



**TOWN OF HEMPSTEAD/CITY OF LONG BEACH (WDB) PROGRAM YEAR 2025
REQUEST FOR PROPOSALS FOR OCCUPATIONAL SKILLS TRAINING**

**Program Years 2025 through 2027
July 1, 2025 through June 30, 2027**

Essential Information and Dates

RFP Release Date	Friday, January 31, 2025
Deadline for Proposal Submission	Friday, April 11, 2025

HempsteadWorks
www.hempsteadworks.com

For all questions and inquiries, please email Elizabeth Ajasin
eajasin@hempsteadworks.com.

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1. BACKGROUND

The Town of Hempstead Department of Occupational Resources (DOOR) is the grant subrecipient/fiscal agent for the Town of Hempstead/City of Long Beach Local Workforce Area under the Workforce Innovation and Opportunity Act (WIOA) of 2014. WIOA funding is used to help jobseekers access employment, education, training and supportive services, as well as match employers with skilled workers to compete in the global economy. HempsteadWorks is the name given to the One-Stop Workforce System, whose mission is to ensure that skilled workers are available to employers, to help jobseekers find work, and to foster economic development.

HempsteadWorks offers employment and training services to thousands of jobseekers and businesses in the Town of Hempstead and City of Long Beach in addition to services supported through competitively procured contracts among community-based, youth-serving organizations. At the HempsteadWorks Career Center, we provide the following services:

- I. Career Planning and Counseling
- II. Occupational Skills Training Programs for Careers in High-Demand Industries
- III. Career and Computer Skills Workshops
- IV. Online Job Banks
- V. Referrals to Partner Agencies
- VI. Access to Computers, Copiers, and Career Development Literature

We also assist businesses with identifying qualified employees, posting job vacancies, and accessing training funds for professional workforce development. Additional information on programs and services can be found at www.hempsteadworks.com.

2. PURPOSE

The purpose of this Request for Proposals (RFP) is to invite qualified educational institutions, training providers, and organizations to submit proposals to offer Occupational Skills Training (OST). This training will serve individuals seeking to enhance their skills and obtain certifications in targeted, high-demand occupations, facilitating their transition to stable, sustainable employment.

3. SCOPE OF WORK

The selected training providers will be responsible for delivering high-quality, employer-driven occupational skills training in alignment with regional workforce needs. Providers should offer training programs that enable participants to acquire the technical skills, certifications, and credentials required for in-demand occupations across various industries. This training will be provided to WIOA-eligible individuals (see Section 6)

and should result in measurable improvements in employability and job placement outcomes. Specifically, the scope of work includes the following:

A. Training Program Design and Delivery

Providers must design and deliver training programs that are aligned with current industry standards and that lead to industry-recognized credentials or certifications.

B. Curriculum Development

Providers must develop or offer curricula that are comprehensive, up-to-date, and reflective of the competencies required by employers in targeted sectors. The curriculum should include both theoretical instruction and hands-on, practical experience, as applicable.

C. Certification and Credentialing

All training programs must culminate in a recognized certification, credential, or qualification that enhances the participant's employability and career advancement opportunities. Providers must also ensure that participants are prepared to pass any relevant certification exams or assessments.

D. Employer Partnerships and Job Placement

Providers are encouraged to establish partnerships with local employers to ensure that training programs are directly aligned with employer needs and that there are opportunities for job placement and internships for program graduates.

E. Supportive Services

In addition to training, providers should offer appropriate support services, including but not limited to academic tutoring, career counseling, and job readiness workshops. These services should be designed to ensure the successful completion of the training program and a smooth transition into employment.

F. Reporting and Accountability

Providers must comply with all reporting requirements related to participant enrollment, progress, and completion rates (see Section 9). This includes providing data on training outcomes, certifications earned, and job placements in accordance with WIOA guidelines.

G. Performance Outcomes

Training providers must demonstrate the ability to achieve performance metrics related to participant success, including completion rates, credential attainment,

and employment outcomes. Providers will be expected to continuously assess and improve their training programs based on participant and employer feedback.

4. FUNDING

Please be advised that no minimum number of students will be guaranteed by DOOR and that there is no maximum award available for the selected vendor(s); however, cost competitiveness and efficiency are sought in this solicitation. DOOR will also prioritize proposals that demonstrate how the training program aligns with current in-demand occupations and equip participants with the skills necessary for securing employment in these high-demand sectors.

