



ALEXANDRIA | ARLINGTON REGION

**Alexandria/Arlington Regional Workforce Council
Quarterly Meeting
Agenda**

**September 23, 2021
8:30 am to 9:30 am**

Via MS Teams

Welcome Message	<i>Alberto Marino</i>
Officer Elections <ul style="list-style-type: none">• Chair: Alberto Marino• Vice Chair: Ellen Harpel	<i>David Remick</i>
Executive Director's Report/Consent Agenda	<i>David Remick</i>
Regional Labor Market Update	<i>Tucker Plumlee</i>
Economic Development/Workforce System Updates	<i>System Partners</i>
Public Comment Period	<i>David Remick</i>
Adjourn	<i>Alberto Marino</i>

UPCOMING MEETINGS

Meeting	Date	Time	Location
Executive Committee Meeting	December 3, 2021	8:30am – 9:30am	MS Teams
Regional Workforce Council Meeting	December 16, 2021	8:30am – 9:30am	MS Teams
One-Stop Operations Committee Meeting	December 16, 2021	9:30am – 10:30am	MS Teams
Executive Committee Meeting	April 8, 2022	8:30am – 9:30am	MS Teams
Regional Workforce Council Meeting	April 21, 2022	8:30am – 9:30am	MS Teams
One-Stop Operations Committee Meeting	April 21, 2022	9:30am – 10:30am	MS Teams
Executive Committee Meeting	June 10, 2022	8:30am – 9:30am	MS Teams
Regional Workforce Council Meeting	June 23, 2022	8:30am – 9:30am	MS Teams
One-Stop Operations Committee Meeting	June 23, 2022	9:30am – 10:30am	MS Teams



ALEXANDRIA/ARLINGTON
REGIONAL WORKFORCE COUNCIL

Consent Agenda Notes

- June 24, 2021 Meeting Minutes – Recommendation: Approval
- September 10, 2021 Executive Committee Meeting Minutes – Recommendation: Approval
- One-Stop Operator Quarterly Report – For Your Information Only
- Addition to Eligible Training Provider List: Classic Nurses Academy for Medication Aide Program and Nurse Aide Training Program. The application is complete and provides evidence that basic professionalism skills are incorporated into their curricula. – Recommendation: Approval
- Eligible Training Provider Recertifications: 1st CDL Training Center of Northern Virginia, George Mason University, Executive and Professional Education, Global Educational Institute, LLC, La Cocina VA, Spectrum Beauty Academy, LLC, SyLearn, The Skin Care Center LLC, and Together We Bake all submitted their recertification forms. These programs comply with state regulations and the providers presented evidence that basic professionalism skills are incorporated into their curricula. – Recommendation: Approval
- New Regional Workforce Council Policies: The WIOA State Administrator requested that the Regional Workforce Council separate its “Equal Opportunity/Nondiscrimination/General Grievance Policy” into two policies. The WIOA State Administrator approved these two new policies. – Recommendation: Approval
- WIOA Funding Transfer Request: Due to the increased demand for training funds to serve WIOA Adult customers, the Executive Director is requesting the transfer of funds between the two programs. The Council needs to approve this request for the State WIOA Administrator to authorize the funding transfer. – Recommendation: Approval
- New Service & Program Information – For Your Information Only

Consent Agenda Begins

June 24, 2021 Meeting Minutes



ALEXANDRIA | ARLINGTON REGION

**Alexandria/Arlington Regional Workforce Council
Quarterly Meeting Minutes
June 24, 2021
8:30 am to 9:30 am
Virtual Meeting via MS Teams**

Rollcall:

First Name	Last Name	062421 Meeting
Kate	Bates	Present
Lisa	Bauer	Present
Joel	Bernstein	Present
Patrick	Brennan	Absent
Karen	Brown	Present
Dottie	Brown	Present
John	Burczak	Present
Stacey	Butler	Present
Dennis	Desmond	Present
Twanita	Dozier	Absent
James	Egenrieder	Present
John	Gallagher	Present
Lesia	Gilbert	Absent
Daniel	Gomez	Absent
Annette	Haggray	Present
Ellen	Harpel	Present
Tricia	Jacobs	Present
Alberto	Marino	Present
Kris	Martini	Present
Erik	Pages	Present
Kiersten	Portlock	Absent
Cynthia	Richmond	Present
Sean	Steele	Present
Brian	Stout	Absent
Fernando	Torrez	Present
Ryan	Touhill	Present
Jennifer	Van Buren	Present
Monica	West	Present
Ricardo	Wright	Present
Catherine	Pasqualoni	Absent

Staff: Alamelu Dev, Daniel Mekibib, David Remick



ALEXANDRIA | ARLINGTON REGION

Meeting commenced at 8:31 am.

- The June 24, 2021 Consent Agenda was unanimously approved.
- Tucker Plumlee of Northern Virginia Community College provided a regional labor market update.

The meeting adjourned at 9:28 a.m.

8:30 am to 9:30 am
Arlington County Department of Human Services
2100 Washington Blvd, Lower Level Auditorium
Arlington, VA 22204

September 10, 2021 Executive Committee Meeting Minutes



ALEXANDRIA | ARLINGTON REGION

**Alexandria/Arlington Regional Workforce Council
Executive Committee Meeting Agenda
September 10, 2021
8:30 am to 9:30 am**

**Arlington County Department of Human Services
Via MS Teams**

Present: Lisa Bauer, Dennis Desmond, Ellen Harpel, Alberto Marino, Erik Pages

Absent: Shekera Alvarado

Staff: Alamelu Dev, David Remick

Meeting was called to order at 8:30am

- September's Regional Workforce Council Meeting Agenda was reviewed and unanimously approved.
- September's Consent Agenda Package was reviewed and unanimously approved.

Meeting adjourn at 9:14am

One-Stop Operator Quarterly Report

Table 1 S.No.	Period (PY2020 - July 2020 to June 2021)	Q4 PY 20 (April-June 2021)		
	Data measure	WDC	AEC	Total
1	Career Services customer satisfaction results	95%	n/a*	n/a
2	Business Services satisfaction results	100%	n/a*	n/a
3	Businesses served	n/a*		
4	Total One-Stop Center Visitors (duplicated)	921	172	1093
5	Total One-Stop Center Visitors (unduplicated)	776	65	841
6	Total of daily calls to the One-Stop Center due to COVID related shutdown	4149	96	4245
7	New WIOA Title I Adult Participants	2	6	8
8	New WIOA Title I Dislocated Workers Participants	1	0	1
9	New WIOA Title I Youth Participants	2	0	2
10	Total New participants	5	6	11
11	Active WIOA Title 1 Adult Participants	49	40	89
12	Active WIOA Title I Dislocated Workers Participants	24	6	30
13	Active WIOA Title I Youth Participants	5	0	5
14	Total Active participants	78	46	124

Data Source:

Measures #1 to #6 - Respective One-Stop Centers

Measures #7 to 14 - AARWC Data Administrator

* Denotes annual data tracking

PY 20 - YTD		
WDC	AEC	Total
97%	72%	85%
100%	95%	98%
1040		
4371	603	4974
3315	431	3746
15020	335	15355
48	49	97
30	9	39
6	0	6
84	58	142
70	58	128
34	9	43
7	3	10
111	70	181

Table 2 S.No.	Period (PY2020 - July 2020 to June 2021)	PY 20 - YTD	PY20 Goals
	WIOA Title 1 Performance Items	Regional Total	
	Adults		
1(a)	Employment 2nd Quarter after Exit (#)		
1(b)	Employment 2nd Quarter after Exit (%)	71%	79%
2(a)	Employment 4th Quarter after Exit (#)		
2(b)	Employment 4th Quarter after Exit (%)	68%	85%
3(a)	Credential Attainment Rate (#)		
3(b)	Credential Attainment Rate (%)	64%	74.0%
4	Median Earnings 2nd Quarter after Exit	\$ 5,216	\$4,950
	Dislocated Workers		
5(a)	Employment 2nd Quarter after Exit (#)		
5(b)	Employment 2nd Quarter after Exit (%)	80%	85%
6(a)	Employment 4th Quarter after Exit (#)		
6(b)	Employment 4th Quarter after Exit (%)	77%	90%
7(a)	Credential Attainment Rate (#)		
7(b)	Credential Attainment Rate (%)	47%	70%
8	Median Earnings 2nd Quarter after Exit (#)	\$ 11,204	\$8,350
	Youth		
9(a)	Employment 2nd Quarter after Exit (#)		
9(b)	Employment 2nd Quarter after Exit (%)	92%	72.0%
10(a)	Employment 4th Quarter after Exit (#)		
10(b)	Employment 4th Quarter after Exit (%)	85%	62.8%
11(a)	Credential Attainment Rate (#)		
11(b)	Credential Attainment Rate (%)	0%	70%

Note:

Table 2 Data Source: AARWC Data Administrator

Measures #4 , #8 - information to be provided by VCCS.

Eligible Training Providers List - New



Training Provider Application

1. Name of Training Organization CLASSIC NURSES ACADEMY		2. Federal Tax ID# 22-3857624	
3. Mailing Address 85 S. Bragg St #103	4. City ALEXANDRIA	5. State VA	6. Zip 22312
7. Physical Address Same as above	8. City	9. State	10. Zip
11. Name & Title of Contact Person: GLORIA QUIST - PROGRAM DIRECTOR			
12. Email Address of Contact Person: classicnurses@comcast.net		13. Phone Number of Contact Person: 703 658 9575	
14. Mailing Address of Contact Person (if different from above)			
15. Year Established 2003		16. Website Address: web site under rebuilding.	
17. Type of Entity S-Cooperation.			
Other (please Describe) _____			
18. Does your organization provide job search assistance or placement services? (if yes, please describe) Facility recruiters come to the school to offer jobs to students. <input checked="" type="radio"/> Yes <input type="radio"/> No			
19. What types of financial aid are available to students? N/A			
20. Does your organization have a tuition refund policy? (if yes, please attach the policy including time frames and percentage of reimbursement) <input checked="" type="radio"/> Yes <input type="radio"/> No in the curriculum.			
21. Name of Financial Aid Contact Person N/A		22. Email Address of Financial Aid Contact Person N/A	

Training Provider Application

23. Please provide three customer references including contact information:

1.

MINA KHANAL ACHARYA
7370 Lee HWY unit 203
Falls church, VA 22046 -
202 813 6952

2.









Becerra Juan Carlos
5020 7th SOUTH ROAD #202
Arlington, VA 22204
571-447-0860

3.

Nana Yaa Boahemaa Addo
100 S. Van Dorn St. # C202
Alex, VA 22304
571-361-0776

SUPPLEMENTAL INFORMATION

In addition to the attachments associated with the previous sections of this application, copies of the following documents **MUST** be included:

-  1. Copy of Virginia oversight documentation (SCHEV, VA School of Nursing, etc.)
-  2. Copy of License to Conduct Business in Virginia
-  3. Copy of Training Provider Non-discrimination Policy
-  4. Copy of Training Provider Grievance Procedure for individuals with complaints on issues, such as discrimination, accessibility, etc.
-  5. Suspension/Debarment Certification (included in packet)
-  6. Anti-Discrimination Certification (included in packet)
-  7. For each training program, fill out training program application (included in packet) and provide documentation which includes:
 -  1) Training Program description, 2) Outline of the Program, 3) Skills to be obtained.

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION—LOWER TIER COVERED TRANSACTIONS

(1) The prospective lower tier subcontract proposer certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier subcontract proposer is unable to certify to any of the statements in this certification, such prospective subcontract proposer shall attach an explanation to this proposal.

Classic Nurses Academy
Organization

[Signature]
Authorized Signature

7/15/21
Date

GLORIA QUIST, PROGRAM DIRECTOR.
Printed Name and Title

Anti-Discrimination Certification

The training provider certifies that it will comply fully with all non-discrimination and equal opportunity provisions of the laws listed below:

- 1) Nondiscrimination provisions of WIOA Section 188, and its implementing regulations at 29 CFR part 38, which prohibit discrimination against all individuals in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and against beneficiaries on the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIOA Title I financially assisted program or activity.
- 2) Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the basis of race, color and national origin;
- 3) Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities.
- 4) Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age.
- 5) Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs.
- 6) Title II, Subpart A of the Americans with Disabilities Act of 1990, as amended, which prohibits discrimination on the basis of disability.
- 7) Genetic Information and Nondiscrimination Act of 2008, which prohibits discrimination on the basis of genetic information with respect to health insurance and employment.

The training provider also certifies that it will:

- 1) Will collect and maintain data necessary to show compliance with the non-discrimination provisions of the WIOA Sec. 188, as provided in the regulations.
- 2) Will state in all solicitations or advertisements for employees placed by or on behalf of the provider, that the provider is an equal opportunity employer.
- 3) Notices, advertisement and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting the requirements of this section.
- 4) Make any and all reasonable accommodations to provide access and equity of services to disabled persons applying to or enrolled in any approved program of study.

Classic Nurses Academy

Organization

[Signature]

Authorized Signature

7/15/21

Certification and Representation

I, GLORIA QUIST (Name) as Program Director (Title) of
Classic Nurses Academy (Applicant Agency), hereby
certify and represent the following:

1. That the information contained in this application and all attachments is true and correct to the best of my knowledge and belief; and
2. That Classic Nurses Academy (Applicant Entity) will permit representatives of the Workforce Development Board and the Commonwealth of Virginia access to its facilities, staff, and records for the purpose of verifying information contained in this application and for collecting any additional information related to its qualifications as a provider of training services under the WIOA.
3. I understand that approval by a LWDB places the provider and program on the state Eligible Training Provider List but does not guarantee a local area will fund the approved training activity through the issuances of an ITA. That determination is further based on local policy which must include, at minimum, relevance of training to demand occupations that are in demand regionally, availability of local funds, and likelihood that training will support the individual in meeting their career objectives and employment. The selection of a training provider is based on participant choice.

Signed this 15 day of July, 2021

Signature [Signature]

Telephone Number 703 658 9575

Email Address classicnurses@comcast.net

FOR LWDB OFFICE USE ONLY

Date Received by MWDB	Date Approved by MWDB	Date MWDB Submitted to State	Authorized MWDB Signature

**PROCEDURE FOR HANDLING COMPLAINTS
AGAINST NURSE AIDE EDUCATION PROGRAM**

- I. The student may file a complaint against this Nurse Aide Education Program by completing a Complaint form and forwarding it to the Program coordinator.
- II. Upon receiving the written complaint form, the Program coordinator will investigate the complaint within 7 days and record the findings of the investigation, sign and date the form.
- III. The Program coordinator will then meet with the student to discuss the findings and agree with the student about the action required to resolve his/her complaint.

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COMPLAINT AGAINST THE NURSE AIDE EDUCATION PROGRAM (FORM)

Name of person filing complaint: _____ Date _____
Description of complaint: _____

Program coordinator: _____ Date of investigation: _____
Description of investigation: _____

Result/Action following investigation: _____ Date _____

Student's Signature

Previous Registrations

State Corporation Commission

Clerk's Information System

Entity Information

Hi, GLORIA QUIST

Entity Name: CLASSIC NURSES SERVICES, INC.

