 if the apprentice 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 apprentice indicates that they do not meet any of these conditions. Record 9 if the apprentice 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.
IN 1	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 1 if the apprentice was employed with the employer or participating employer at the time of their entry into the program. Record 2 if the apprentice was not employed with the employer or participating employer at the time of their entry into the program.
IN 1	Record 1 if the apprentice participated in a pre-apprenticeship program prior to participating in the Registered Apprenticeship program that has a documented partnership with the Registered Apprenticeship program. Record 2 if the apprentice participated in a pre-apprenticeship program prior to participating in the Registered Apprenticeship program that does not have a documented partnership with the Registered Apprenticeship program. Record 0 if the apprentices did not participate in a pre-apprenticeship program prior to participating in the Registered Apprenticeship program.
IN 1	Record 1 if the apprentice was referred to the Registered Apprenticeship program by a WIOA program. Record 2 if the apprentice was referred to the Registered Apprenticeship program by a CTE Apprenticeship program. Record 3 if the apprentice was referred to the Registered Apprenticeship program by the Perkins program. Record 4 if the apprentices was referred to the Registered Apprenticeship program by a program other than those listed above. Record 0 if the apprentice was not referred to the Registered Apprenticeship program.
AN 25	Record the name of the Pre-Apprenticeship program that the apprentice participated in.
AN 50	Record the street address of the Pre-apprenticeship program primary location for the program the apprentice participated in. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action
AN 10	Record the Apartment/Suite/Unit/Room number of the Pre-apprenticeship program primary location for the program the apprentice participated in, if applicable.
AN 25	Record the city of the of the Pre-apprenticeship program primary location for the program the apprentice participated in.
AN 2	Record the 2 letter USPS state code for the state of the Pre-apprenticeship program primary location for the program the apprentice participated in.
IN 5	Report the 5-digit zip code of the Pre-apprenticeship program primary location for the program the apprentice participated in. Please verify the address and zip code using the USPS address validation system: https://tools.usps.com/go/ZipLookupAction!input.action

IN 1	Record the current status of the apprentice as of the date of the report. Record 1 if the apprentice is active in the Registered Apprenticeship program. Record 2 if the apprentice is currently in suspended status. Record 3 if the apprentice's participation in the Registered Apprenticeship program was cancelled at the request of the apprentice. Record 4 if the apprentice's participation in the Registered Apprenticeship program was cancelled as a result of a sponsor's determination. Record 0 if the apprentice has completed the program.
DT 8	Record the most recent date that the apprentice's status changed.
IN 2	Record the step number of the apprentice's current wage progression.
DT 8	Record the most recent date that the step number of the apprentice's wage progression status changed.
IN 4	Record the funding source(s) of the supportive services that were received by the apprentice. Record 1 if the apprentice received supportive services funded by a Workforce Innovation and Opportunity Act (WIOA) program. Record 2 if the apprentice received supportive services funded by the program sponsor. Record 3 if the apprentice received supportive services funded by an Apprenticeship grant. Record 4 if the apprentice recieved supportive services funded by resources that were not federal resources and were not funded by the program sponsor. Record 0 if the apprentice did not receive supportive services.
IN 6	Record all of the types of supportive services received by the apprentice, whether funded directly by the program or another source. Record 1 if the apprentice received Transportation assistance. Record 2 if the apprentice received Housing assistance. Record 3 if the apprentice received Tools, Supplies, or Uniforms assistance. Record 4 if the apprentice received Child/Dependent Care assistance. Record 5 if the apprentice received Needs Related Payments. Record 6 if the apprentice received supportive services other than those listed above. Record 0 if the apprenticedid not receive supportive services. For apprentices where more than one suportive 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 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 apprentice was placed at a job site that was eligible for an Inflation Reduction Act (IRA) tax credit. Record 2 if the apprentice was placed at a job site that was eligible for another Federal tax credit. Record 3 if the apprentice was placed at a job site that was eligible for an State tax credit. Record 0 if the apprentice was not placed at a job site that was eligible for a tax credit. For apprentices where more than one response is applicable, please provide all applicable in this field. For example, if both "IRA" and "Federal" apply, record "12"
IN 1	Record 1 if the apprentice was placed at a job site to perform Davis Bacon Activities. Record 0 Record 1 if the apprentice was not placed at a job site to perform Davis Bacon Activities.
DT 8	Record the Apprenticeship Start Date from the Apprenticeship Agreement
DT 8	Record the date that the apprentice began receiving on-the-job training.
DT 8	Record the date that the apprentice began receiving related instruction.
DT 8	Record the date, from or during the Registered Apprenticeship Program, that the 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 Apprenticeship Program, that the 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 Apprenticeship Program, that the 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 Apprentice left their 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 apprentice's continued participation (including incarceration, hospitalization, and death).
IN 1	Record 1 if the Apprentice exited the program because they completed the program. Record 2 if the Apprentice exited the program because they voluntarily withdrew from the program. Record 3 if the Apprentice transferred to another Registered Apprenticeship program. Record 4 if the Apprentice exited the program because they were forced to withdraw due to events that prevented the apprentice's continued participation (including incarceration, hospitalization, and death). Record 5 if the Apprentice exited the program for reasons other than those described above.
IN 1	For Apprentices who exited from the program because they completed the program: Record 1 if the Apprentice was employed in unsubsidized employment at the time of completion of the program. Record 0 if the Apprentice was not employed in unsubsidized employment at the time of completion of the program. Record 9 if the Apprentice's employment status was unknown at the time of completion. Leave Blank if the Apprentice has not exited the program or exited for reasons other than completion of the program.