5. APPLICANT ELIGIBILITY

Proposals will be considered from entities that:

- ✓ Are certified by the New York State Education Department (NYSED) or other appropriate certifying agencies;
- ✓ Has demonstrated effectiveness in providing occupational skills training that leads to employment in high-demand occupations within growing industry sectors, with potential for long-term career growth, job placement opportunities, and satisfactory salary levels
- ✓ Are listed on the New York State Eligible Training Providers List ([ETPL](#))
- ✓ Provide training in occupational areas that may be found on the NYS Department of Labor's website [here](#)
- ✓ Conduct training that will qualify participants to enter employment in full-time, permanent unsubsidized jobs at a salary rate of no less than \$20.00 per hour

6. PARTICIPANT ELIGIBILITY

Eligible participants for placement in an occupational skills training program include:

1. Adults with barriers to employment (e.g., low-income individuals; public assistance recipients; English language learners; ex-offenders; single parents; homeless individuals; individuals with disabilities; veterans; older individuals (aged 55 and older); and displaced homemakers)
2. WIOA dislocated workers (the definition of a dislocated worker can be found [here](#))
3. Out-of-School, at-risk youth aged 18-24

7. NEW YORK STATE ELIGIBLE TRAINING PROVIDERS LIST (ETPL)

All proposed courses for this RFP must be listed on the ETPL at the time of submission. **Only programs that appear on the ETPL will be considered for funding under this RFP.**

Note:

- a) The information provided under Proposed Courses (Attachment C) must exactly match the details of the corresponding courses listed on the ETPL
- b) If awarded a contract, the training provider is required to notify DOOR of any changes to the courses, including course content or duration. For the change to be approved and the contract modified, these changes must also be updated on the ETPL
- c) If there are any issues or questions related to the ETPL, including course listings or eligibility, training providers must direct all inquiries to ETPL staff at etp@labor.ny.gov for guidance and assistance.

8. CLASS SIZE AND PARTICIPANT SELECTION

To be considered, the applicant must be able to accommodate individual referrals forms and vouchers issued by DOOR. No minimum number of students will be guaranteed by DOOR. Applicant must ensure that clear and accurate records are kept for all participants referred by DOOR.

Under the direction of the Workforce Development Board (WDB), the HempsteadWorks Workforce Development System will recruit, screen, assess, and refer eligible adults, dislocated workers, and youth for proposed training programs. The applicant must clearly outline the qualifying standards for enrollment, including but not limited to minimum skills required, educational levels, and vocational aptitude. The screening process will ensure that participants meet the eligibility requirements established under WIOA, demonstrate a strong commitment to the WIOA program, and have a clear dedication to succeeding in the training program. Additionally, the training offered must align with the participant's career interests and employment goals to ensure that it contributes to securing long-term, meaningful employment. DOOR reserves the right to request from the applicant the reason for the rejection of any participant for training, including but not limited to failure to meet the eligibility or screening criteria.

9. REPORTING REQUIREMENTS

The applicant selected must demonstrate the capability to generate accurate and timely information and submit periodic reports to DOOR. These reports (see Attachment E) include, but are not limited to:

- Biweekly Attendance Reports: These reports should contain verified copies of participants' classroom attendance, along with an explanation of any failure to attend. The report must highlight any discrepancies in students' attendance records.

Providers must immediately notify DOOR if a student has an absenteeism issue or drops out of the program. Telephone contact with DOOR staff to discuss attendance concerns is also encouraged at any time.

- Monthly Student Progress Reports: This report reflects the participant's competency levels, including technical performance as well as behavioral patterns and basic attitudes. It must:
 1. Document the immediate achievement of entry-level skills, including the testing or evaluation methods used to determine such achievements, as well as any counseling or other interventions provided.
 2. Include copies of updated transcripts and indicate the percentage of the course the student has completed.
 3. Be forwarded to DOOR staff no later than the 15th of each month.
- Completion Reports: A report due no more than ten (10) calendar days after the class completion date, detailing the graduation information for each participant. This report should include:
 1. A copy of the student's certificate of completion.
 2. Whether the student sat for a certification exam, along with the outcome of that exam.
- Placement Reports: A report on each participant's employment placement, submitted no later than seventy-five (75) days after course completion. The report should include placement details such as:
 1. Employer name and address.
 2. Start date, hourly wage, telephone number of employer, hours worked, and job title.
 3. Date of the participant's first paycheck.
 4. For courses that include an externship, the report should also include placement details for the externship.

