

OMB Control No. 2900-XXXX Respondent Burden: 10 Minutes Expiration Date: XX/XX/20XX

INSTRUCTIONS FOR VET TEC 2.0 Programs Checklist

Section 212 of PL 118-210, entitled High Technology Program gives the Secretary of the D provider's programs meet approval requirements based on evidence submitted to VA by

Directions for Completing the Programs Checklist: This checklist must include new p for which continued approval is requested. Items that are considered self-explanato

Column	Name
A	Program Name
B	Type of Program
E	Total Mandatory Tuition and fees

G	Current Resume Subm
H	Instruction in Course Taught at School Submitted
I	Proof of Continuing Education Submitted
J	Two Letters of Reference Attesting to Expertise in Course Taught Submitted
K	Approval Status

L	Approval Status Date
See example below on how to complete form:	
PRIVACY ACT INFORMATION: VA will not disclose the information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1.526 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Veteran Readiness and Employment Records - VA, published in the Federal Register. Your obligation to respond is required in order to obtain or retain benefits. Giving us your SSN account information is mandatory. Applicants are required to provide their SSN under Title 38 U.S.C. 5101 (c) (1). The VA will not deny an individual benefit for refusing to provide your SSN unless the disclosure of the SSN is required by Federal Statute of law in effect prior to January 1, 1975, and still in effect. Information that you furnish may be utilized in computer matching programs with other Federal or State agencies for the purpose of determining your eligibility to receive VA benefits, as well as to collect any amount owed to the United States by virtue of your participation in any benefit program administered by the Department of Veterans Affairs.	

RESPONDENT BURDEN: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 2900-NEW, and it expires XX/XX/20XX. Public reporting burden for this collection of information is estimated to average 20 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate and any other aspect of this collection of information, including suggestions for reducing the burden, to VA Reports Clearance Officer at vapra@va.gov. Please refer to OMB Control No. 2900-NEW in any correspondence. Do not send your completed VA Form 22-10401a to this email address.

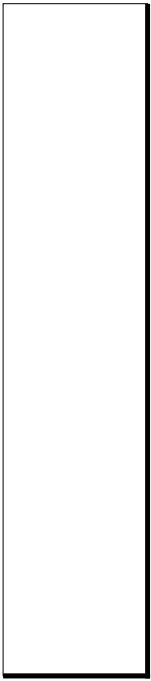
Department of Veterans Affairs (VA) authority to determine whether a VET TEC 2.0 training VET TEC 2.0 Training Provider.			
Programs for which approval is being requested and any currently approved programs are not included in these instructions.			
Directions			
Enter the full program name. This is the formal name of the program as listed in your State approval and/or submitted catalog/brochure.			
Select the approved category under which the requested program falls from the drop down (Computer Programming, Computer Software, Data Processing, Information Sciences or Media Applications).			
Ensure the mandatory tuition and fees for the entire program are provided. If multiple terms, modules etc. are required to complete a program, the mandatory tuition and fees provided should cover all terms, modules etc. Permissible mandatory charges are those assessed by a school that are necessary for the pursuit of an approved program of education and are the same amount for all students (GI Bill and non-GI Bill alike). Only include fees that are both mandatory and assessed before a student can attend a program. Mandatory fees may be for items, such as books, that could possibly be obtained from a source other than the school, as long as the fee is assessed to all students without exception. Fees that are optional, or that can be waived, are not mandatory and cannot be included.			

Select the appropriate option, was a current resume submitted for the instructor listed in column B? Select "yes", "no", or "n/a". The resume must be current and list the Training Provider as a current employer. Mark this question as N/A if the instructor is currently approved by the State to teach course at this school.			
Select the appropriate option, was proof of state approval for instructor in column B to teach course taught in column C at school provided? Select "yes" or "no".			
Select the appropriate option, was proof of continuing education in the course taught in column C submitted for the instructor listed in column B? Select "yes", "no", or "n/a". Mark this answer as n/a if instructor has current certifications in the field of study or approval by state to teach course.			
Select the appropriate option, were two letters of reference attesting to the expertise in course taught in column C for the instructor listed in column B submitted? Select "yes", "no", or "n/a". Mark this answer as n/a if instructor has current certifications in the field of study or approval by state to teach course.			
The VA will make the approval decision and annotate an approval status of approved, denied, or withdrawn.			

The VA will determine the approval status date. This date represents the effective date of the approval decision. For new requests, the VA will enter this date once the approval decision has been determined.			

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[illegible]





1. INSTITUTION NAME

I HEREBY CERTIFY THAT the information provided is true and correct.

3. SCHOOL OFFICIAL NAME

6. List all new programs for which approval is being requested and any currently approved programs. Provide the following information for each program:

PROGRAM NAME	TYPE OF PROGRAM (Select from drop-down)	CATALOG PAGE # WHERE PROGRAM IS LISTED
PRE-DECISIONAL		

NT THROUGH HIGH TECHNOLOGY EDUCATION COURSES (VE
PROGRAMS REQUEST 22-10401a

2. FACILITY CODE (leave blank on initial approval requests)

nation above is true and correct in content and policy.

4. SCHOOL OFFICIAL TITLE

5. DATE

proved programs for which continued approval is requested . See Instructions Tab for

PROGRAM MODALITY (Select from drop-down)	TOTAL MANDATORY TUITION & FEES FOR PROGRAM	DATE FACILITY BEGAN OFFERING PROGRAM	TERM STRUCTURE (Select from drop-down)	TOTAL # OF CLOCK HOURS IN PROGRAM	TOTAL # OF HOURS PER WEEK

T TEC 2.0)

detailed

IS ANY PART OF
PROGRAM OFFERED BY A
THIRD PARTY
CONTRACTOR



1. INSTITUTION NAME:

I HEREBY CERTIFY THAT the information provided is true and correct.

3. SCHOOL OFFICIAL NAME

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PROGRAM NAME	TYPE OF PROGRAM (Select from drop-down)

PRE-DECISIONAL

YMENT THROUGH HIGH TECHNOLOGY EDUCATION COURSES (

REQUEST 22-10401a

	2. FACILITY CODE (leave blank on initial approval request):
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Information below is true and correct in content and policy.

	4. SCHOOL OFFICIAL TITLE
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CATALOG PAGE # WHERE PROGRAM IS LISTED	PROGRAM MODALITY (Select from drop-down)	TOTAL MANDATORY TUITION & FEES FOR PROGRAM	DATE FACILITY BEGAN OFFERING PROGRAM	TERM STRUCTURE (select from drop- down)

VET TEC 2.0) PROGRAMS	
5. DATE	
tailed instructions.	
TOTAL # OF CREDIT HOURS IN PROGRAM	IS ANY PART OF PROGRAM OFFERED BY A THIRD PARTY CONTRACTOR (Select from drop-down)