Entity ID: 05779418



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Entity Type: Stock Corporation

Entity Status: **Active**

Formation Date: 05/21/2002

Reason for Status: Active and In Good Standing

VA Qualification Date: 05/21/2002

Status Date: 05/21/2002

Industry Code: 0 - General

Period of Duration: Perpetual

Jurisdiction: VA

Annual Report Due Date: 05/31/2021

Registration Fee Due Date: Not Required

Charter Fee: \$50.00

Previous Registrations

Entity Name	Entity ID	Entity Status	Document Type	Date Added
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No records to view.



City of Alexandria Business License

Revenue Administration Division, City of Alexandria, 301 King Street, Room 1700, Alexandria, VA 22314

**This license has been issued by the Revenue
Administration Division of the City of Alexandria and
is granted to:**

CLASSIC NURSES SERVICES, INC.
85 S BRAGG ST UNIT:103
Alexandria, VA 22312

License Number: 114223-2021

Account Number: 114223

Tax Period: 2021

Business Name: CLASSIC NURSES SERVICES, INC.

Trade Name: CLASSIC NURSES SERVICES, INC.

Business Location: 85 S BRAGG ST UNIT:103
Alexandria, VA 22312

License Classification(s): Business Svcs & Occupations
9-073-084
Employment Agency

Training Program Application

A separate application form must be completed for each training program or occupational skills course of study.

1. Training Organization CLASSIC NURSES ACADEMY			
2. Contact Person – Name & Title GLORIA QUIST, PROGRAM DIRECTOR			
3. Training Program or stand-alone course name MEDICATION AIDE PROGRAM			
4. Program or course description TRAINS REGISTERED MEDICATION AIDES TO ADMINISTER MEDICATION IN ASSISTED LIVING FACILITIES, GROUP HOMES AND ADULT DAY CARE FACILITIES.			
5. Year Program Established 2003	6. Total Credit or Curriculum Hours 68	7. Number of training weeks or hours 3wks	8. Minimum Class Size 15
9. Is curriculum certified by an accrediting agency or similar national standardization program: <input checked="" type="radio"/> (if yes specify) VBON <input type="radio"/> No			
10. Description of training and skills to be obtained – Attach training program description, include an outline of what is covered in the program and what skills are to be obtained.			
11. Which in-demand industry sectors and occupations best fit with the training program; and the average wage for the primary target occupation for which the training prepares the individual, as published by the Virginia Employment Commission, for the local area. If the in-demand sectors & occupation differ from what is defined by the region, please provide LMI Information to support the sector & occupation. EMPLOYED BY ASSISTED LIVING FACILITIES, GROUP HOMES, ADULT DAY CARE FACILITIES.			
12. Does training lead to an industry recognized credential, diploma, license, or degree? If yes, indicate which. License <input checked="" type="radio"/> Yes <input type="radio"/> No			
13. Is this a stackable credential, part of a sequence to move an individual along a career pathway or up a career ladder? <input type="radio"/> Yes <input checked="" type="radio"/> No			
14. Was this training developed in partnership with a business? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, Name of Business(s):			

15. List Businesses that support this training program:

N/A

16. Describe how you will ensure access to training services throughout the state, including rural areas and through the use of technology:

ON BUS route. 5min walk from bus stop.
on-line classes available.

17. Describe how you will work with the local board to serve individuals with barriers, including individuals with disabilities:

individuals with english language difficulty
would be introduced / directed to ESL classes.

Program Cost

18. Registration/Pre-screening/Admissions Fees	\$ 30.00
19. Tuition (check all items included in Tuition)	\$ 835.00
<input checked="" type="checkbox"/> Books	\$
<input checked="" type="checkbox"/> Required Supplies (Tools, uniforms, etc.)	\$
<input checked="" type="checkbox"/> Testing/Exam Cost	\$
Licensure/Certification Cost(s)	\$ 120 (paid by student)
Other Required Fees	\$
20. Total Cost to Complete Curriculum/Course	\$ 865.00

Criteria for Admission

21. Describe the prerequisites or skills and knowledge required prior to the commencement of training:

Be able to read and write and understand
English.

22. Is a High School Diploma or GED required:

Yes

No



COMMONWEALTH of VIRGINIA

Sandra Whitley Ryals
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Richmond, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

Virginia Board of Nursing
Jay Douglas RN, MSM, CSAC
Executive Director

Board of Nursing (804) 367-4555
Nurse Aide Registry (804) 367-4569
FAX (804) 527-4455

March 5, 2008

Gloria B. Quist, Program Director
Classic Nurses Academy
85 South Bragg Street #200-F
Alexandria, VA 22312

Dear Ms. Quist:

Thank you for submitting an application for the Medication Aide Training Program. The Board has reviewed your application and found it meets all the requirements of a Medication Aide Training program for Assisted Living Facilities.

The program provider number for **Classic Nurses Academy** is **0030000090**.

Please be sure that this number appears on the certificate of completion for each graduate of your program. **As a reminder, please also ensure that you retain all records for at least five years according to 18VAC90-60-70(B).** Please also find attached the Board approved curriculum and the 8 hour refresher course to be used in your program.

If you have questions or concerns, please do not hesitate to call. I can be reached at 1-804-367-4614 or you can email me at Brenda.Krohn@dhp.virginia.gov. I look forward to working with you in the future.

Sincerely,

Brenda Krohn RN, MS
Deputy Executive Director/Medication Aide Registry Manager



CLASSIC NURSES ACADEMY

MEDICATION AIDE TRAINING SYLLABUS

Tel: 703-658-9575, Fax: 703 658 9517

INSTRUCTORS: Gloria Quist, RN, 703 932 3471.

Clinical Instructor- Gloria Quist, RN

Course Description: **Medication Aide Training.**

Class Schedules: **MONDAYS – THURSDAYS (3wks) / SATURDAYS- SUNDAYS (6weekends)**

Weekday Classes 9am -3.30pm / Weekend Classes: 11am-5.30pm Lecture and Skills Practice

Clinical Schedule Times will be discussed with students during the course of the class

Course Objectives:

At the completion of this class, the student will be able to:

1. Identify legal and ethical issues in medication management and identify client's rights regarding medications, treatment decisions and confidentiality.
2. Recognize emergencies and other health-threatening conditions and respond appropriately.
3. Identify medication terminology and abbreviations, and identify classes of medication.
4. Identify basic principles of medication administration and special considerations for drug use in the elderly.
5. Assist with self-administration of oral, eye, ear, nasal, topical, rectal, vaginal, transdermal, nebulizers, soaks, sitz baths, inhalation, epi-pens and oral hygiene medications.
6. Implement standard precautions, and explain principles of maintaining aseptic techniques.
7. Identify three commonly used forms for documentation, and demonstrate proper procedure for receiving and transcribing healthcare provider's orders.

8. Identify procedures for maintaining inventory, storing, securing and proper disposal of medication including controlled substances.
9. Explain basic fact about Diabetes Mellitus, and identify activities involved in the management of diabetes.
10. Perform finger-stick for blood –glucose monitoring.
11. Administer insulin injection.

Evaluation and Testing: Each student will be evaluated in THREE AREAS for satisfactory completion of the program. The final grade will be based on weighted scores achieved on all handouts, quizzes, and home works which will equal 40% of the total grade, and eight (8) chapter and 1 comprehensive exams of multiple choice and T/F questions which will carry 60% of the total grade.

1. **Classroom Skills:** Written posttest after each day's series of units with 80% average required for passing. A student who scores less than 80% average on a unit series test will be allowed to retake the test once.
2. **Clinical Skills:** Each student must demonstrate skills with satisfactory competence in the lab as listed on the performance record before actual clinical contact with a resident. Clinical assignment and objective for each unit must be completed with a satisfactory demonstration in all areas as outlined in the lab assignment and objective sheet before each unit.
3. Participation in class activities must be demonstrated by preparedness for class and participation in discussions role-play and practice demonstrations.

Methods of Instruction: Methods of instructions shall include, power points presentation discussions, questioning, role-play, simulations, demonstrations (either audio-visual or actual hands on) and by return demonstration skills.

Assignments: Reading and homework assignments will be given at the end of each unit of classroom instruction so that the next unit may be studied. Selected handouts will be included in the reading assignments for various units. These handouts will be returned upon completion and on a determined day. Students are expected to complete the reading assignments prior to coming to class.

Clinical assignments will be given at the conclusion of the classroom instruction for a particular unit of study. Clinical assignments and objectives will be directed to the application of classroom instruction. The assignment will be for total patient care under the supervision of

clinical instructor or instructors. Special emphasis will be placed on demonstration of clinical competence for that unit.

Grading: A= 90-100% B=80-89% C=70-79% D= 60-69% F=below 60%

Examinations are to be taken as scheduled. Regardless of reason all rescheduled exams will have 5% deducted from the final score and must be completed by the end of the week on which the test was originally scheduled. Failure to do so will result in forfeiture of the available points. A minimum of “C” is required to satisfactorily complete the program. **Students found cheating in class will be dismissed from class and will have to explain their behavior in writing, and schedule a meeting with the director of the program.**

Students will be expected to complete their lab skills practice check off worksheet with satisfactory grades prior to beginning clinical.

Required Text and Work Books with handouts will be supplied by the school.

Medication Aide Curriculum for Registered Medication Aides.

Notification Process: Notification of illness or emergency must be made by phone. A message can be left at (703) 658-9575 or (703) 932-3471. Messages will be checked prior to every class session and will be responded to immediately by phone.

School Policies: The following policies are observed in class and clinical areas.

Lateness & Attendance: Plan to arrive in school **10** minutes before class starts and **15** minutes before clinical. If you plan to arrive later than the scheduled class or clinical time, call your instructor before the start of class / clinical. Absenteeism will not be tolerated. Students will be responsible for the subjects missed as a result of being absent. **NO** absenteeism in clinical. If a student misses clinical session he/she will have to make it up in the next scheduled class in order to satisfy graduation requirements.

Electronic Devices: Cellular phones, beepers or any other electronic devices are not permitted in class and clinical areas. Turn off electronic devices during class and clinical periods.

Misconduct: Any student discovered causing disturbance or engaging in any form of misconduct would be dismissed from class / clinical area. Students who misconduct themselves will have to explain in writing to the program director the reason for their misbehavior. Students will be counseled and appropriate disciplinary action will be taken to prevent such incidents from happening again. Students who display insubordination or disrespect towards instructors will be dismissed from the program and **NO** fees will be refunded. Students who have any complaints can request a meeting with the program director to discuss their grievances.

Non Discrimination Policy: Classic Nurses Academy does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, in any of its activities or operations. We are

committed to providing an inclusive and welcoming environment for all members of our staff, students and volunteers.

Equal Opportunity Policy: Classic Nurses Academy is an equal opportunity employer. We will not discriminate and will take affirmative action measures to ensure against discrimination in employment, recruitment, advertisements for employment, compensation, termination, upgrading, promotions, and other conditions of employment against any employee, student or job applicant on the bases of race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression.

Registration and payment Options: First option is a one-time full payment or \$865.00. Second option, student is required to pay \$30 for registration fee and \$70 for books prior to commencement of class. The remainder tuition will be split into two parts. First payment of \$355 will be due the first week of class, Second payment of \$410 due the second week.. Payments are accepted by Cash, Money order, Business or personal checks and credit/ debit cards.

**** All Payments shall be Made in full prior to the clinical rotation which falls on the fourth / fifth week of class****

Cancellation and Refund Policy: An applicant who provides written notice of cancellation within three working days after registration is entitled to a refund of all monies paid except for the cost of books and registration no later than 30 days of receiving the notice of cancellation. The school shall provide the total amount paid less the costs of books and registration.

Refund after the commencement of class: A student who chooses to withdraw from school a week after commencement of class will not be granted any refund.

Uniform Code: White scrub top and pants, name tag and comfortable white tennis shoes.

**** Clinical Site: Lincolnia Assisted Living. 4710 N. Chambliss Street, Alexandria VA 22312****

TOPIC OUTLINE FOR 12-DAY SESSIONS

Day	Topics	Skill Practice	Learning Activity	Quizzes, Tests and Homework
1	Identify legal and ethical issues in medication management. Identify requirement to report client abuse neglect or exploitation.	Definition hand out, 1.1A Legal and Ethical issues	Ch. 1	Exam – 1
2	Preparing for safe administration of medication, explain the use of international time. Identify the five rights of medication administration.	Identify MAR & Physician order forms Translating HCP orders	Ch. 2	Exam – 2 Turn in home work before class.
3	Define medical terminology and abbreviations. Explain how drugs are classified and identify Virginia drug labeling requirements.	Identify common Abbreviations & Measurements used in Med. administration	Ch. 3	Exam – 3 Turn in home work before class.
4	Identify basic principles of medication administration. Administer or assist with administration of oral, eye, and ear, nasal, topical, compresses, vaginal, rectal, sitz-baths, inhalations, nebulizers transdermal and epi-pens medications.	Med. Admin. Practices	Ch. 4	Exam – 4 Turn in home work before class.
5	Identify commonly used forms for documentation. Demonstrate procedures for receiving and transcribing health care provider's orders.	Transcribe MAR Noting physician orders,	Ch. 5	Exam – 5 Turn in home work before class.
6	Identify proper procedures for storing, securing and disposing off medications. Maintain inventory of medications including controlled substances.	Practicing documenting using special narcotic & Med. Error forms	Ch. 6	Exam – 6 Turn in home work before class.
7	Special issues in medication administration.		Ch. 7	Exam – 7 Turn in home work before class.

	Identify common concerns of drug use in the elderly.			
8	Explain basic facts about DM. Identify activities involved in the management of DM. List signs and symptoms of hypoglycemia and hyperglycemia.	Identify common insulin inj. Sites Perform blood glucose check Insulin draw & administration	Ch. 8	Exam – 8 Final day to turn in all work sheet and home work.
9	CLINICAL	5hrs.		
10	CLINICAL	5hrs.		
11	CLINICAL	5hrs.		
12	CLINICAL	5hrs.		
<p>Clinical schedule dates, Final comprehensive exam and graduation dates will be discussed during the course of the class.</p> <p>Students will be required to register. \$50 VA Board of Nursing and \$70 for PSI (Board Licensure Exam) registration. Don't forget to make provision for it.</p>				

Training Program Application

A separate application form must be completed for each training program or occupational skills course of study.