It is crucial that training providers maintain open and continuous communication with DOOR regarding any changes in student status, particularly regarding absenteeism or dropout. Timely notification of these changes ensures that appropriate actions can be taken, including potential adjustments to payments, enrollments, or further interventions.

10. COST AND PAYMENTS

Applicants must understand that billing and payments will be in accordance with the following guidelines:

- Course Stability

The course fees and associated costs submitted in response to this RFP will be considered final and 'locked in' for the entire duration of the contract. No adjustments to course costs will be permitted during the contract term, regardless of changes in the provider's expenses, inflation, or other factors. Providers are expected to honor the proposed pricing throughout the entirety of the contract period.

- Existing Contractors

a) No new enrollments will be processed until the new contract for the period beginning July 2025 has been fully awarded and executed

b) Payments for existing students will be placed on hold until the new contract is awarded and fully executed. During this period, no new claims for payment will be processed.

- Withholding of Payments

DOOR reserves the right to withhold payments until all required documentation, as outlined in Section 9, has been submitted. Failure to submit complete and timely documentation may result in delayed payments or suspension of funding.

- Enrollment Restrictions

No new students will be enrolled or processed for training until all required reports, as specified in this RFP, have been submitted to DOOR. The timely submission of these reports is necessary to ensure the continuation of funding and enrollment activities.

- Payment Structure

- Training provider will quote a training charge per WIOA participant, which will be an all-inclusive figure for tuition, books, supplies, uniforms, tools, licenses and test fees, and/or other incidentals
- The per participant training cost will be divided by the total number of scheduled training hours to arrive at an hourly charge per participant.
- Upon completion of an individual referral training program, the training institution will be paid 100% of the sum calculated by multiplying the actual hours attended by each participant by hourly charge per participant.

- The remaining unattended tuition hours will be paid upon documented proof that the participant:
 - Completed at least 80% of the scheduled class hours
 - Successfully completed the training and was awarded a certificate of completion (a copy of this certificate must be submitted to DOOR)
- Payments for participants who do complete the program will be made based upon actual hours of attendance.
- The payment procedure may provide for a mutually agreeable schedule for installment or periodic payments to training institutions.
- In the case of accredited colleges, DOOR will abide by the school's payment schedule and refund policy as stated by the college catalog. A copy of the College's/University's payment schedule and refund policy must be attached to this RFP.

Contractors will be expected to maintain complete and accurate records justifying all actual and accrued expenditures, leaving a clear audit trail to the point of origin. Contractor's records with respect to programs funded under WIOA, and/or any other grants administered by DOOR will be subject to periodic audit by DOOR and/or New York State, Nassau County, and/or USDOL and such records must be retained and made available for such purposes.

11. PROPOSAL INSTRUCTIONS

11.1 Deadline

DOOR will review and accept proposals until Friday, April 11, 2025.

11.2 Evaluation Criteria

HempsteadWorks staff will review all proposals to ensure compliance with the requirements of the RFP. Proposal requirements will be evaluated by a review team of HempsteadWorks staff and the Youth Standing Committee and WDB or their designees. Applicants will be rated on a 100-point rating system, and the applicant must achieve a rating of **seventy points or higher** before the review team will consider reviewing proposed courses.

- Experience and prior effectiveness in administering the proposed occupational skills training and in dealing with adults, dislocated workers, and youth who lack self-sufficiency, who are veterans, economically disadvantaged, are public assistance recipients, and who have serious barriers to employment
- Proven capability in the design, implementation, and conduct of training courses responsive to the demands of the labor market

- Adequacy and accessibility of training facilities
- Curriculum and method for service delivery, with emphasis on demonstrated attainment of competencies by students and the relationship of these competencies to the requirement of high-growth industry sectors and clusters
- Demonstrates that it has adequate job placement capabilities
- Past performance quantified in terms of enrollments, completions, job placement, and average wages at placement
- Capability of the institution to comply with DOOR's reporting requirements for fiscal and programmatic information
- Total proposed cost per student
- All questions must be answered in order for the proposal to be reviewed
- Willingness and capability of the institution to comply with WIOA and other federal statutes, rules and regulations; evidence of Equal Employment Opportunity/Affirmative Action plans or policy statements; evidence of course approval by an appropriate State or Federal agency such as Education or the Health Department

