**OMB Control Number 1225-0088**

**Expires XX/XX/YYYY**

**Overview of OFCCP Learning Management System (Contractor Compliance Institute) Form**

***Login.gov Registration:*** *This information is provided to Login.gov when creating new Contractor Compliance Institute (CCI) accounts.*

* Email address
* Password
* 2nd Factor Authentication method (authenticator app, text or voice message, backup code, security key, government employee ID)

***CCI User Information:*** *These fields pertain to data specific to the user:*

* First Name
* Last Name
* Work Phone Number
* Company Name
* Your Role (dropdown with options: Compliance Officer, hiring Manager, Human Resources Manager, Front Line Supervisor/Manager, Compensation Manager, Recruiter)
* Industry (dropdown with options: Construction, DOL, Supply and Service)
* Current State (dropdown with options for 50 States and DC)
* Fields of Interest (checkboxes where users can select as many as appropriate). Options include:
	+ Accommodation and Food Services
	+ Administrative and Support and Waste Management and Remediation Services
	+ Agriculture, Forestry, Fishing and Hunting
	+ Arts, Entertainment, and Recreation
	+ Construction
	+ Educational Services
	+ Finance and Insurance
	+ Health Care and Social Assistance
	+ Information
	+ Management of Companies and Enterprises
	+ Manufacturing
	+ Mining, Quarrying, and Oil and Gas Extraction
	+ Other Services (except Public Administration)
	+ Professional, Scientific, and Technical Services
	+ Public Administration
	+ Real Estate and Rental and Leasing
	+ Retail Trade
	+ Transportation and Warehousing
	+ Utilities
	+ Wholesale Trade

**CCI Company Contact Information**: *The following fields are provided if a user would like to notify an additional contact at their company about the trainings they have passed, they may add the contact information here.*

* Contact First Name
* Contact Last Name
* Contact Email
* Contact Phone

**PUBLIC BURDEN STATEMENT**: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This form should take about 15 minutes to complete. Completion of this form is completely voluntary, and information collected will be kept private to the extent permitted by law and used for program evaluation purposes only.