1. Training Organization CLASSIC NURSES ACADEMY			
2. Contact Person – Name & Title GLORIA QUIST PROGRAM DIRECTOR			
3. Training Program or stand-alone course name NURSE AIDE TRAINING PROGRAM			
4. Program or course description TRAINS NURSE AIDES FOR ACUTE AND LONG TERM CARE FACILITY			
5. Year Program Established 2003	6. Total Credit or Curriculum Hours 120	7. Number of training weeks or hours 4.5 wks.	8. Minimum Class Size 15
9. Is curriculum certified by an accrediting agency or similar national standardization program: <input checked="" type="radio"/> Yes (if yes specify) VBON <input type="radio"/> No			
10. Description of training and skills to be obtained – Attach training program description, include an outline of what is covered in the program and what skills are to be obtained.			
11. Which in-demand industry sectors and occupations best fit with the training program; and the average wage for the primary target occupation for which the training prepares the individual, as published by the Virginia Employment Commission, for the local area. If the in-demand sectors & occupation differ from what is defined by the region, please provide LMI Information to support the sector & occupation. HEALTH CARE, Average wage 15/hr.			
12. Does training lead to an industry recognized credential, diploma, license, or degree? If yes, indicate which. license <input checked="" type="radio"/> Yes <input type="radio"/> No			
13. Is this a stackable credential, part of a sequence to move an individual along a career pathway or up a career ladder? Yes <input checked="" type="radio"/> No			
14. Was this training developed in partnership with a business? Yes <input checked="" type="radio"/> No			
If yes, Name of Business(s):			

15. List Businesses that support this training program:

N/A

16. Describe how you will ensure access to training services throughout the state, including rural areas and through the use of technology:

On bus route. 5min walk from bus stop.
on-line classes available.

17. Describe how you will work with the local board to serve individuals with barriers, including individuals with disabilities:

Individuals with language problems would be introduced /directed to ESL classes.

Program Cost

18. Registration/Pre-screening/Admissions Fees	\$	30.00
19. Tuition (check all items included in Tuition)	\$	1235.00
✓Books	\$	
Required Supplies(Tools, uniforms, etc.)	\$	
✓Testing/Exam Cost	\$	
Licensure/Certification Cost(s)	\$	140.00 (paid by student)
Other Required Fees	\$	
20. Total Cost to Complete Curriculum/Course	\$	1,265.00

Criteria for Admission

21. Describe the prerequisites or skills and knowledge required prior to the commencement of training:

Candidate must be able to read and write and pass a pre-entrance exam. 80% required.
Covid. Vaccinated, CPR certified, Negative TB test result

22. Is a High School Diploma or GED required:

Yes

No



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
2960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367-4400
FAX (804) 527-4475

Virginia Board of Nursing
Jay P. Douglas, RN, MSM, CSAC, FRE
Executive Director

Board of Nursing (804) 367-4515
Nurse Aide Registry (804) 367-4639
FAX (804) 527-4455

March 11, 2021

Gloria Quist, RN
Program Coordinator
Classic Nurses Academy
85 S. Bragg Street, Suite 103
Alexandria, VA 22312

Program Code: 100597

Dear Ms. Quist:

Thank you for your attention and response to the Virginia Board of Nursing's request for additional documentation concerning the requirements for the nurse aide education program at Classic Nurses Academy. It has been determined that with the implementation of the changes indicated in the additional documentation, requirements for continued approval have now been met.

Therefore, the program at Classic Nurses Academy will continue to be listed as a nurse aide education program approved by the Virginia Board of Nursing.

Section 18 VAC 90-26-60 (A)(2) of the Board of Nursing Regulations requires that each nurse aide education program prepare and submit a program evaluation report in the intervening year that an on-site review is not conducted. The Board will provide a form for this purpose.

Best wishes as you continue to educate nurse aide students and to assist them toward their goal of state certification. Please do not hesitate to contact our office if we can be of assistance in this endeavor.

Sincerely,

Jacquelyn Wilmoth RN, MSN

Jacquelyn Wilmoth, MSN, RN
Deputy Executive Director

Cc: Charles Antwi, Owner
Samantha Baugher, BSN, MHAEd, Education Program Inspector



CLASSIC NURSES ACADEMY NURSE AIDE PROGRAM

AM & PM CLASS SYLLABUS (1/21)

85 S. BRAGG STREET # 103

ALEXANDRIA, VA. 22312

TEL: 703- 658-9575, 571 241 6351, FAX: 703 658 9517

Primary Instructors: Gloria B. Quist RN, 703 932 3471,

Other Instructors: Sakyiwa Williams RN, 571-575-6280, Francis Lebbie, LPN. 571-234-2571

Course Description: Nurse Aide Training

Class & Clinical / Lab Schedules: MONDAY – FRIDAY

9am-3.30pm Morning Class (on-line and in-person classes)

4pm – 10.30pm Evening Class (in-person classes only)

Morning Class Lunch Break: 12:pm-12.30p.m.

Evening Class Dinner Break: 7: p-7:30p

Clinical: Morning: 0700-1530, (Both AM & PM classes will take morning clinical rotation. (Mon-Fri.)

Course Objectives:

At the completion of this course, the student will be able to:

1. Provide direct care and / assistance to the elderly or disabled persons in the Long-term care facility under the supervision of a licensed nurse, respecting the rights and dignity of the resident as an individual.
2. Utilize the holistic concept in caring for the residents by stating at least one physical, social, emotional and spiritual need of the residents.
3. Apply basic skills in observation, communication and certain nursing techniques that will provide a safe, clean and therapeutic environment for all residents.
4. Will be able to communicate and interact competently with residents, family members and care teams on a one on one basis.
5. Demonstrate an understanding of restorative nursing principles by utilizing the skills needed to promote the independence of the resident under the supervision of a licensed nurse.
6. Functions in other long term care facilities providing nursing aide care to the elderly and disabled.
7. Will be able to demonstrate behavior in support and promotion of resident's rights.
8. Will be able to demonstrate skills in observation, reporting and documentation needed to participate in the assessment of resident's health, physical condition and wellbeing
9. **Teach resident in self-care according to client's abilities and as directed by a supervisor.**
10. **Take both the written and skills NNAAP exam, and if successful become certified in Virginia.**

Evaluation and Testing: Each student will be evaluated in THREE AREAS for satisfactory completion of the program. The final grade will be based on weighted scores achieved on all quizzes, which will equal to 20% of the total grade, attendance will carry 5% and the final comprehensive exam of 100 multiple choice questions will carry 75% of the total grade.

1. **Post lecture Test:** Written posttest after each day's series of units with 50% average required for passing. A student who scores less than average on a unit series will be allowed to retake the test once.
2. **Lab Skills:** Each student must demonstrate skills with satisfactory competence in the lab as listed on the **Skills Check List:** before actual clinical contact with a resident. Clinical assignment and objective for each unit must be completed with a satisfactory demonstration in all areas as outlined in the **Lab Assignment** and **Objective** sheet for each unit.
3. **Participation in Class Activities:** Student must demonstrate by preparedness for class and participation in discussions, role-plays and return skills demonstrations.

Methods of Instruction: Methods of instructions shall include discussions, questioning, role-play, simulation and demonstrations (Power Points, Audio- visual (Ruth Mayer's Essential. Skills – YouTube) and actual hands on)

Assignments: Reading and workbook assignments will be given at the end of each unit of classroom instruction so that the next unit may be studied. Selected handouts will be included in the reading assignments for various units. These handouts and workbook assignments should be completed and returned the next day. Students are expected to complete the reading assignment for the next chapter prior to coming to class.

Clinical assignments will be given at the conclusion of the classroom instruction for a particular unit of study, directed to the application of classroom instruction. The assignment will be for total patient care under the supervision of clinical instructor or instructors. Special emphasis will be placed on demonstration of clinical competence for that unit of study.

Module Grade: A-90-100% B-80-89% C-70-79% D-60-69 F-Below 60%

Examinations are to be taken as scheduled. Regardless of reason, all rescheduled exams will have 5% deducted from the final score and must be completed by the end of the week which the test was originally scheduled. Failure to do so will result in forfeiture of the available points. A minimum of "C" is required to satisfactorily complete the program. Student found cheating in class will be dismissed from class and will have to explain behavior in writing and schedule a meeting with the director of the program.

Students will be expected to complete their lab skills practice check off with 100% accuracy prior to final skills return demonstration.

Required Text & Work Books:

****VIRGINIA BOARD OF NURSING NURSE AIDE CURRICULUM (2018)**

Notification Process: Notification of illness or emergency must be by phone and message left at **571 241 6351, 703 658 9575**, or contact instructor at the given telephone numbers above. Messages will be checked prior to every class session and emergencies and sick calls will be returned ASAP.

School Policies: The following policies are observed in class and clinical areas:

Lateness & Attendance: Students should plan to arrive in school 10 before class starts and 15min. before clinical. If you plan to arrive later than the scheduled class or clinical time, call your instructor before the start of class/clinical. Upon missing a class student will be responsible for subject content taught in class. Absenteeism will not be tolerated. **NO absenteeism in Clinical / Lab.** If a student misses clinical session he/she will have to make it up in the next class in order to satisfy graduation requirements.

Electronic Devices: Cellular phones, beepers or any other electronic paging or beeping devices are not permitted in class and clinical areas. Turn off electronic beeping / paging devices during class and clinical periods. Give the schools main phone numbers **703 658 9575 / 571 241 6351** as emergency contact to your family to contact you if need be.

Misconduct: Any student discovered in engaging in any form of misconduct would be dismissed from class /clinical area. Students who misconduct themselves will have to explain in writing to the program director, the reason. Student will be counseled, and appropriate disciplinary action taken to prevent incident from happening again. Students who display insubordination or disrespect for instructors will be dismissed from the program and only 20% of their fully- paid fees will be refunded.

Non-Discrimination Policy: Classic Nurses Academy does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, in any of its activities or operations. We are committed to providing an inclusive and welcoming environment for all members of our staff, students and volunteers.

Equal Opportunity Policy: Classic Nurses Academy is an equal opportunity employer. We will not discriminate and will take affirmative action measures to ensure against discrimination in employment, recruitment, advertisements for employment, compensation, termination, upgrading, promotions, and other conditions of employment against any employee, student or job applicant on the bases of race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression.

Registration and payment Options: First option is a one-time full payment. Second option, student is required to pay \$30 for registration fee and \$70 for books prior to commencement of class. The remainder will be split into three parts. First payment of \$400 will be due the **first** week of class, Second payment of \$400 due the **second** week and third payment of \$365 due the **third** week of class. These payments sum up to the total amount of \$1,265.00. Payments are accepted by Cash, Money order, Business or personal checks and credit/debit cards.

**** All Payments shall be Made in full prior to the clinical rotation which falls on the fourth / fifth week of class****

Cancellation and Refund Policy: An applicant who provides written notice of cancellation within three working days after registration is entitled to a refund of all monies paid **except for the cost of books and registration** no later than 30 days of receiving the notice of cancellation.

Refund after the commencement of class: A student who chooses to withdraw from school a week after commencement of class will not be granted any refund.

****Uniform Code: Royal blue Nurses' Scrubs, Gait Belt and name tag at all times when in clinical setting.**

**** Clinical Site: Lincolnia Assisted Living, 4710 N. Chambliss Street, Alexandria VA 2231**

CLASSIC NURSES ACADEMY NURSE AIDE PROGRAM
TOPIC OUTLINE
23- Days Session

DAY	TOPICS	TEACHING TOOLS/LAB	Unit	STUDENT EVALUATION
1	<p>Nurse Aides in the Long-Term Care and Acute Care:</p> <p>Unit sub-Topics:</p> <ol style="list-style-type: none"> 1. Long-Term Care and Acute Care 2. Payment Options for long term care facilities 3. OBRA Act. Of 1987 (Omnibus Budget Reconciliation Act. Of 1987) 4. Healthcare Team 5. Common tasks of the Nurse Aide 6. Professional behavior of the Nurse Aide 7. Delegation of duties to NA by the RN (see Regulations Governing the Practice of nursing 18 VAC90-20-420 to 460) 8. Applying for employment as a Nurse Aide <p>Communication and Interpersonal Skills:</p> <p>Unit sub-Topics:</p> <ol style="list-style-type: none"> 1. Elements of Communication 2. Senses in Communication 3. Communication among health care team 4. Communication with specific populations 5. Interpersonal skills for Nurse Aides 6. Conflicts Management 7. Social media and cellphone use 	<p>Power point presentations</p> <p>*Hand washing (page 28.CHB) *Donning and Removing PPE (Gown and Gloves) (Page 31.CHB) Bed Operations</p> <p>Skills practice in school lab</p> <p>Video Review – (Ruth Mayer’s Essential Skills on You tube)</p> <p>Handout: Guidance Document 90-59</p> <p>Regulations Governing CNA’s</p>	<p>Unit 1</p> <p>Unit 2</p>	<p>Return Demonstrate Skills in school lab</p> <p>Student’s participation in classroom discussions & scenarios:</p> <p>Post lecture quizzes</p> <p>Chapter Test</p>
2	<p>Infection Control:</p> <p>Unit sub-Topics:</p> <ol style="list-style-type: none"> 1. Overview of infection 2. Prevention of infection <p>Safety Measures:</p> <p>Unit sub-Topics:</p> <ol style="list-style-type: none"> 1. Prevention of common accidents 2. Workplace safety 	<p>*Applies one knee-High Elastic Stocking (page 28.CHB) *Performs passive range of motion (PROM) For one knee and one ankle (page 36.CHB) *Performs passive range of motion (PROM) for one shoulder (page 36.CHB)</p> <p>Video Review – (Ruth Mayer’s Essential Skills on You tube)</p>	<p>Unit 3</p> <p>Unit 4</p>	<p>Return Demonstrate Skills in school lab</p> <p>Student’s participation in classroom discussions & scenarios:</p>

				Post lecture quizzes Chapter Test
3	Emergency Measures: Unit sub-Topics: 1.Life Threatening Emergency Measures 2.Basic Emergency Measures Clients Rights: Unit sub-Topics: 1.Basic rights of all Clients / Residents 2.Rights of Clients / Residents of Long-Term Care facilities 3. Holistic needs of residents in long-term care facilities	Skills practice & Video Review – (Ruth Mayer’s Essential Skills on You tube) Post mortem care. Collecting Specimen. (Urine and Sputum)	Unit 5 Unit 6	Return Demonstrate Skills in school lab Student’s participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
4	Skills day	*Assists with use of bedpan (page 30.CHB) *Measures and records Urinary output (page35.CHB) *Provides perineal care for female (page 40.CHB) *Positions on side (page 38 CHB) Make an Occupied Bed Making a Closed Bed Making an open bed *Dress Client with affected (weak) right arm (page32.CHB) *Transfers from bed to wheelchair using transfer belt (page 41.CHB) *Measures and records weight of ambulatory client (page 35. CHB) *Assists to ambulate using transfer belt (page 29.CHB) Incontinent care (Applying and removing Briefs) Finger nail care Skills practice & Video Review – (Ruth Mayer’s Essential Skills on You tube)		Return Demonstrations