11.3 Format and Content

Organizations with interest in providing the requested occupational skills training should submit a proposal narrative that includes the following below:

1. Completed **Proposal Summary Form and Terms of Agreement** (see Attachment A)
2. Completed **General Information about the Applicant's Programs** (see Attachment B)
3. Completed **Proposed Courses** (see Attachment C) to provide information specific to each proposed course. One **Proposed Courses** attachment should be completed for each proposed course.
4. Completed **Required Attachments Checklist** (see Attachment D)

12. LIMITATIONS

The Hempstead/Long Beach WDB reserves the right to accept or reject any or all proposals received as a result of this request; to negotiate all qualified sources; or to cancel in part or in its entirety this RFP if found not in the best interest of the WDB and/or Youth Standing Committee. This RFP does not commit the WDB to award a contract, to pay costs incurred for preparation of proposals, to pay for legal liability in refusing to award a contract, or to procure or contract for services. Vendors funded under WIOA must adhere to EEO laws and standards. Funding for any project will be dependent upon availability of WIOA funds. Demonstration of past performance and

cooperation of the organization awarded in past contract years will be taken into consideration in review of proposals. Poor past or current contract performance with HempsteadWorks or other funding sources may affect recommendations for awards. HempsteadWorks reserves the right to stipulate special terms regarding the area of concern that will become part of the final contract.

13. EQUAL OPPORTUNITY AND NONDISCRIMINATION ASSURANCE

- A. As a condition to the award of financial assistance from NYSDOL under Title I of WIOA, the grant applicant assures that it will comply fully with the EO and nondiscrimination provisions of the following laws:
1. WIOA Section 188 which prohibits discrimination against all individuals in the United States on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, transgender status, and gender identity), national origin (including limited English proficiency (LEP) individuals), age disability, or political affiliation or belief, or against beneficiaries on the basis of either citizenship status 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. The Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age; and
 5. Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs.
- B. The grant applicant also assures that it will comply with 29 CFR Part 38 and all other regulations implementing the laws listed above. This assurance applies to the grant applicant's operation of the WIOA Title I-financially assisted program or activity, and to all agreements the grant applicant makes to carry out the WIOA Title I-financially assisted program or activity. The grant applicant understands that the United States has the right to seek judicial enforcement of this assurance.

14. WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS

Contracts awarded pursuant to this RFP will require the contractor to secure and maintain Workers' Compensation Insurance and Disability Benefits as required by the State of New York for the life of this contract. In accordance with Workers' Compensation Law Sections 57 and 220(8), the contractor must be legally exempt from obtaining workers' compensation insurance coverage; or obtain such coverage from an insurance carrier; or be a Workers' Compensation Board approved self-insured employer or participate in an authorized group self-insurance plan. Proposals submitted in response to this RFP must include one of the following forms:

- (A) WC/DB-100, Affidavit for New York Entities with No Employees and Certain Out of State Entities, That New York State Workers' Compensation and/or Disability Insurance Coverage Is Not Required (Must be stamped as "received" by New York State Workers' Compensation Board); or
- (B) C-105.2 – Certificate of Workers' Compensation; or
- (C) SI-12 – Certificate of Workers' Compensation Self-Insurance.

In addition, proposals must include one of the following forms to DOOR:

- (A) DB-120.1 – Certificate of Disability Benefits Insurance; or
- (B) DB-155 - Certificate of Disability Benefits Self-Insurance.

15. ATTACHMENTS

Attachment A – Proposal Summary Form and Terms of Agreement

PROPOSAL SUMMARY FORM – OCCUPATIONAL SKILLS TRAINING

(This form must appear as cover and first page of proposal submission)

Training Provider Name: _____

Address: _____

Primary Contact and Title: _____

Phone: _____

Email: _____

FEIN/Business ID #: _____

Organization: Private-for-profit Not-for-profit Government Agency Other

Status: Current Contractor Past Contractor New Responder

Planned Service Delivery Highlights

Number of total proposed courses: _____

List all proposed courses:

Terms of Agreement (please check all):

- I have completed all sections of this RFP and understand that failure to submit a complete proposal may jeopardize my opportunity to receive funding from DOOR.
- All courses proposed in this RFP are listed on the New York State Eligible Training Provider List (ETPL).
- I have read and understood all Reporting Requirements (Section 9).
- Included in my proposal are all required documents as outlined in Attachment D – Required Attachments Checklist.

