## Alaska Department of Labor and Workforce Development

## **Employment and Training Services**

## National Apprenticeship Program Information For the Eligible Training Provider List (ETPL)

Workforce Innovation and Opportunity Act (WIOA) Adult and Dislocated Worker and Youth Programs

Registered Apprenticeships may be placed on the eligible training provider list (ETPL) until the program sponsor notifies the State that it no longer wants to be included on the list. The ETPL is utilized by individuals seeking training opportunities funded by WIOA. To be listed on the ETPL, please complete the following information:

| Registered Training Provider/Spo                                       | onsor:                        |                |                                          |  |
|------------------------------------------------------------------------|-------------------------------|----------------|------------------------------------------|--|
| Contact Name:                                                          |                               | Title:         |                                          |  |
|                                                                        |                               |                | Email:                                   |  |
| Mailing Address:                                                       |                               |                |                                          |  |
| Website:                                                               | Federal EIN:                  |                |                                          |  |
| Registered Apprenticeship Progra                                       | am(s):                        |                |                                          |  |
| Program Registration Number(s)                                         |                               |                |                                          |  |
| Program Description:                                                   |                               |                |                                          |  |
|                                                                        |                               |                |                                          |  |
|                                                                        |                               |                |                                          |  |
| Name of Related Technical Instru                                       | uction provider(s) if differe |                |                                          |  |
| Address and location where prog                                        |                               |                |                                          |  |
| Delivery method: ☐ Classroom ☐                                         | ☐ Online, E-learning, or Dis  | stance Learnin | g 🗆 Hybrid or Blended Program            |  |
| Apprenticeship Approach: Ti                                            | me-Based Competer             | ncy-based      | Hybrid                                   |  |
| Program length for full-time enro                                      | ollment in clock hours:       | a              | nd in weeks:                             |  |
| Number of active apprentices: _                                        | SOC Code/RAPIC                | OS Code:       |                                          |  |
| Industry recognized certificate o                                      | r endorsement obtained ι      | ıpon complet   | ion of the program:                      |  |
| I hereby certify, as an authorized all information included in this ap |                               |                | stitution, that the above assurances and |  |
| Authorized Signature                                                   |                               |                | Date                                     |  |
| Printed Nam                                                            |                               | _              |                                          |  |

Submit completed applications and Standards via email to: <a href="DOL.ETPL@alaska.gov">DOL.ETPL@alaska.gov</a> Additional information can be located at: <a href="https://labor.alaska.gov/dets/etpl.htm">https://labor.alaska.gov/dets/etpl.htm</a>