5	Basic Skills: Unit sub-Topics: 1.How to Begin and End Resident Care 2.Recognizing Changes in body functions and the importance of reporting these changes to the appropriate licensed nurse 3.Caring for the resident's environment 4.Vital Signs (VS)		Unit 7	
6	Personal Care Skills: Unit sub-Topics: 1.Guidlines for assisting with Personal Care 2. Bathing 3.Oral Hygiene	*Provides mouth care (page 39.CHB) *Clean upper or Lower Denture (page 30.CHB) *Counts and records radial pulse (page 31.CHB) *Counts and records respirations (page 31.CHB) *Measures and records manual Blood pressure (page 42.CHB) Skills practice & Video Review – (Ruth Mayer's Essential Skills on You tube)	Unit 8	Return Demonstrate Skills in school lab Student's participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
7	Personal Care Skills: Unit sub-Topics: 4.Grooming 5.Dressing 6.Toiletting	Skills practice & video review Video Review – (Ruth Mayer's Essential Skills on You tube) (2hrs.)	Unit 8	Return Demonstrate Skills in school lab Student's participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
8	Personal Care Skills:	Skills practice & video review	Unit 8	Return Demonstrate

	Unit sub-Topics: 7. Eating and Hydration 8. Care of the skin(Integumentary System) 9. Transfer, Positioning and Turning	Video Review – (Ruth Mayer’s Essential Skills on You tube) (2hrs.)		Skills in school lab Student’s participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
9	Individual Client’s Need, Including Mental and Social service Needs: Unit sub-Topics: 1.Basic Psychosocial Needs 2.Mental Health 3.Mental Illness 4. Guidelines to modify the Nurse Aide’s behavior in response to the behavior of Client/ Residents 5. Behavior management techniques 6. Supporting age-appropriate behavior 7. Responding appropriately to client’s/Resident’s behavior 8. Family/Concerned others as sources of emotional support 9. Providing appropriate clinical care to the aged and disabled	Skills practice & video review Video Review – (Ruth Mayer’s Essential Skills on You tube) *Closed Bed *Open bed *Temperature (O,R,A)	Unit 9	Return Demonstrate Skills in school lab Student’s participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
10	Special Needs client / Resident: Unit sub-Topics: 1.Nervous system 2.Cognitive Impairment 3.Endocrine System	Skills practice & Video Review – (Ruth Mayer’s Essential Skills on You tube)	Unit 10	Return Demonstrate Skills in school lab Student’s participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
11	Restorative Services: Unit sub-Topics:	Skills practice & Video Review – (Ruth Mayer’s Essential Skills on You tube)	Unit 11	Return Demonstrate Skills in school lab

	1. Definition 2. Guidelines of rehabilitation and restorative Care 3. Methods to teach residents to participate in self-care 4. Assistive Devices 5. Range of Motion Exercises 6. turning and positioning in bed and chair 7. Prosthetic and orthotic devices 8. Bladder and bowel training	*Give modified bed bath (face and one arm, hand and underarm)(page 33.CHB) *Feed client who cannot feed self (page 33.CHB) *Provides foot care on one foot (page 38.CHB) *Provides catheter care for female page 37.CHB)		Student's participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
12	Respiratory System, Cardiovascular System, HIV/Aids, Cancer and Care of the Resident when Death is Eminent: Unit sub-Topics: 1. Respiratory System 2. Cardiovascular System 3. Resident with Aids (Acquired Immune Deficiency Syndrome) 4. The Resident with Cancer 5. Care of the Resident when Death is eminent	Skills practice & video review – (Ruth Mayer's Essential Skills on You tube) Handout: Laws and Regulations for certified nurse aides	Unit 12	Return Demonstrate Skills in school lab Student's participation in classroom discussions & scenarios: Post lecture quizzes Chapter Test
13	Admission, Transfer and Discharge Unit sub-Topics: 1. Admission to the Long-term Care Facility 2. Transfer of resident 3. Discharge	Skills demo & video review (Ruth Mayer's Essential Skills)	Unit 13	PRACTICE EXAM
14	Legal and regulatory Aspect of Practice for the Certified Nurse Aide: Unit sub-Topics: 1. Professional Behaviors of a Nurse Aide 2. Nurse Aide Code of Ethics	Skills demo & video review (Ruth Mayer's Essential Skills)	Unit 14	PRACTICE EXAM

	3.Conflict Management 4.Regulatory Agencies for Nurse Aides 5.Inappropriate behavior for the Nurse Aide 6.Mandated Reporter Authority (63.2-1606of VA code) 7.Disciplinary Proceedings against a Certified Nurse Aide 8.Responsibilities of Certified Nurse Aides to the Virginia Board of Nursing (BON) (18VAC9-25-10 et seq) 9.Responsibilities of Employers of the Nurse Aide to the Board of Nursing 10.Obtaining Certification			
15	Exam 3 (Ch. 7-10)	Skills demo & video review (Ruth Mayer's Essential Skills) Final day for skills return demonstration MUST PASS WITH 100% ACCURACY		PRACTICE EXAM
16	CLINICAL SKILLS	8hrs.		
17	CLINICAL SKILLS	8hrs.		
18	CLINICAL SKILLS	8hrs.		
19	CLINICAL SKILLS	8hrs.		
20	CLINICAL SKILLS	8hrs.		
21	LAB &Class	6hrs.		Must pass with 100% accuracy
22	Final Comp. Exam. MUST PASS WITH 85% AND UP TO QUALIFY TO ATTEMPT THE VIRGINIA STATE BOARD EXAM. Complete NNAAP application forms, issue certificate of completion & skill checklist to each student.	6hrs. (Class &Clinical Hrs.		
23	Final Day for Make-ups	4hrs.		

Eligible Training Providers List - Recertification

Approved 8/19/21
[Signature]

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: 1st CDL Training Center of NOVA

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		CDL A (Tractor Trailer)	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412		All Students 215	WIOA Students Only 50
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)		153	46
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)		150	29
Number of students who obtained unsubsidized employment after completing your training program.			
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.		23	23
Is the information listed on your initial application current?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.			
Name of Authorized Representative:		Nadeem Ikram	
Title:		Director	
Email:		nadeem@1stcdltrainingcenter.com	
Telephone:		703 347 7999	
Date:		08/04/2021	

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
2100 WASHINGTON BOULEVARD, 1ST FLOOR
ARLINGTON, VA 22204
703.228.1412 • WORKFORCECOUNCIL.ARLINGTONVA.US

Handwritten: 8/19/21
Signature:

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: CDL B(Dump Truck)

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		CDL B (Dump Truck)	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	13	4	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	12 <i>92%</i>	3 <i>75%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	12 <i>100%</i>	3 <i>100%</i>	
Number of students who obtained unsubsidized employment after completing your training program.			
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.		21 21	
Is the information listed on your initial application current?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.			
Name of Authorized Representative:		Nadeem Ikram	Date: 04/04/2021
Title:		Director	
Email:	nadeem@lstcdltrainingcenter.com	Telephone:	703 347 7999

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
2100 WASHINGTON BOULEVARD, 1ST FLOOR
ARLINGTON, VA 22204
703.228.1412 • WORKFORCECOUNCIL.ARLINGTONVA.US

Approved 8/15/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: 1st CDL Training Center of NOVA

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		CDL B(P) BUS	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	54	5	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	53	5	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	53	5	
Number of students who obtained unsubsidized employment after completing your training program.			
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	17	17	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Nadeem Ikram		Date: 08/04/2021
Title:	Director		
Email:	nadeem@1stcdltrainingcenter.com	Telephone:	703 347 7999

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date:

Name of Person Completing the Form:

Training Provider's Name:

Address of the training facility:

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure ☐ Yes ☒ No

Equal Opportunity is the Law poster prominently displayed ☐ Yes ☒ No

Limited English Proficiency Process ☐ Yes ☒ No

Reasonable Accommodations *(for individuals with disabilities)* ☐ Yes ☒ No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment ☐ Yes ☒ No

Accessible workstations with accessible software ☒ Yes ☐ No

Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.) ☒ Yes ☐ No

Interpreters (spoken language & sign language) ☐ Yes ☒ No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students? By bilingual
instructors

Has training been provided to instructors on services available to LEP students?
☒ Yes ☐ No

(If yes please describe.) _____

Is material and posters displayed in alternate languages? ☐ Yes ☒ No

(If so, what languages?) _____

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6. Classroom Curriculum, For CDL A And B

Number of Hours: 40

The following topics will be covered in the 40 hours classroom training. The objective of this part of training is preparing students to pass their learners permit examinations at DMV. The 40 hours training amounts to 5 days from 9:00am to 5:00pm as shown below on the tables.

Day 1 of Week 1

Week 1, Day 1	Time	Topic	Source and Methodology
	9:00am-10:30am	<ul style="list-style-type: none"> • Registration and Orientation, • Review of School's policy and procedures • Review of job environment, • Review of training and Tests • Providing Training materials and school supplies to students 	<i>Classroom lecture, Questions and answers Training guide, gloves etc</i>
	10:30am-11:00am	<ul style="list-style-type: none"> • Medical requirements and other safety rules • State motor vehicle laws • Registration, proof of insurance and licensing laws • Special taxes • Federal Motor Carrier Safety Administration rules 	<i>DOT guidelines/classroom lecture</i>
	11:01am-12:00pm	<ul style="list-style-type: none"> • Human trafficking • Myths and misconceptions of human trafficking 	<i>VA Commercial Driver's Manual Classroom Lecture and discussions</i>
	12:30pm-1:30pm	<ul style="list-style-type: none"> • Signs and recognizing human trafficking • Measures to take • Reporting 	<i>VA Commercial Driver's Manual Classroom Lecture</i>

	1:31pm-3:00pm	<ul style="list-style-type: none"> • Basic Professional Skills required from a driver • Time Management • Registering working hours and logs • Anger Management • Perceptiveness • Adaptability • Safe Driving and Passenger or cargo Supervision • Driver Qualifications and Disqualifications • Consequences of Driving Under Influence • International Registration Program 	Classroom Lecture/ VA commercial driver's manual
Additional Reference	4:00 pm-5:00pm	<ul style="list-style-type: none"> • DMV books and school's websites for practice test questions • Pre-Trip Inspection videos 	VA commercial driver's manual www.cdlexam.com Online practice

Commented [n11]:

Day 2 of Week 1

Week 1, Day 2	Time	Topic	Source and Methodology
	9:00 am-9:30pm	Vehicle Inspection	School handbook/classroom lecture
	9:00am-10:00am	Basic Control of Vehicle	School handbook and /classroom lecture
	10:01-12:00am	<ul style="list-style-type: none"> • Shifting gears • Seeing • Communicating • Space management • Controlling speed • Seeing hazards 	VA commercial drivers manual/classroom lecture FTA

~~Approved~~
 Approved 8/16/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
 WIOA ELIGIBLE TRAINING PROVIDERS
 RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: CompTIA A+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	17	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	16 <i>14/2</i>	1 <i>10/10</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA students</small>	<small>We do not track for non-WIOA students</small>	
Number of students who obtained unsubsidized employment after completing your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding</small>	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding this information</small>	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Scott Bailey		Date: 7/28/2021
Title:	Office Manager		
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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Handwritten signature and date 7/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Accounting and Auditing for Government Contracts	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	13	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	12 <i>92%</i>	0 <i>0%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA st</small>		
Number of students who obtained unsubsidized employment after completing your training program.	<small>We do not track for non-WIOA st</small>		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>		
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Scott Bailey	Date: 7/28/2021
Title:		Office Manager	
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Certified Information System Security Professional (CISSP)	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	3	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3	0	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City_Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Scott Bailey	Date: 7/28/2021
Title:		Office Manager	
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Cisco Certified Network Associate (CCNA)	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	3	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3	1	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA students		We continue to follow-up with students regard
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA students		We continue to follow-up with students regard
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students		We continue to follow-up with students regarding this information
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Scott Bailey		Date: 7/28/2021
Title:	Office Manager		
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Contract Changes and Equitable Adjustments	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period.		All Students	WIOA Students Only
If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412		14	0
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)		14	0
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)		We do not track for non-WIOA st	We continue to follow-up with students regard
Number of students who obtained unsubsidized employment after completing your training program.		We do not track for non-WIOA st	We continue to follow-up with students regard
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.		We do not track for non-WIOA students	We continue to follow-up with students regarding this information
Is the information listed on your initial application current?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-YCW-Alexandria-City-Arlington-County-Region.pdf page 18.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.			
Name of Authorized Representative:		Scott Bailey	Date: 7/28/2021
Title:		Office Manager	
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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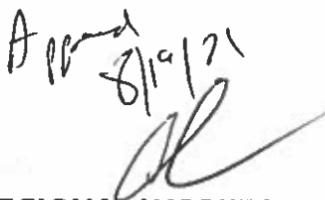
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RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Contract Cost Accounting Deep Dive	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	35	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	21 60%	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA students	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA students	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Scott Bailey	Date: 7/28/2021
Title:		Office Manager	
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WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Ethics and Compliance in Government Contracting	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	20	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	20	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Scott Bailey	Date: 7/28/2021
Title:		Office Manager	
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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Handwritten signature and date: 8/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Masters Academy in Government Contracting	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	26	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	26	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA students	We continue to follow-up with students regarding	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Scott Bailey		Date: 7/28/2021
Title:	Office Manager		
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: <u>Essentials of Human Resource Management Certificate</u>			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	25	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	24 <i>96%</i>	0	<i>N/A</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA st.</small>	<small>We continue to follow-up with students regard</small>	
Number of students who obtained unsubsidized employment after completing your training program.	<small>We do not track for non-WIOA st.</small>	<small>We continue to follow-up with students regard</small>	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding this information</small>	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Scott Bailey	Date: <u>7/28/2021</u>
Title:		Office Manager	
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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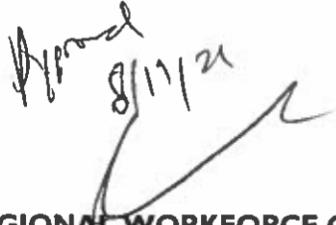
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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		FMP Finance and Business	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	35	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	34 97%	0 <i>100%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st.	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st.	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Scott Bailey		Date: 7/28/2021
Title:	Office Manager		
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
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ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		FMP Leadership and Strategy	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	36	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	33 92%	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
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PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		FMP Operations and Maintenance	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	62	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	62	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
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PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		FMP Project Management	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	56	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	49	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA students	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA students	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
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RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Human Resource Management Certificate	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	116	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	112 97%	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
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PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Linux+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	0 <i>WIA</i>	0 <i>WIA</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA st</small>	<small>We continue to follow-up with students regard</small>	
Number of students who obtained unsubsidized employment after completing your training program.	<small>We do not track for non-WIOA st</small>	<small>We continue to follow-up with students regard</small>	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding this information</small>	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
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ARLINGTON, VA 22204
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PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: The FAR Workshop			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	54	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	50 <i>98%</i>	0	<i>ML</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA st</small>	<small>We continue to follow-up with students regard</small>	
Number of students who obtained unsubsidized employment after completing your training program.	<small>We do not track for non-WIOA st</small>	<small>We continue to follow-up with students regard</small>	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding this information</small>	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Negotiation Strategies & Techniques in Government Contracting			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	16	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	15 <i>94%</i>	0	<i>NA</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA</small>	<small>We continue to follow-up with students regard</small>	
Number of students who obtained unsubsidized employment after completing your training program.	<small>We do not track for non-WIOA</small>	<small>We continue to follow-up with students regard</small>	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding this information</small>	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City_Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: CompTIA Network+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	7	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	5 <i>75%</i>	1 <i>100%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA students	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA students	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
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WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Paralegal Certificate			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	197	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	118 <i>6%</i>	0 <i>N/A</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st.	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st.	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
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WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Project Management Certification: PMP® Exam Preparation	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	30	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	30	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
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RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: CompTIA Security+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	7	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3 (4 still in progress) 92%	1 100%	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st	We continue to follow-up with students regard	
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PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Python Programming			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	19	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	19 <i>not</i>	0 <i>MA</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	<small>We do not track for non-WIOA st.</small>	<small>We continue to follow-up with students regard</small>	
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The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	<small>We do not track for non-WIOA students</small>	<small>We continue to follow-up with students regarding this information</small>	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Scott Bailey	Date: 7/28/2021	
Title:	Office Manager		
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
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Approved 8/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: George Mason University Continuing and Professional Education

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Timekeeping for Government Contractors	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	25	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	24 <i>96%</i>	0 <i>0%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	We do not track for non-WIOA st	We continue to follow-up with students regard	
Number of students who obtained unsubsidized employment after completing your training program.	We do not track for non-WIOA st	We continue to follow-up with students regard	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	We do not track for non-WIOA students	We continue to follow-up with students regarding this information	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Scott Bailey		Date: 7/28/2021
Title:	Office Manager		
Email:	sbailey1@gmu.edu	Telephone:	703-993-2109

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date: July 21, 2021

Name of Person Completing the Form: Scott Bailey

Training Provider's Name: George Mason University Continuing and Professional Education

Address of the training facility: 3351 Fairfax Drive, Ste 448, MS 2G2, Arlington, VA 22201

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Equal Opportunity is the Law poster prominently displayed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Limited English Proficiency Process	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Reasonable Accommodations <i>(for individuals with disabilities)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Accessible workstations with accessible software	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Interpreters (spoken language & sign language)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students?