How did you learn about this Request for Proposals? _____

Print Name of Staff Submitting this Proposal

Title

Signature

Attachment B – General Information about the Applicant’s Program

GENERAL INFORMATION ABOUT THE APPLICANT'S PROGRAMS

Please note: This proposal narrative provides an opportunity for you to demonstrate your organization's capacity to meet the program requirements and deliver the desired training. All questions must be answered in full. Failure to provide clear, complete, and adequate responses will result in a significant deduction of points during the evaluation process. Incomplete or unclear answers may negatively impact the evaluation of your proposal.

Please answer the following questions.

Organization Overview and Experience

1. Provide a general description of your organization. Your response should include the following:
 - ✓ Background of your organization: Describe your organization's mission, history, any relevant credentials or accreditations, and how long the institution has been in existence under its current ownership at the same location.
 - ✓ Prior experience in offering the training proposed: Describe your experience delivering the type of training being proposed, including details about relevant programs or courses offered.
 - ✓ Effectiveness in placing trainees in employment: Provide data or examples that demonstrate your success in placing trainees in relevant employment, including placement rates or types of positions secured.
 - ✓ Experience working with special target groups: Describe your experience working with specific groups, such as dislocated workers, economically disadvantaged individuals, public assistance recipients, individuals with basic skills deficiencies, and those facing other barriers to employment.
 - ✓ Goals and objectives: Outline the goals and objectives your organization aims to achieve through the proposed training program(s), specifically how they align with workforce needs and job market demands.

2. Is your institution licensed or accredited by any state or national organizations?
 Yes No

If yes, please specify the licensing or accrediting organization and provide a copy of the license or accreditation certificate.

Program Goals, Evaluation, and Supportive Services

1. Describe your institution's attendance and record-keeping procedures, including the following:

- ✓ How are attendance records kept?
 - ✓ How are excused absences verified?
 - ✓ Are you willing to provide DOOR with attendance records related to WIOA and/or other grants administered by DOOR for funded trainees?
2. In addition to attendance and financial reports, can your institution generate the following reports (see Attachment E) in an accurate and timely manner: Biweekly Attendance Reports, Monthly Student Progress Reports, Completion Reports, and Placement Reports, and other periodic reports that may be required? Yes No
3. Describe the procedures your institution uses to evaluate the progress of students throughout the training program. This should include specific methods or tools used to assess student mastery of both technical skills and course content. Please detail how evaluations are conducted (e.g., regular test, practical assessments, project-based evaluations), how progress is tracked over time, and how feedback is provided to students. Additionally, explain how the results of these evaluations inform necessary interventions and adjustments to support student success.
4. Does your institution provide tutoring services to students? If so, please describe the services offered, including types of tutoring (e.g., one-on-one, group sessions) and the areas in which students receive support.
5. Does your institution provide counseling or case management services to students? If yes, please describe the types of counseling and support services offered, including but not limited to academic counseling, career counseling, and personal support. Explain how these services are structured, who provides them (e.g., trained counselors, case managers), and how they are integrated into the overall student experience. Additionally, describe any specialized support for students facing barriers to success (such as financial hardship, mental health concerns, or work-life balance challenges). Include how these services are tailored to meet the individual needs of students and how the impact of these services is assessed.
6. Does your institution offer supportive services to students? Yes No

If yes, please describe the range of supportive services provided to students (e.g., childcare, transportation assistance, financial aid, tutoring, housing assistance, mentoring, etc.). Include how these services are designed to address specific barriers that students may face during their training. Additionally, explain whether these services are offered free of charge or at a cost to the student, and if there are any eligibility criteria for accessing them.

