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LOWER SAVANNAH WIA INSTRUCTION NUMBER: PY'10-006, Revision #3
TO: See Distribution List
ISSUANCE DATE: October 4, 2017
EFFECTIVE DATE: **October 4, 2017**
REVIEW DATE:
REVISION DATE: **October 4, 2017**
EXPIRATION DATE:
SUBJECT: **WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA) PARTICIPANT LIFETIME INDIVIDUAL TRAINING ACCOUNT (ITA) CAP and JUSTIFICATION REPORT**

PURPOSE: The purpose of this Instruction is to inform the Lower Savannah Workforce Development Area's (LSWDA) sub-recipient organizations and staff members of the **LSWDA's Adult, Dislocated Worker and Youth WIOA Participant Lifetime Individual Training Account (ITA) Cap and Justification Report** (attached).

BACKGROUND: In response to the Workforce Innovation and Opportunity Act (WIOA) requirements and to provide guidance for planning purposes and activities to sub-recipients and staff with the implementation of WIOA as described in TEGLs WIOA NO. 19-16 and 21-16.

POLICY: ***This policy is in effect for all WIOA participants, Adults, Dislocated Workers and Youth, which were approved for training on or after October 4, 2017***. The **lifetime maximum** ITA amount for Adults, Dislocated Workers and Youth approved for training is hereby set and shall not exceed **$10,000.00 per WIOA Participant**. ITAs include tuition, books, tools, uniforms, fees, and supplies that are required for the completion of classroom training, On-the-Job Training (OJT) and Work Based Learning activities. All Training Costs shall be paid in accordance with documented and approved ITA Vouchers. *Supportive Services are not training. Supportive Services are not included in the lifetime maximum training cap*. Please reference LSWDA Instruction PY'16-002, Revision #1. Any portion of the total training amount paid with resources other than WIOA funds, such as PELL, Lottery, TAA, etc., will not count toward the Training Cap.

Additional Considerations:

- ***GED and/or Basic Skills services are included in the Lifetime ITA Training Cap amount.*** Therefore, using the most expeditious and most cost efficient means of acquiring these prerequisites is imperative. *(Refer to LSWDA Instruction PY'10-005 GED Services for Adults and Dislocated Workers.)*

An Equal Opportunity Employer/Program. Auxiliary aids and services are available to individuals with disabilities upon request.

- Allowing participants to attend training on a part-time basis increases the cost of training and the time it takes to complete training. Therefore, *full-time training shall be the norm*.
- Part-time training will not be allowed without having written approval from the Workforce Development Administrator. Use the Waiver Request Form to request approval of part-time training and provide an explanation in the "Other" category box on the form.
- In extenuating circumstances when it is believed that funding in excess of the training cap is reasonable, necessary, and appropriate for a customer to achieve employment and economic sufficiency, a Waiver Request Form shall be submitted to the Workforce Development Administrator for approval prior to any expenditures in excess of the training cap. Any such situations and approvals will be reported to the Lower Savannah Workforce Development Board (LSWDB). If training exceeds the State maximum of the $14,000 lifetime cap, notification will be reported to the State Administrative Agency. Specific justification for a waiver must be presented.

ACTION: The LSWDA must utilize a system to document all training costs for each WIOA participant. Therefore, all Lower Savannah WIOA Service Providers/Contractors shall utilize the South Carolina Works On-line System (SCWOS) Individual Fund Tracking (IFT) module.

PLEASE COPY AND DISTRIBUTE TO ALL WIOA FUNDED (PARTLY or FULLY) STAFF WITHIN YOUR AGENCY.

INQUIRIES: Direct all inquiries regarding this Instruction to the Lower Savannah Council of Governments' Workforce Development Staff, Post Office Box 850, Aiken, South Carolina 29801-0850; telephone (803) 649-7981; fax (803) 649-2248; or e-mail abanderson@lscog.org.

André B. Anderson
Workforce Development Administrator

Attachment: SCDEW WIOA Participant Lifetime ITA Cap Justification Report

Placed on LSWIA Website

SOUTH CAROLINA DEPARTMENT OF EMPLOYMENT WORKFORCE

WIOA PARTICIPANT LIFETIME INDIVIDUAL TRAINING ACCOUNT (ITA) CAP JUSTIFICATION REPORT

SECTION 1: LWDA INFORMATION

Grantee Name: _____

LWDA: _____

Contact Person: _____ Phone #: _____

Reporting Period End Date: _____

Adult & DW Local ITA Cap: $ 10,000.00 Youth Local ITA Cap: $ 10,000.00

SECTION 2: PARTICIPANT INFORMATION

Participant Name / State ID#	Beginning Training Date:	End Training Date:	Training Title:	Training Provider:	Amount of Total Training:	Participant Current Status: *FT (full-time) PT (part-time)*	Indicate reason for exceeding the Lifetime ITA Cap *(be specific & if needed attach additional documentation)*

SECTION 3: SIGNATURES

Signature: _____

Typed/Printed Name: _____

Date: _____