Training is provided in English. English proficiency is required

Has training been provided to instructors on services available to LEP students?

☐ Yes ☒ No

(If yes please describe.) _____

Is material and posters displayed in alternate languages?

☐ Yes ☒ No

(If so, what languages?) _____

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Global Educational Institute

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Medication Aide (for MA Certification)			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	2	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	2 <i>100%</i>	1 <i>100%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	2 <i>100%</i>	1 <i>100%</i>	
Number of students who obtained unsubsidized employment after completing your training program.	2	1	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$19.00	\$19.00	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	John E. Agwaze	Date: 08/18/2021	
Title:	President & CEO		
Email:	globaledinstitute@yahoo.com	Telephone:	(571) 505-0438

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APG 9/15/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Global Educational Institute

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Nursing Assistant (for CNA Certification)			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	30	2	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	28 <i>93%</i>	1 <i>30%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	28 <i>100%</i>	1 <i>100%</i>	
Number of students who obtained unsubsidized employment after completing your training program.	27	1	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$17.00	\$17.00	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes [] No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes [] No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	John E. Agwaze	Date: 08/18/2021	
Title:	President & CEO		
Email:	globaledinstitute@yahoo.com	Telephone:	(571) 505-0438

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Global Educational Institute

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: CPR / AED and First Aid			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	32	4	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	32	4	<i>100%</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	32	4	<i>100%</i>
Number of students who obtained unsubsidized employment after completing your training program.	31	3	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A	N/A	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	John E. Agwaze	Date: 08/18/2021	
Title:	President & CEO		
Email:	globaledinstitute@yahoo.com	Telephone:	(571) 505-0438

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Global Educational Institute

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Personal Care Assistant (PCA)			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	13	2	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	13 <i>100%</i>	2	<i>100%</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	13 <i>100%</i>	2	<i>100%</i>
Number of students who obtained unsubsidized employment after completing your training program.	13	2	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$14.00	\$14.00	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	John E. Agwaze		Date: 08/18/2021
Title:	President & CEO		
Email:	globaledinstitute@yahoo.com	Telephone:	(571) 505-0438

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GLOBAL EDUCATIONAL INSTITUTE

901 South Highland St., Suite 337
Arlington, VA 22204

Tels: (571) 505-0438 / (703) 625-0758

Fax: (571) 982-5111

Wednesday, August 18, 2021

QUESTION: How does Global Educational Institute embed soft skill training into its curriculum?

ANSWER: Aside from its robust program curriculums and teachings (Medication Aide (MA), Nursing Assistant (CNA), Personal Care Assistant (PCA), and CPR/AED and First Aid), Global Educational Institute's goal is to ensure that all of its students upon completion of their respective courses are able to venture into the world and exude self-confidence. There, they will be able to communicate effectively (orally, in writing, and non-verbally), demonstrate their leadership and team-player skills with others, display a positive "can do" attitude with the initiative to work well under time constraints and little or no supervision.

Furthermore, our students are taught to be productive and have problem-solving mindset/skills, tackle new challenges and establish a rapport with colleagues and clients. The tools used include class discussions, videos, visual displays, and life/role scenarios.

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date: **August 18, 2021**

Name of Person Completing the Form: **John E. Agwaze**

Training Provider's Name: **Global Educational Institute**

Address of the training facility: **901 South Highland Street, #337, Arlington, VA 22204**

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure ☐ Yes ☒ No

Equal Opportunity is the Law poster prominently displayed ☐ Yes ☒ No

Limited English Proficiency Process ☐ Yes ☒ No

Reasonable Accommodations *(for individuals with disabilities)* ☐ Yes ☒ No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment ☒ Yes ☐ No

Accessible workstations with accessible software ☒ Yes ☐ No

Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.) ☒ Yes ☐ No

Interpreters (spoken language & sign language) ☒ Yes ☐ No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students? Visual display, translation, skills training

Has training been provided to instructors on services available to LEP students?

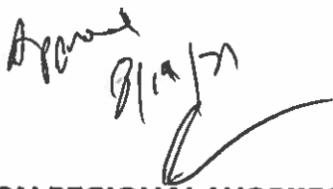
☒ Yes ☐ No

(If yes please describe.) Adult nursing training, visual and skills training.

Is material and posters displayed in alternate languages? ☒ Yes ☐ No

(If so, what languages?) Spanish and Amharic (Ethiopian)


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ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: La Cocina VA

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM		
Approved Program Name: Culinary Training Program		
Reporting Period: July 1 st , 2020 – June 30, 2021	July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students 0	WIOA Students Only 0
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	0 <i>MT</i>	0 <i>AT</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	0 <i>MT</i>	0 <i>MT</i>
Number of students who obtained unsubsidized employment after completing your training program. - Note: 9 is the number of people currently running their own business after completing our training program.	0	0
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	0	0
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.		
Name of Authorized Representative:	Daniela Hurtado	Date: 8.16.2021
Title:	Director, Operations & Programs	

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Approved
8/16/21


Email:	danielahurtado@lacocinava.org	Telephone:	703-596-1557
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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: La Cocina VA

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM		
Approved Program Name: Small Business Incubator Program		
Reporting Period: July 1 st , 2020 – June 30, 2021	July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students 30	WIOA Students Only 0
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	30 100%	0
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	6 20%	0
Number of students who obtained unsubsidized employment after completing your training program. - Note: 9 is the number of people currently running their own business after completing our training program.	9	0
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program. • Information based in 7 of the program participants that successfully opened their business and are currently working in their own company selling their products.	\$870.00*	0
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	

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I certify that the above information is accurate.			
Name of Authorized Representative:	Daniela Hurtado		Date: 8.16.2021
Title:	Director, Operations & Programs		
Email:	danielahurtado@lacocinava.org	Telephone:	703-596-1557

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date: 8.16.2021

Name of Person Completing the Form: Daniela Hurtado

Training Provider's Name: La Cocina VA

Address of the training facility: 918 S Lincoln Street Suite #2, Arlington VA 22204

Equal Opportunity & Access Review

- Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Equal Opportunity is the Law poster prominently displayed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Limited English Proficiency Process	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Reasonable Accommodations <i>(for individuals with disabilities)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
- Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Accessible workstations with accessible software	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Interpreters (spoken language & sign language)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
- Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

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How is training provided to LEP students? Our training facilitator is bilingual in English and Spanish, and the class content is available in both languages. For those that speak other foreign languages study groups with our Vocational English Instructor (TESOL Certified) and one-on-one sessions with the facilitator are available upon client's request.

Has training been provided to instructors on services available to LEP students?

☐ Yes ☐ No

(If yes please describe.) _____

Is material and posters displayed in alternate languages?

☐ Yes ☐ No

(If so, what languages?) Spanish

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Approved
7/14/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Spectrum Beauty Academy, LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: <u>Cosmetology</u>			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	39	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	37 <i>95%</i>	0	<i>NR</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	36 <i>97%</i>	0	<i>NR</i>
Number of students who obtained unsubsidized employment after completing your training program.	36	0	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$45/hr/		
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.us3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Patricia Paxton	Date: 07/26/2021
Title:		Executive Director	
Email:	info@learnatspectrum.com	Telephone:	703-370-9700

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Handwritten signature and date: 8/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Spectrum Beauty Academy, LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Barber			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	15	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	15	0	100%
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	15	0	100%
Number of students who obtained unsubsidized employment after completing your training program.	15	0	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$30.hr/	\$30.hr/	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Patricia Paxton	Date: 07/26/2021
Title:		Executive Director	
Email:	info@learnatspectrum.com	Telephone:	703-370-9700

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
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Approved
8/19/21
✓

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Spectrum Beauty Academy, LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: <u>Nail Technology</u>			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	32	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	28 <i>88%</i>	0	<i>ME</i>
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	26 <i>92%</i>	0	<i>ME</i>
Number of students who obtained unsubsidized employment after completing your training program.	24	0	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$30/hr/		
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Patricia Paxton		Date: 07/26/2021
Title:	Executive Director		
Email:	info@learnatspectrum.com	Telephone:	703-370-9700

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ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: Spectrum Beauty Academy, LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Basic Esthetics			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period.	All Students	WIOA Students Only	
	41	1	
If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412			
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)		39	0
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)		37	0
Number of students who obtained unsubsidized employment after completing your training program.		37	0
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.		\$47.1hr/	
Is the information listed on your initial application current?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.			
Name of Authorized Representative:		Patricia Paxton	Date: 07/26/2021
Title:		Executive Director	
Email:	info@learnatspectrum.com	Telephone:	703-370-9700

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Spectrum Beauty Academy, LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Master Esthetics			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	15	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	15 <i>100%</i>	0 <i>0%</i>	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	15 <i>100%</i>	0 <i>0%</i>	
Number of students who obtained unsubsidized employment after completing your training program.	15	0	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$55.hr/		
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Patricia Paxton		Date: 07/26/2021
Title:	Executive Director		
Email:	info@learnspectrum.com	Telephone:	703-370-9700

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date:

Name of Person Completing the Form:

Training Provider's Name:

Address of the training facility:

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure ☐ Yes ☒ No

Equal Opportunity is the Law poster prominently displayed ☐ Yes ☒ No

Limited English Proficiency Process ☐ Yes ☒ No

Reasonable Accommodations *(for individuals with disabilities)* ☐ Yes ☒ No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment ☒ Yes ☐ No

Accessible workstations with accessible software ☒ Yes ☐ No

Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.) ☒ Yes ☐ No

Interpreters (spoken language & sign language) ☒ Yes ☐ No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students? Textbook and Training Material is issued in different languages

Has training been provided to instructors on services available to LEP students? ☒ Yes ☐ No

(If yes please describe.) Instructors are trained to identify and instruct LEP

Is material and posters displayed in alternate languages? ☒ Yes ☐ No

(If so, what languages?) Materials are provided in Spanish and Chinese

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David Remick

From: Spectrum Beauty Academy <info@learnatspectrum.com>
Sent: Tuesday, July 27, 2021 10:28 AM
To: David Remick
Cc: info
Subject: Re-certification for Spectrum Beauty Academy FY: 2021-2022
Attachments: 2021 Recert Docs.pdf

EXTERNAL EMAIL

CAUTION: This email contains file attachments. Do NOT open files that you are not expecting to receive, even from known senders.

Good Morning David,

The Re-certification documents are attached.

RE: Embedded Soft Skills Training

Our program includes the Soft Skills Training Required: Professional Development AND Business Basics are a part of each curriculum and are required chapters in our textbooks. Students receive theory, tests and complete projects on these subjects.

Please let me know if more information is needed.

Regards,

Patricia

Patricia Paxton

Executive Director

Spectrum Beauty Academy(US)

25 S. Quaker Lane Ste. 15

Alexandria, VA 22314

703-370-9700

703-370-9773-fax

[Like Us on FACEBOOK!](#)

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Automation Testing			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	2	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	2	100%	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	2		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$55,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Approved
8/12/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: AWS Certified Cloud Practitioner			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	4	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	4 100%		
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3 75%		
Number of students who obtained unsubsidized employment after completing your training program.	3		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$45,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: AWS Certified Developer			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	3	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3	100%	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3	100%	
Number of students who obtained unsubsidized employment after completing your training program.	3		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$65,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: AWS Solutions Architect			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A	N/A	
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Approved
8/17/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: AWS SysOps Administrator			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A	N/A	
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Business Analyst			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Approved 8/12/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Certified Information System Security Professional			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	4	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	4	100%	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	4	100%	
Number of students who obtained unsubsidized employment after completing your training program.	They were employed		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$95,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

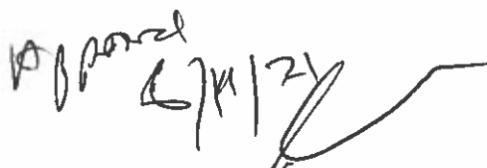
A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: CCNA			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	3	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3		
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3		
Number of students who obtained unsubsidized employment after completing your training program.	They were employed		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$75,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Approved
8/1/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Cloud+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733


ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: SyLearn

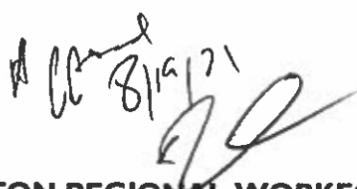
A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: A+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	5	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	5 100%		
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	4 80%		
Number of students who obtained unsubsidized employment after completing your training program.	4		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$55,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Approved
8/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Cyber Security Analyst (CySA+)			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733


ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Data Science			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	4	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	4	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A		
Number of students who obtained unsubsidized employment after completing your training program.	3		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$68,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Approved
2/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Network+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	5	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	5		
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	4		
Number of students who obtained unsubsidized employment after completing your training program.	4		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$55,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733


ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: PenTest+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:		Jatinder Chandok	Date: 07/21/2021
Title:		President	
Email:	jchandok@sylearn.com	Telephone:	703-310-7733


ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Quality Assurance Testing			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	N/A	N/A	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	N/A	N/A	
Number of students who obtained unsubsidized employment after completing your training program.	N/A	N/A	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	N/A		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

Handwritten: 6/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Security+			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	3	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3	60%	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3	100%	
Number of students who obtained unsubsidized employment after completing your training program.	3		
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	\$57,000		
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733


ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM

PROVIDER NAME: SyLearn

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name: Web Design and Developer			
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	0	1	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)		1	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)		N/A	
Number of students who obtained unsubsidized employment after completing your training program.		1	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.		Don't know	
Is the information listed on your initial application current?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)		
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)		
I certify that the above information is accurate.			
Name of Authorized Representative:	Jatinder Chandok		Date: 07/21/2021
Title:	President		
Email:	jchandok@sylearn.com	Telephone:	703-310-7733

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date: July 21, 2021

Name of Person Completing the Form: Jatinder Chandok

Training Provider's Name: SyLearn

Address of the training facility: 3330 Washington Blvd, Suite 100, Arlington, VA 22201

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure ☐ Yes ☐ No

Equal Opportunity is the Law poster prominently displayed ☐ Yes ☐ No

Limited English Proficiency Process ☐ Yes ☐ No

Reasonable Accommodations *(for individuals with disabilities)* ☐ Yes ☐ No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment ☐ Yes ☐ No

Accessible workstations with accessible software ☐ Yes ☐ No

Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.) ☐ Yes ☐ No

Interpreters (spoken language & sign language) ☐ Yes ☐ No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students? So far we have not had students who have limited English proficiency. If there is enough volume, we have instructors who can teach courses like A+, Network+, Cisco Certified Network Associate (CCNA), Security+, AWS Cloud Practitioner in Spanish. The content, curriculum and courses are taught in English currently.