Employment Placement and Industry Partnerships

1. Describe your institution's employment placement services and capabilities. What specific services are offered to students to support their transition into the workforce? This may include job development, resume assistance, pre-employment counseling, interview preparation, job referrals, networking opportunities, follow-up services, and any other relevant employment support. Please explain how these services are structured and delivered (e.g., individual sessions, workshops, employer presentation) and how they are tailored to meet the specific needs of the students.
2. What are your industry partnerships? Do you collaborate with employers or industry partners to ensure that your training programs align with current workforce needs and job market demands?
3. Please list any businesses or organizations with whom you have established partnerships. Include information on training, internships, job placement, or any other collaborations.
4. Do you collect feedback from employers about the performance of your graduates?
 Yes No

If yes, please provide a summary of the feedback or include any notable employer testimonials.

Institutional Capacity and Compliance

1. Provide a statement attesting to the fiscal soundness of your institution and its capability to provide DOOR with the necessary documentation related to training funded through DOOR. Include a statement confirming that your institution will comply with the audit requirements of DOOR, the New York State Department of Labor, and the U.S. Department of Labor. Please attach a copy of your most recent fiscal audit (a CPA statement is acceptable).
2. Will special classes be established for WIOA participants (and/or any other grants administered by DOOR), or will they be integrated into regular classes? Please describe how WIOA participants will be supported within the proposed training programs.
3. Describe the total student capacity of your institution, including information on cohort size, the number of instructors, and the student-to-instructor ratio. Include any additional details about resources available to support students during training.
4. Does your institution have Equal Employment Opportunity (EEO) and Affirmative Action (AA) plans? Please provide a statement outlining your institution's EEO and AA policies, ensuring that all services provided are free from discrimination and that

all participants referred by DOOR will not be discriminated against on the basis of race, creed, color, disability, national origin, sex, political affiliation, or belief.

5. Does your institution participate in or administer student aid or grant programs?
 Yes No

If yes, please describe the types of aid or grants available.

6. Has your institution provided training to participants referred by DOOR in the past?
 Yes No

If yes, please describe the type of training, the number of participants, and any measurable outcomes or successes.

7. Is your institution fully accessible to individuals with disabilities? Yes No

If yes, please describe the accommodations offered to students with disabilities.

If no, do you have a State or Federal waiver? Yes No

If yes, please provide details.

8. If your organization has previously had a contract with DOOR, please indicate the nature of the contract and the level at which you achieved program deliverables (e.g. successful training completions, timely submission of required reporting documents, employment placements post training, prompt notice of student dropouts).

Attachment C – Proposed Courses

PROPOSED COURSES

Please note: All fields must be completed in full. Incomplete submissions will not be considered. Only courses that meet our program's requirements and align with our needs will be approved. Refer to Section 10 – Costs and Payments for details on fixed course fees.

Training Program Information

1. Training Program Name: _____

2. Course listed on the ETPL: Yes No

3. Training Program Overview:

4. Training Delivery Mode: In-person Virtual Hybrid

5. Education Strategy (select all that apply): Classroom Training Lab Practical

6. Length of Training:
 - i. Total hours: _____
 - ii. Total weeks: _____
 - iii. Hours per day: _____
 - iv. Days per week: _____

7. Class size and number of cohorts run per year: _____

8. Specific criteria for acceptance into this course (please indicate all that apply and provide details where necessary):
 - Minimum Academic Requirements (e.g., high school diploma, GED, etc.)

Please specify: _____
 - Minimum Reading and Math Requirements (e.g. reading and math level)

Please specify: _____
 - Specific Skill Requirements (e.g., proficiency in software, prior work experience)

Please specify: _____
 - Physical requirements (e.g., heavy lifting, handling blood, etc.)

Please specify: _____

- Minimum Age Requirement
Please specify: _____
- Background Check
Please specify: _____
- Drug Screening
Please specify: _____
- Interview or Assessment
Please specify: _____
- Other
Please specify: _____

9. Skills

i. List the specific occupational skills to be obtained from training program:

ii. List specific occupation(s) for which the program is training:

iii. List the license(s) and/or certification(s) required and academic prerequisites (e.g. high school diploma) required for employment in the above field(s).

iv. Provide the name and national accreditation or third-party issuer of the specific credential the trainees can receive at the conclusion of training:

Credential: _____	Issuer: _____
Credential: _____	Issuer: _____
Credential: _____	Issuer: _____

v. An internship/externship is part of this course: Yes No

If yes, please indicate:

- Nature of Internship/Externship:

- Number of Hours: _____
- Training provider will match students with the opportunity: Yes No

vi. School's experience in providing this training:

vii. Potential obstacles to employment in this field (e.g., criminal history):

viii. Provide proposed start dates over the course of the next two years (July 2025 through June 2027).