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

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1 = Male 2 = Female 3=Non-Binary 9 = Apprentice did not self-identify
1 = Yes 0 = No 9 = Apprentice did not self-identify
1 = Yes 0 = No 9 = Apprentice did not self-identify
1 = Yes 0 = No 9 = Apprentice did not self-identify

1 = Yes 0 = No 9 = Apprentice did not self-identify
1 = Yes 0 = No 9 = Apprentice did not self-identify
1 = Yes 0 = No 9 = Apprentice did not self-identify
1 = Yes 0 = No 9 = Apprentice 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 = Current Employee
2 = New Employee

1 = Yes, pre-apprenticeship with documented relationship
2 = Yes, pre-apprenticeship with no documented relationship
0 = No, did not participate in pre-apprenticeship

1=Referred by WIOA
2=Referred by CTE Apprenticeship
3=Referred by Perkins
4=Other Referrals
0=No Referral

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1=Active Apprentice 2=Suspended 3=Cancelled (At Apprentice Request) 4=Cancelled (Sponsor Determination) 0=Completed
YYYYMMDD
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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= IRA 2= Other Federal Tax Credit 3= State Tax Credit 0= No
1= Yes 0= No
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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

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH
1500	Applicants Invited to Disclose	IN 5
1501	Apprentices Invited to Disclose	IN 5
1502	Applicants that Disclosed a Disability	IN 5
1503	Apprentices that Disclosed a Disability	IN 5

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH

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 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 apprentices in the program during the past year who disclosed a disability.

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DATA ELEMENT NO.	QUESTION ID	TIMING OF QUESTION
1600	SCS-1	Post-Registration
1601	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 RA to a colleague?" 01 = Not at all likely and 10=extremely likely.
What is the primary reason for your score?

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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
1700	ACS-1	Within 3 Months of Becoming Apprentice
1701	ACS-1.a	Within 3 Months of Becoming Apprentice
1702	ACS-2	Annually at the Anniversary of their Registration
1703	ACS-2.a	Annually at the Anniversary of their Registration
1704	ACS-3	Within 30 Days of Completion or Cancellation
1705	ACS-3.a	Within 30 Days of Completion or Cancellation
1706	ACS-4	Within 365 Days of Completion
1707	ACS-4.a	Within 365 Days of Completion
1708	ACS-4.b	Within 365 Days of Completion
1709	ACS-4.c	Within 365 Days of Completion

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

Based on your experience with the apprenticeship program, including:
  - the process for applying and being selected,
  - the on-the-job training you have received so far
  - the 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 RA 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 apprenticeship program, including:
  - the quality of the registered 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 related instruction you have received so far
 	
How likely are you to recommend RA 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 apprenticeship program, including:
  - the quality of the registered apprenticeship program in providing you the skills and competencies you need succeed in your occupation.
  - the on-the-job training you have received
  - the related instruction you have received
 	
How likely are you to recommend RA 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 or otherwise enrolled in Registered Apprenticeship program?
Upon completion of a Registered 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 sector or occupation for which you were trained?

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

DATA ELEMENT NO.	DATA ELEMENT NAME
1800	Total programs approved in a FY
1801	Total programs disapproved in a FY
1802	Median time for program registration
1803	Customer satisfaction metric (total SCS #)
1804	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 programs approved by the Registration Agency in the past year.
Report the total number of programs disapproved by the Registration Agency in the past year.
Report the median amount of time (in days) between program application through program approval/disapproval for prog
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.

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