Has training been provided to instructors on services available to LEP students?

☐ Yes ☐ No

(If yes please describe.) ___ Had discussions with a Spanish speaking instructor on converting course content to Spanish based on a possible training requirement which did not materialize. ___

Is material and posters displayed in alternate languages?

☐ Yes ☐ No

(If so, what languages?) _____

SyLearn Soft Skills training

Apart from the specific technical knowledge and proficiencies that are taught in our courses, there are universal “soft skills” that are applicable to any industry, and workers who lack them could be setting themselves up for failure. We want to set our students up for success outside of the classroom as we believe that their success is our success. We also have a vested interest that successful and satisfied customers are our brand ambassadors.

According to the U.S. Department of Labor, there are six soft skills that are necessary for professional success: Communication, Enthusiasm/Attitude, Teamwork, Networking, Critical thinking/Problem-solving, and Professionalism. Here is how we have incorporated them in our curriculum:

Communication

Good communication skills are imperative in every industry, and employers consistently rank effective communication skills at the top of their list for what they want in an employee. In addition, technology has changed the way workplace communication happens, so students need a variety of experiences to help them master this skill. We monitor on how students communicate with the instructor, staff and other fellow students from the initial inquiry to responding to evaluation request and thanking for the certificate of completion whether the communication is oral or by email.

Through examples of workplace use of the course content, instructors emphasize how effective and positive communication:

- Helps reduce misunderstanding and mistakes
- Aids in problem solving
- Ensures better collaboration and teamwork
- Boosts idea generation and innovation

Enthusiasm and attitude

Most students do not get their dream job right after graduation, and have to work through through a few entry-level positions before moving up the corporate ladder, so attitude is everything. Nobody wants to work with somebody who clearly doesn't want to be there, so students who develop positive thinking will have an advantage. As part of the learning experience we embed the need for positive attitude and monitor assignments and behavior of students to include this trait.

Teamwork

In the workplace, being able to work well with your team is critical as each organization member has an integral role for the success of the organization. Some of the hands-on exercises are assigned to multiple students enabling to work as a team rather than being solo performers just like they would have to in the real world.

Networking

Most hiring managers would rather interview a potential candidate who has been previously recommended by somebody they know or work with, and networking is the best way to receive these recommendations. We encourage students to apply for positions in an organization where they have friends or even where the instructor works enabling them to get a connection. We also encourage them to become part of in-person or virtual meet up groups related to the course of study.

Critical thinking/problem solving

Lack of problem-solving and critical-thinking skills are among the most common complaints employers have of people entering the workforce. To develop this skill, we put students out of their learning comfort zone and create assignments that resemble projects they'll encounter in the workplace. Complex projects that present problems force students to get creative, seek out information from different sources, and navigate through obstacles on their own.

Professionalism

Professionalism is a combination of multiple skills and is the most difficult soft skill to teach. We simulate teaching this through activities that help encourage students to develop this quality. Role-playing activities that put students in the shoes of a supervisor, manager, customer, technical engineer are some ways that we include this in our training.

Holding students accountable to their reading, homework, assignments is another way we help mitigate the culture shock when they graduate and go on to work in the industry.

Additionally, during the training, instructors go over interview questions that students' encounter when they are applying for positions especially for entry level courses like A+, Network+, AWS Certified Cloud Practitioner, Software Testing, Web Design and Developer, Python etc.

Whenever we hear about job openings and/or internship opportunities in various organizations, we pass on that information to the relevant instructor who then distributes the same in the class to students attending courses in that area of technology. For entry level students, we have guided them in writing/rewriting their resume to reflect the skills they have learnt in our courses, especially highlighting keywords that help a resume get shortlisted by hiring managers and human resource personnel. We also guide them on how to search for jobs in their area of knowledge by helping them with job titles that are suited to their knowledge and experience levels.

Approved
4/14/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: The Skin Care Center LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM		
Approved Program Name: <u>Esthetic</u>		
Reporting Period:		July 1, 2020 – June 30, 2021
Number of students who participated in your training program during the Reporting Period.	All Students	WIOA Students Only
If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	5	0
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	5 w/o	—
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	5 w/o	—
Number of students who obtained unsubsidized employment after completing your training program.	5	—
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	60,000	—
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.		
Name of Authorized Representative:	<u>Azita Shafazand</u>	Date: <u>8-10-2021</u>
Title:	<u>Director</u>	
Email:	<u>skin.care.llc@gmail.com</u>	Telephone: <u>703-360-6521</u>

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
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ARLINGTON, VA 22204
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Approved
8/19/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: The Skin Care Center LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM		
Approved Program Name: <u>Master Esthetic</u>		
Reporting Period:	July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period.	All Students	WIOA Students Only
If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	3	0
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3	0
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3	0
Number of students who obtained unsubsidized employment after completing your training program.	3	0
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	65000-	—
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.		
Name of Authorized Representative:	<u>Azita Shafazand</u>	Date: <u>8-10-2021</u>
Title:	<u>Director</u>	
Email:	<u>@SkinCareLLC@gmail.com</u>	Telephone: <u>703-360-6521</u>

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2100 WASHINGTON BOULEVARD, 1ST FLOOR
ARLINGTON, VA 22204
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Approved
8/10/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: The Skin Care Center LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM		
Approved Program Name: <u>Waxing</u>		
Reporting Period:	July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period.	All Students	WIOA Students Only
If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	3	—
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	3 100%	—
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	3 100%	—
Number of students who obtained unsubsidized employment after completing your training program.	3	—
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	45000	
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.		
Name of Authorized Representative:	<u>Azita Shafazand</u>	Date: <u>8-10-2021</u>
Title:	<u>Director</u>	
Email:	<u>SkinCareLLC@gmail.com</u>	Telephone: <u>703-360-6521</u>

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ARLINGTON, VA 22204
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Approved 9/19/21
A

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: The Skin Care Center LLC

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM		
Approved Program Name: <u>Permanent cosmetic</u>		
Reporting Period:	July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only
	10-	0-
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	10-	0-
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	10-	—
Number of students who obtained unsubsidized employment after completing your training program.	10-	—
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	50,000	—
Is the information listed on your initial application current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.		
Name of Authorized Representative:	Azita Shafazand.	Date: 8-10-2021
Title:	Director.	
Email:	SkinCareLLC@gmail.com	Telephone: 703-360-6521

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date:

Name of Person Completing the Form: Azita Shafazand.

Training Provider's Name: The Skin Care Center LLC

Address of the training facility: 8403-G Richmond Hwy Alex, Va, 22309

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? (If so, please provide updated documentation of these items.)

Grievance/Complaint Procedure ☐ Yes ☒ No

Equal Opportunity is the Law poster prominently displayed ☐ Yes ☒ No

Limited English Proficiency Process ☐ Yes ☒ No

Reasonable Accommodations (for individuals with disabilities) ☐ Yes ☒ No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment ☐ Yes ☒ No

Accessible workstations with accessible software ☒ Yes ☐ No

Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.) ☒ Yes ☐ No

Interpreters (spoken language & sign language) ☐ Yes ☒ No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students? with Dictionary

Has training been provided to instructors on services available to LEP students?

☒ Yes ☐ No

(If yes please describe.) go over the material few times asked them to use

Is material and posters displayed in alternate languages?

☐ Yes ☒ No

(If so, what languages?) its body work or facial so its dictionary
international languages. same time

ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
2100 WASHINGTON BOULEVARD, 1ST FLOOR
ARLINGTON, VA 22204
703 228 1412 • WORKFORCECOUNCIL.ARLINGTONVA.US

Approved 8/11/21

**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
RE-CERTIFICATION FORM**

PROVIDER NAME: Together We Bake

A SEPARATE FORM MUST BE COMPLETED FOR EACH TRAINING PROGRAM			
Approved Program Name:		Together We Bake	
Reporting Period:		July 1, 2020 – June 30, 2021	
Number of students who participated in your training program during the Reporting Period. If you need help identifying WIOA-sponsored students, call David Remick at 703.228.1412	All Students	WIOA Students Only	
	21	0	
Total number of students who successfully completed your program. (Goal: Meet or Exceed 50%)	20 <i>95%</i>	0	
Total number of students who earned an in-demand industry-recognized certificate, license, diploma, or degree. (Goal: Meet or Exceed 65%)	13 <i>65%</i>	0	
Number of students who obtained unsubsidized employment after completing your training program.	14	0	
The median earnings of program participants who are in unsubsidized employment during the second quarter after exit from your training program.	14.00	0	
Is the information listed on your initial application current?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If no, email corrections to dremick@arlingtonva.us)	
Does your curriculum include elements of soft skills/basic professionalism skills? Reference: https://arlingtonva.s3.amazonaws.com/wp-content/uploads/sites/39/2020/06/WIOA-Local-Policies-for-the-VCW-Alexandria-City-Arlington-County-Region.pdf page 18.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, email an example of how soft skills are embedded into your curriculum to dremick@arlingtonva.us)	
I certify that the above information is accurate.			
Name of Authorized Representative:		Stephanie Wright	Date: 8/3/21
Title		Executive Director	
Email:	stephanie@togetherwebake.org	Telephone:	703-973-8775

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**ALEXANDRIA/ARLINGTON REGIONAL WORKFORCE COUNCIL
WIOA ELIGIBLE TRAINING PROVIDERS
ADA AUDIT FORM**

Date:

Name of Person Completing the Form:

Training Provider's Name:

Address of the training facility:

Equal Opportunity & Access Review

1. Have any of the following policies/procedures changed since your initial approval for the Eligible Training Provider List? *(If so, please provide updated documentation of these items.)*

Grievance/Complaint Procedure ☐ Yes ☒ No

Equal Opportunity is the Law poster prominently displayed ☐ Yes ☒ No

Limited English Proficiency Process ☐ Yes ☒ No

Reasonable Accommodations *(for individuals with disabilities)* ☐ Yes ☒ No

2. Are the following items available for individuals attending training through your organization:

Auxiliary aids for individuals with hearing and/or visual impairment ☒ Yes ☐ No

Accessible workstations with accessible software ☒ Yes ☐ No

Physical accessibility (i.e.: ramps, bathroom, evacuation plan, etc.) ☒ Yes ☐ No

Interpreters (spoken language & sign language) ☐ Yes ☒ No

3. Please provide the following information regarding equal access and services to limited English proficient (LEP) individuals attending training through your organization:

How is training provided to LEP students? We have considered holding a Spanish speaking cohort session, but haven't been able to access funding to do so.

Has training been provided to instructors on services available to LEP students?

☐ Yes ☒ No

(If yes please describe.) _____

Is material and posters displayed in alternate languages? ☐ Yes ☒ No

(If so, what languages?) _____

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New Regional Workforce Council Policies

EQUAL OPPORTUNITY & NONDISCRIMINATION POLICY

REFERENCE

- Workforce Innovation and Opportunity Act (WIOA) Title I
- 29 CFR Part 37

POLICY

It is the policy of the Alexandria/Arlington Regional Workforce Council to provide equal opportunity to all WIOA program applicants and participants without regard to race, color, religion, gender, national origin, age, disability, or political affiliation or belief. Any person alleging discrimination under the Workforce Innovation and Opportunity Act has the option of filing his or her written complaint with the Alexandria/Arlington Regional Workforce Council EO Officer:

David Remick
Executive Director & EO Officer
Alexandria/Arlington Regional Workforce Council
2100 Washington Blvd.
First Floor
Arlington, VA 22204
dremick@arlingtonva.us

Please note: any person with a general, non-discriminatory grievance may also file a written complaint to the Alexandria/Arlington Regional Workforce Council EO Officer. All non-discriminatory grievance complaints will follow the procedures outlined in the Processing WIOA Grievances and Complaints Policy.

Determining Jurisdiction

The first step in processing a complaint is to determine if it is within the Alexandria/Arlington Regional Workforce Council's jurisdiction – that is, if the Alexandria/Arlington Regional Workforce Council has the legal authority to accept the complaint for investigation. There are three considerations that determine jurisdiction – basis, timeliness, and whether the respondent is a recipient of DOL funds.

- **Basis:** For discriminatory grievances, the Alexandria/Arlington Regional Workforce Council can accept and investigate only those complaints that allege discrimination on the basis of race, color, religion, national origin, gender, political affiliation or belief, age, or disability because of citizenship or participation in WIOA. For all other grievances, the Council can accept and investigate only those complaints that occur when using WIOA Title I funded services.
- **Timeliness:** The Alexandria/Arlington Regional Workforce Council will accept and investigate a complaint only if it is filed within 180 days of the alleged violation.
- **Recipient of WIOA Funds:** The Alexandria/Arlington Regional Workforce Council can accept and investigate only those complaints in which the respondent – the program or activity against which the complaint is filed – is a program or activity funded in whole or in part by WIOA funds.

Notifying the Respondent and the Complainant

Once it is determined that a complaint is within the Alexandria/Arlington Regional Workforce Council's jurisdiction, the complaint is investigated by the Alexandria/Arlington Regional Workforce Council's EO Officer. The EO Officer sends the respondent (the administrator or manager of the program/activity receiving funds) notice, which informs him or her that the Alexandria/Arlington Regional Workforce Council has accepted the complaint and includes:

- The complainant's name,
- A brief description of the allegation,

- A description of the information or documentation needed for the investigation, and time in which it is to be submitted,
- A reminder to the respondent that any form of retaliation or intimidation against the complainant because he or she has filed a complaint is prohibited, and
- The name and telephone number of the Alexandria/Arlington Regional Workforce Council's EO Officer assigned to the case.

A copy of the complaint may be provided to the respondent if it is requested. The EO Officer also sends the complainant a similar notification letter. Both the respondent and the complainant are encouraged to informally resolve the complaint prior to the issuance of a determination. This process could take up to 30 days to complete.

Data Collection

A complaint can be investigated in two ways: through analysis of data relevant to the investigation and/or through an on-site investigation. Data needed to determine the merits of the allegations in the complaint should be identified. A written list of questions is forwarded to the respondent, complainant, and other parties such as witnesses. Some questions will require a written response, some will request records, and others will require documentation. The EO Officer analyzes the data and, if it is sufficient, a determination as to whether or not discrimination occurred may be issued without an on-site investigation. This process could take up to 30 days to complete.

The On-Site Investigation

The EO Officer conducts the complaint investigation at the site of the alleged violation when:

- The issues are complicated;
- After reviewing the data collected, it is determined that several witnesses must be interviewed, or many records reviewed; or
- The Alexandria/Arlington Regional Workforce Council's EO Officer has received several complaints against the same respondent.

Before arriving on-site, the EO Officer contacts the respondent to establish a date and time for the on-site investigation, to identify records and other documents to be made available for review, and to identify individuals to be interviewed. This should be regarded as an initial information request. As the investigation proceeds, the EO Officer may identify additional information requirement or interviewees. The respondent should identify a person responsible for coordinating the on-site investigation. Once on-site, and before meeting with the respondent, the EO Officer meets with the complainant to review the complaint and to obtain any additional information not contained in the complaint or case file.

The opening conference is held at the respondent's facility; the EO Officer meets with the respondent and/or respondent's representatives to:

- Describe the complaint being investigated, including the specific allegation(s) and issue(s) under investigation and the Alexandria/Arlington Regional Workforce Council's authority to investigate them;
- Confirm arrangements made by the respondent to assure the EO Officer privacy, including setting aside a private area for the EO Officer to conduct interviews and review documents;
- Confirm the interview schedule of individuals named in the complaint, as well as other witnesses; and
- Schedule other meetings, such as the orientation meeting for information collection and the exit interview.

Normally, the EO Officer does not discuss the merits of the complaint during the opening conference.

Gathering Evidence

In an on-site investigation, the EO Officer gathers evidence by interviewing and by reviewing records. Initially, the EO Officer interviews the official(s) representing the respondent and the person(s) named in the complaint. Information obtained includes:

- The respondent's account of the facts,
- Additional persons the respondent wishes interviewed and the matters on which each witness can be expected to provide information,
- Documentation that the respondent wishes reviewed.

The EO Officer also interviews witnesses – that is, all individuals named either by the complainant or the respondent as witnesses. As the investigation progresses, the EO Officer may identify additional individuals who should be interviewed. In addition to conducting interviews, the EO Officer gathers information by reviewing records and other documents, beginning with those initially requested. As the investigation progresses, the EO Officer may require additional records. When the records required are voluminous or complex, the EO Officer may hold a meeting with the staff responsible for keeping records to:

- Acquaint the EO Officer with the respondent's information system,
- Acquaint the respondent with the EO Officer's information needs,
- Assign specific document or information request to the appropriate person.

Types of Evidence

In general, evidence falls into five categories:

- Direct evidence is evidence of the actual, subjective intent of the person(s) charged with discrimination. It may take the form of an admission of discriminatory purpose, although this will rarely occur. You will most often find such an admission during an interview, when a person is explaining or justifying his or her actions. Direct evidence encompasses more than admissions: it also includes any facts tending to establish the subjective motives of persons involved in the alleged discrimination.
- Circumstantial evidence includes facts from which one may infer intent or discriminatory motive. Circumstantial evidence proves intent by using objectively observable data. It does not, however, prove anything directly about actual subjective intent – for example, historical information on how members of the protected group have been treated by the respondent and similar complaints.
- Comparative evidence is that which identifies difference(s) in treatment of similarly situated individuals based on their race, sex, or other protected basis. For example, this might involve comparing the quality and quantity of services provided a group of the same race with services provided to a group of a different race. If there is no adequate non-racial explanation for the differences, it is reasonable to infer that race may be a factor.
- Statistical evidence is most often used to demonstrate the adverse effect of a procedure, policy, rule, or selection criteria. The evidence will have to show that a substantial disparate impact exists, and that it is not due to chance. Such evidence may include EO data reports and monitoring reports.
- For non-discriminatory grievances, direct evidence of the actual, subjective intent of the offender(s).

The Exit Conference

When the on-site investigation has been completed, within 30 days the EO Officer will hold an exit conference with the respondent to clarify the information obtained during the on-site investigation or to request additional information. The EO Officer expresses no opinion about the information collected during the on-site investigation and makes no analysis or conclusions about the issues.

Administrative Closures

Pre-investigative administrative closures occur prior to the initiation of the investigation. A pre-determination administrative closure is one which occurs between the initiation of an investigation and before an investigative report is drafted. Investigations may not be administratively closed if they imply or involve class issues, which have not been corrected for all members of the class. Investigations that are not class involved may be administratively closed if one or more of the following conditions exist – that is, if the complainant:

- Refused to cooperate in the investigation;
- Cannot be located;
- Is deceased;
- Withdraws the complaint in writing; or
- Was fully resolved through mediation or conciliation.

If the complainant can be located, he or she must be notified in writing that the complaint is being administratively closed and explain the reason for the decision.

Analysis of Evidence (for discriminatory grievances only)

Disparate Treatment

To determine if it is reasonable to believe that discrimination based on disparate treatment occurred a three-phase analytical process will be used. This process is as follows:

PHASE 1: PRIMA FACIE

This phase is a determination as to whether there is sufficient evidence to raise an inference of discrimination. An inference *does not prove* discrimination; rather, it allows you to go on to the next analytical set(s) – determining whether the inference is correct.

An inference of discrimination based on disparate treatment can be established when an eligible/qualified individual shows that he or she was treated differently because of a prohibited factor. In the case of systemic or pattern-or-practice discrimination and inference of discrimination may be established by showing that individuals or groups are treated differently based on race, sex, or some other prohibited factor.

The Supreme Court created a template for establishing a case by inference based on disparate treatment. The elements of a prima facie case may vary depending on the facts of the complaint, but such elements often include the following:

1. The aggrieved person was a member of a protected class;
2. This person applied for, and was eligible for federally assisted program or applied and was qualified for employment;
3. Was denied services or employment despite being eligible/qualified; and
4. After this denial, the respondent selected applicants for services or provided employment to persons not in the complainant's group with similar eligibility or qualifications.

PHASE 2: REBUTTAL

The second phase is the respondent's opportunity to defend itself. If there is sufficient evidence to establish a prima facie case, the investigator must determine if the respondent can articulate a "legitimate, nondiscriminatory reason" for the challenged action.

PHASE 3: PRETEXT

Once the respondent has articulated a reason for the disparate treatment, the investigator must examine the respondent's reasons and evidence relevant to the complaint. Where facts are in dispute, the investigator should attempt to corroborate the facts independently. If the respondent's defense is not based on a legitimate requirement, the investigator may show that the rebuttal evidence presented by the respondent was a "pretext" for discrimination.

Types of evidence that may be helpful in proving pretext are:

- The respondent failed to follow its own rules, policies, and procedures;
- The respondent acted inconsistently with its own stated, legitimate nondiscriminatory reason;
- Evidence obtained in the investigation contradicts the nondiscriminatory reasons; or
- The reason offered now was not offered to support the challenged decision at the time it occurred, suggesting the reason was offered as an afterthought.

Disparate Impact

The model for proving discrimination based on disparate impact is different from the disparate treatment model because the underlying theory is different. Rather than seeking to prove that the service or training provider had a discriminatory motive, you are seeking to prove that a policy, requirement, or practice has a *disproportionate effect* on a particular group or groups. Indications of disparate impact are most likely to arise in the context of a compliance review.

Adverse Impact

The investigator will need to develop evidence that can be tested for adverse impact by making a comparison of the effects of the policy, requirement, or practice in question on members of the complainant's protected class with persons not in the protected class. The evidence in an investigation of a case involving disparate impact will likely include both *statistical* and *comparative* evidence (see "Types of Evidence").

The first step is determining whether there is disproportionate representation of protected class members participating in the program in question (for example, four percent of participants in a training program are female, while fifty percent of the applicants are female). In this case, the investigator will want to look at the application process and other aspects of program administration to determine if there is evidence that a policy or practice is causing the disparity. If there is a statistically significant disparity between the representation of protected class members remaining after application of the challenged policy or requirement when compared with the representation of persons not in the protected class, a *prima facie* case has been established.

After determining that the numbers show significant differences, the next step is to determine what caused the disparities. The investigator must identify which policy, requirement or practice accounts for the adverse impact. That requires focus on the points in the decision making process where some applicants become participants and others do not. (For example, identifying which requirements or practices have the result of screening out more women applicants than you would expect to be screened out, given the number of women applicants.)

Business Necessity

Identifying the requirements or practices that have the adverse impact *does not prove* disparate impact discrimination. A determination must be made as to whether the requirement that has the adverse impact is *job related and necessary*. (For example, a requirement that a firefighter trainee weigh at least 150 pounds

could disproportionately screen out women as a group, even if some women can meet the requirement and some men cannot.)

In this scenario the service or training provider would have to provide evidence that the weight requirement is necessary for a job related reason (for example, evidence that the weight test is an accurate predictor of a person's ability to handle firefighting equipment).

Alternative Practice

Even if the weight test accurately predicts success in firefighting, if it has an adverse impact, the service or training provider must first try to devise a standard that *does not have adverse impact* to determine whether an applicant can handle the equipment.

Post Investigation

Investigative Report

An investigative report is a written document that sets out in a detailed and logical fashion (a) all facts pertinent to the case, (b) analyzes those facts in light of the complainant's allegations, and (c) recommends a determination as to the validity of the allegations based on that analysis. The following is a suggested format:

- Introduction
- Allegations
- Analysis
- Conclusions
- Recommendations

The investigative report should be a document separate from the formal letter of findings. Generally, the investigative report is not released to the complainant or the service or training provider except in the case of a Freedom of Information Act request or Privacy Act request. Ideally, an investigative report should be prepared whenever a full investigation is completed. If an investigative report is not done in every case, it should be prepared for complex cases that involve extensive analysis. An investigative report should also be prepared for all cases resulting in a violation. If the case is straightforward, raises only limited issues, does not involve significant rebuttal by either party, and results in a no violation finding, an investigative report may not be necessary.

Letter of Findings

The purpose of the letter of findings is to notify the parties in writing of the determination made on each issue. Letters of findings must be prepared for all investigations, regardless of whether a violation is found. A written notice of final action must be sent within 90 days after the filing date of the complaint. Complainants must be notified of their right to file a complaint with U.S. Department of Labor's Civil Rights Center (by mail: 200 Constitution Avenue NW, Room N-4123, Washington, DC 20210; by email: CRCEXternalComplaints@dol.gov) if they believe the determination is unsatisfactory.

Each letter of findings must:

- State the jurisdictional authority including the basis for the investigation;
- Address all issues covered in the investigation, and for each issue reach conclusions which are supported by an explanation or analysis; and
- State the determination for each issue investigated.

Corrective Actions for Discrimination Grievances

When technical violations are found during compliance monitoring, the EO Officer will notify the recipient in writing of the violations along with recommendations for corrective action. The EO Officer is responsible for providing technical assistance to correct the violations.

Corrective action may include policy development or educating individuals responsible for implementing the required action. A follow-up visit or contact will be made by the EO Officer to evaluate progress made toward resolving the violations. Violations as a result of an investigation and/or monitoring efforts shall be made to achieve voluntary compliance by corrective action or a conciliation agreement to correct the discrimination.

In general terms, the complaint procedure is as follows:

- Corrective action shall be completed within 45 days from the date of initial notification of the violation.
- Follow-up monitoring will be conducted to determine whether compliance has been achieved.

If the EO Officer concludes that compliance cannot be achieved through voluntary means, he or she will notify the U.S. Department of Labor's Civil Rights Center in writing, to include the following:

- The apparent violation(s) and the pertinent nondiscrimination or equal opportunity provision(s) of 29 CFR part 37;
- The efforts made to achieve voluntary compliance; and
- The corrective action the recipient must take to redress the violation.

PROCESSING WIOA GRIEVANCES AND COMPLAINTS POLICY

Purpose

This policy sets forth the procedures required under the Workforce Development Act (WIOA) to address grievances or complaints alleging a violation under the requirements of WIOA by the Commonwealth of Virginia, the Alexandria/Arlington Regional Workforce Council (AARWC), American Job Centers and/or Training Providers.

This policy does not address the procedure for processing complaints alleging discrimination under WIOA section 188 and/or 29 CFR part 37. Such complaints must be handled in accordance with the procedures set forth in that regulatory part. Questions about or complaints alleging a violation of the non-discrimination provision of WIOA section 188 may be directed or mailed to Executive Director, AARWC, 2100 Washington Blvd, 1st Floor, Arlington, VA 22204 or Director, Civil Rights Center, US Department of Labor, Room N4123, 200 Constitution Avenue, NW, Washington, DC 20210, for processing.

References

P.L. 113-128, Workforce Innovation and Opportunity Act of 2014, Section 181(c). Federal Register, August 19, 2016, Part VI, Department of Labor, Employment and Training Administration, 20 CFR Part 603,651,652, et al. Workforce Innovation and Opportunity Act; Final Rules. 20 CFR Part 683, Subpart F- Grievance Procedures, Complaints, and State Appeals Processes. 29 CFR Part 38, WIOA Section 188 Nondiscrimination and Equal Opportunity Regulations.

Definitions

The following terms, when used in this policy, have the following meanings unless the context clearly indicates otherwise:

Complainant – an individual, group or agency that files a formal complaint alleging violation of the WIOA and/or provisions of a related agreement.

Direct Recipient – any person or governmental department, agency or establishment that receives WIOA funds through a local area in order to carry out WIOA programs but does not include an individual who is the beneficiary of such a program.

Grievant – an individual, group or agency that files a formal grievance alleging violation of WIOA and/or provision of a related agreement.

Participant – an individual who has been determined to be eligible to participate in and who is receiving services (except follow-up services authorized under the WIOA) under a program authorized by the WIOA. Participation commences on the first day, following determination of eligibility on which the individual begins receiving subsidized employment, training or other services provided under WIOA.

GRIEVANCES AND COMPLAINTS PROCESSING

The grievance and complaint review procedures for the local level apply to alleged violations of the requirements of WIOA and/or provisions of a related agreement. These grievances or complaints may be submitted by participants and other interested parties affected by the local workforce development system, including American Job partners and service providers.

Filing a Grievance or Complaint

The American Job Centers and/or Service or Training Providers shall provide participants with the name, address and telephone number of the agency's official and the AARWC Executive Director to whom grievances and complaints can be directed. Examples of who may file a grievance or complaint include the following:

1. Applicants and/or registrants for aid, benefits, services or training,
2. Eligible applicants/registrants,
3. Participants,
4. Employers,
5. Applicants for employment under WIOA,

6. Service providers, or
7. Eligible service providers.

Each grievance or complaint must be filed, in writing, within 30 calendar days of the alleged situation and must contain the following information:

1. The name, address and phone number of the person filing the grievance or complaint;
2. The date of the alleged situation and the date the grievance or complaint was filed;
3. The identity of the respondent (i.e. the individual or entity against whom the grievance or complaint is alleged);
4. A description of the allegation(s). This description must include enough detail to allow the reviewer to decide whether the allegation(s), if true, would violate any of the provisions of WIOA; and
5. The signature of the person filing the grievance or complaint.

Methods of Resolution/Disposition of Complaints

Upon receipt of the grievance or complaint, the reviewer will provide written notice to the grievant or complainant. This correspondence will be sent within five (5) business days and must include the following:

1. A summary of the allegation(s) submitted;
2. The date, time and place of the meeting or hearing with the reviewer;
3. A notice that the AARWC Executive Director may arrange for an informal resolution to the complaint prior to the official meeting or hearing;
4. A notice that the grievant or complainant may be represented by an attorney; and
5. A notice that the grievant or complainant may present witnesses and documentary evidence.

Each American Job Center, Service, and/or Training provider must notify the AARWC Executive Director, in writing, of the complaint within 48 hours of receiving the complaint. The AARWC Executive Director has a maximum of 30 calendar days to investigate the allegations and offer a resolution.

Notice of Final Action

Once the investigation is complete and a decision has been reached, a Notice of Final Action must be sent to the grievant or complainant with a copy to the agency. If an informal resolution was provided, the Notice of Final Action must summarize the resolution agreed upon. If no informal resolution was provided, the Notice of Final Action must contain the following information:

1. The reviewer's decision and the reasons supporting the decision;
2. A brief description of the investigation process employed to reach the decision;
3. A notice that, if no decision is reached within 60 days or if dissatisfied with the decision, the grievant or complainant may appeal to the Commonwealth of Virginia within 10 business days of receipt of the Notice of Final Action; and
4. A notice that the grievant or complainant may seek a remedy authorized under another Federal, State or local law.

Record Keeping Requirements

Records regarding grievances and complaints must be maintained for at least three years from the date of resolution of the grievance or complaint. All records must include the following:

1. The name and address of the grievant or complainant;
2. A description of the grievance or complaint;
3. The date the grievance or complaint was filed;
4. The disposition (final action);
5. The date of disposition of the grievance or complaint; and
6. Any other pertinent information.

To the maximum extent possible, the identity of any person who has furnished information relating to, or assisting in, an investigation of a possible violation of the WIOA shall be kept confidential. The information may only be used

for purposes of:

1. Record keeping and reporting;
2. Determining the extent to which an entity is operating its WIOA funded programs or activities in a nondiscriminatory manner; or
3. Other use authorized by the nondiscrimination and equal opportunity provisions of WIOA.

PROCESSING APPEALS OF AGENCY LEVEL GRIEVANCE AND COMPLAINT DECISIONS

The grievance and complaint review procedures for the agency level apply to alleged violations of their requirements of WIOA and/or provisions of a related agreement. These grievances or complaints may be submitted by participants and other interested parties affected by the local workforce development system, including American Job Centers, Center Partners, Service and/or Training Providers. AARWC will review:

1. Appeals of decisions made at the local agency level during the grievance and complaint process;
2. Grievances or complaints alleging a violation of the requirements of the WIOA and/or provisions of a related agreement, filed by interested parties who have no recourse to the grievance and complaint procedure of a local agency, but who are affected by the WIOA programs offered through Virginia Career Works;
3. Grievances or complaints from eligible providers of training services who are denied equitable opportunities to provide training programs to WIOA participants, by an American Jobcenter or program operator, or otherwise adversely affected by the American Job Center or program operator.*

*Grievances or complaints from providers of training services who are denied eligibility by the AARWC, or who's eligibility is terminated or otherwise adversely affected by the AARWC must file their complaints with the Commonwealth of Virginia.

Filing an Appeal

Each appeal must be filed, in writing, within 10 business days of the date of which the Notice of Final Action is received and must contain the following information:

1. The name, address and phone number of the person filing the appeal;
2. The identity of the respondent (i.e. the individual or entity against whom the grievance or complaint is alleged);
3. A description of the allegation(s). This description must include enough detail to allow the reviewer to decide whether the allegation(s), if true, would violate any of the provision of WIOA;
4. Pertinent dates, including the date on which the grievance or complaint was filed at the local agency level, the date of the alleged occurrence for which the grievance or complaint was filed and the date a written decision was issued (or should have been issued);
5. If applicable, copies of the provisions of the WIOA, the regulations, etc. which are believed to have been violated;
6. A statement disclosing other steps pursued at any level regarding the grievance or complaint in question;
7. A copy of the agency's Notice of Final Action, if such was rendered; and
8. The signature of the person filing the appeal.

NOTE: The appeal must be accompanied by all documentation submitted to the agency when filing the original complaint. Only information received by the agency during the initial investigation will be allowed as evidence in the appeal process.

Methods of Resolution/Disposition of Complaints

Upon receipt of the written request for appeal and all the pertinent information outlined above, the reviewer for the AARWC will provide the grievant, or complainant, and the respondent with written acknowledgement of the appeal. This correspondence will be sent within five (5) business days and include both, a summary of the allegations submitted and an offer to resolve the issue informally prior to rendering a decision based on the written records. Finally, the acknowledgment will include a notice that upon review of the documentary evidence presented, the reviewer will make his/her decision.

The reviewer may offer the opportunity to resolve the issue informally prior to rendering a decision based on the written records. If the parties decline this opportunity, the reviewer will accept, reject or modify the decision for the local agency based on a review of the evidence. The reviewer may also remand the grievance or complaint to the local agency for further investigation. In any case, the reviewer has a maximum of 30 calendar days to review the allegation(s) and offer a resolution.

Notice of Final Action

Once a decision is reached, a Notice of Final Action must be sent to the grievant or complainant and respondent. If an informal resolution was provided, the Notice of Final Action will summarize the resolution agreed upon. If no informal resolution was provided, the Notice of Final Action will contain the following information:

1. The reviewer's decision and the reason supporting the decision.
2. A notice that, if dissatisfied with the decision, the grievant or complainant may appeal to the Commonwealth of Virginia, within 10 days of the Notice of Final Action from the AARWC;
3. Notice that copies of appeals submitted to the Workforce Development Act Consultant, Virginia Community College System, 300 Arboretum Place, Richmond, VA 23236, must be sent to the reviewer at AARWC, 2100 Washington Blvd, 1st Floor, Arlington, VA 22204; and
4. A notice that the grievant or complainant may seek a remedy authorized under another Federal, State or local law.

Record Keeping Requirements

Records regarding grievances and complaints must be maintained for at least three years from the date of final resolution. All records must include the following:

1. The name and address of the grievant or complainant;
2. A description of the grievance or complaint;
3. The date the grievance or complaint was filed;
4. The disposition (final action);
5. The date of disposition of the grievance or complaint; and
6. Any other pertinent information.

To the maximum extent possible, the identity of any person who has furnished information relating to, or assisting in, an investigation of a possible violation of the WIOA shall be kept confidential. The information may only be used for purposes of:

1. Record keeping and reporting;
2. Determining the extent to which an entity is operating its WIOA funded programs or activities in a nondiscriminatory manner; or
3. Other use authorized by the nondiscrimination and equal opportunity provisions of WIOA.

Funding Transfer Request



ALEXANDRIA/ARLINGTON
REGIONAL WORKFORCE COUNCIL

August 25, 2021

Mr. George Taratsas
WIOA Administrator
Virginia Community College System
Arboretum III
300 Arboretum Place, 3rd Fl-Site 390
Richmond, VA 23236

RE: PY20 WIOA FUNDING TRANSFER REQUEST #2

Dear Mr. Taratsas:

Virginia Career Works Alexandria/Arlington requests the transfer of \$43,919.46 from PY20 WIOA Dislocated Worker funds to the PY20 WIOA Adult funds. This request will cover additional projected expenses in PY20. A WIOA Title I programmatic and financial analysis pertaining to this request can be found in Attachment A.

Thank you in advance for your attention to this request. Should you have questions please contact David Remick at dremick@arlingtonva.us or 703.228.1412.

Sincerely,

Alberto Marino
Chair

CC: David Remick

ATTACHMENT A

WIOA Title I Expenses for VCWAA				
	ADULT		DW	
	# Active Participants	Expenditures	# Active Participants	Expenditures
PY 2017	71	\$ 306,214.00	31	\$ 233,870.00
PY 2018	175	\$ 328,019.00	45	\$ 125,472.00
PY 2019	146	\$ 286,368.27	32	\$ 153,864.73
PY 2020	75	\$ 195,577.72	18	\$ 189,205.28
WIOA ADULT PY 2020	Total	40% Training	Supportive Services	Staff/Operating
Budget	\$ 195,577.72	\$ 78,231.09	\$ 0.00	\$ 117,346.63
Projected Expenses	\$ 239,497.18	\$ 95,798.87	\$ 0.00	\$ 143,698.31
Shortfall	(\$ 43,919.46)	(\$ 17,567.78)	\$ 0.00	(\$ 26,351.68)
WIOA DW PY 2020	Total	40% Training	Supportive Services	Staff/Operating
Budget	\$ 189,205.28	\$ 75,682.11	\$ 0.00	\$ 113,523.17
Projected Expenses	\$ 145,285.82	\$ 58,114.33	\$ 0.00	\$ 87,171.49
Surplus	\$ 43,919.46	\$ 17,567.78	\$ 0.00	\$ 26,351.68
Transfer Request Total (DW to Adult):				\$ 43,919.46

New Service & Program Information

USING "HIRING" OR "RETENTION" BONUSES TO ATTRACT YOUR FUTURE WORKFORCE?

***WE WILL REIMBURSE THE COST OF THE
BONUS THAT YOU ARE PAYING, UP TO \$500.***

Virginia's "Return to Earn" grant program will reimburse bonuses made by eligible small businesses up to \$500 for new hires. Funds will only be reimbursed for new hires in positions that pay at least \$15 per hour and qualify as W-2 employment, either full- or part-time.

Only Virginia employers with fewer than 100 employees may qualify for funds. The employer must also be incorporated in Virginia.

To learn more and to apply, <https://tinyurl.com/chk8c2uv>.



ARLINGTON SMALL BUSINESS

GRANT^{\$}2.0

Goals

- Provide cash quickly to support business recovery from COVID-19
- Target hard-to-reach businesses
- Target severely impacted industry sectors

Program

- \$10,000 cash grants to 200 small businesses
- Use for payroll, rent, other business expenses directly related to COVID-19 impacts

Eligible Businesses

- At least 1 location in Arlington, including principle place of business
- Physically located in commercially zoned area
- Less than 50 employees as of September 1, 2021
- 2021 Arlington Business License
- No Arlington tax obligations as of August 1, 2021
- For industry sectors:

Not Eligible

- Businesses that received federal or state funding for COVID-19 relief
- Franchises that are not locally owned or operated
- Web-based businesses
- Businesses that are permanently closed
- Businesses that are engaged in illegal activities
- Government entities, including political divisions of Virginia Commonwealth

Outreach

- Marketing with yard signs/social media advertising/PSAs/videos, etc.
- Direct assistance through BizLaunch
- Partners to help recruit applicants and share content

Process

- Application opens Wednesday, October 6, 2021
- Application closes Wednesday, October 20, 2021 at 11:59 PM
- Eligible applicants randomly selected
- Funding priority for eligible businesses with fully vaccinated employees or that have a weekly testing protocol in place

Contact: Tara Palacios, BizLaunch Director

Tpalacios@arlingtonva.us

703-228-0808

What is Metrix Learning®?

As part of their SkillUp® City of Alexandria & Arlington County Program, the City of Alexandria & Arlington County have made some features of the Metrix Learning® System available to local employers. Metrix Learning® is a comprehensive platform that delivers assessments, online skill training, and cost-effective programs for 100+ industry-recognized certifications from anywhere with internet access, 24/7.

SkillUp® City of Alexandria & Arlington County for Employers – Free to businesses

- ✓ New hire training
- ✓ Candidate screening - screen Metrix users based on subject matter scores and course interests.
- ✓ 900+ Kenexa Prove It assessments



Upgrade the Skills of Your Existing Staff – Discounted through Virginia Career Works Alexandria / Arlington Region

- ✓ **\$40 per employee** (12-month access) if purchased through the WDB
- ✓ Succession planning, promotion, backfill opportunities, and layoff prevention
- ✓ Certification training (additional charges for practice tests, virtual labs, and test vouchers)
- ✓ Customizable curriculum

Extensive Course Catalog

The online courses include audio, video, closed captioning, lectures, simulations, and quizzes and tests in interactive modules. Featuring **5,000+ world-class courses from Skillsoft Corporation**.

Topics include:

- | | | |
|--------------------------|----------------------|---------------------|
| • Business Etiquette | • IT | • Sexual Harassment |
| • Critical Thinking | • Leadership | • Social Media |
| • Diversity | • Microsoft Office | • Teamwork |
| • Emotional Intelligence | • Project Management | • Time Management |
| • Finance | • Sales | ...and many more! |

Industry-Recognized Certifications

Metrix Learning offers flexible, online training for over 130 industry-recognized certifications. Topics include business (e.g. Project Management, Six-Sigma), desktop (e.g. Microsoft Office, QuickBooks), and IT (e.g. Cisco, Oracle, CompTIA, Amazon) certifications.

For further information, please contact the Virginia Career Works Alexandria / Arlington Region Business Engagement Team at dremick@arlingtonva.us.

BUILD YOUR SKILLS

Get free training to build your skills and prepare for your next job through the SkillUp® Alexandria/Arlington program supported by Metrix Learning. Start with FREE business and IT courses!

Course Topics:

- Computers
- Internet
- Microsoft Office
- Management
- Leadership
- Customer Service
- Math
- Finance
- ...and more!

SIGN UP TODAY!

- 1.) Go to: <http://alexandriaarlington.skillupamerica.org/>
- 2.) Click "JOBSEEKERS" → "REGISTER FOR FREE"
- 3.) Fill out your information for instant access
- 4.) Take as many courses as you want for 180 days (6 months)

WHY E-LEARNING?

- Convenient - Accessible 24/7 from any location with high speed internet access
- Flexible - Matches your skill level and learning pace
- No cost - No tuition or travel costs

For access to additional training and certification resources, please contact your local Virginia Career Works Center:

Alexandria - (703) 746-5990

Arlington - (703) 228-1400

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network



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For more information on how you can obtain a LinkedIn Learning License, go to <https://tinyurl.com/turyyzv8>.



ALEXANDRIA | ARLINGTON REGION





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End of Consent Agenda