Student Attendance

1. Indicate here what is a classroom hour if other than 60 minutes:

1 classroom hour = _____ minutes

2. Concerning attendance, New York State Education Department guidelines generally require that a student be absent for no more than 20% of the scheduled class time in order to qualify for graduation; that is, a student who has complete 80% of the scheduled class time may be eligible for graduation.

Please complete the following statement: Students of this course may qualify for completion if they complete _____% of the scheduled class time.

Training Program Cost

- i. Tuition Cost: _____
- ii. All Other Costs associated with training (e.g. books, supplies, tools, exam fees, uniforms, etc.)¹:

Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____
Item: _____	Cost: _____

iii. Total Cost per student (including Other Costs): _____

iv. The quoted training cost is the same cost offered to the public: Yes No

If no, please indicate why:

v. Special classes will be established for WIOA (and/or other grants administered by DOOR) participants: Yes No

If yes, please explain:

¹ We will request that the training provider bill us directly for these additional costs prior to the start of training.

Student Success and Employment Outcomes

1. Statistics for the past 1 year:

- Percentage of students who have completed this course: _____
- Percentage of students placed in jobs: _____
- Percentage of students placed in training-related jobs: _____
- Median starting salary or hourly wage of job placements: _____
- Percentage of students who attained a credential attained: _____

2. List businesses where past students have been hired:

Attachment D – Required Attachments Checklist

Required Attachments Checklist

Below is a list of attachments each applicant must provide in addition to their completed proposal:

	Attachment	✓
1	Attachment A – Proposal Summary Form	
2	Attachment B – General Information about the Applicant's Programs	
3	Attachment C – Proposed Courses	
4	Attachment D – Required Attachment Checklist	
5	Attachment F – Key Contacts	
6	Certificate of Workers' Compensation	
7	Certificate of Disability Benefits	
8	Copy of Attendance Policy	
9	Copy of Refund Policy	
10	Copy of license or accreditation that specifies that the institution is licensed/accredited by a state or national organization	
11	Copy of most recent financial statement or fiscal audit report that demonstrates financial viability	
12	Statement of EEO and AA plans or a policy statement demonstrating the institution's commitment to EEO and AA standards	

Attachment E – Required Reports

1. Biweekly Attendance Report
2. Monthly Student Progress Report
3. Completion Report
4. Placement Report

TOWN OF HEMPSTEAD - DEPARTMENT OF OCCUPATIONAL RESOURCES

50 Clinton Street, Hempstead, N.Y., 11550 Telephone No. 516-485-5000

Classroom Training Supportive Service Claim

Student Name: _____ Social Security No.: _____

Training Institution: _____ Site Code: _____

Class / Course: _____ Career Counselor: _____

Pay Period: From: _____ To: _____ Start Date: _____ End Date: _____

	DATE	SIGNATURE	TIME IN	SIGNATURE	TIME OUT	TOTAL HOURS
MON.						
TUE.						
WED.						
THUR.						
FRI.						
SAT.						
SUN.						

MON.						
TUE.						
WED.						
THUR.						
FRI.						
SAT.						
SUN.						

TOTAL HOURS

Note: Authorized school personnel must initial all changes made on times.
Record comments related to student's attendance. If additional space is needed, write on the back of this claim form.

Comment: _____

I HEREBY SWEAR THAT I HAVE REVIEWED THE ABOVE TIMESHEET AND THAT IT CONSTITUTES A TRUE AND ACCURATE RECORD OF CLASS ATTENDANCE. I UNDERSTAND THAT IF I HAVE MADE ANY FALSE STATEMENTS HEREIN THAT I HAVE COMMITTED A CLASS A MISDEMEANOR UNDER SECTION 10.45 OF THE PENAL LAW OF THE STATE OF NEW YORK. I ALSO UNDERSTAND THAT FALSE STATEMENTS MAKE ME LIABLE TO OTHER PUNISHMENT UNDER STATE AND / OR FEDERAL CRIMINAL LAWS.

AUTHORIZED SIGNATURE: _____ DATE: _____

FOR DOOR USE ONLY:

CHARGE WIOA: ADULT _____ YOUTH _____ DISLOCATED WORKER _____

OTHER (SPECIFY): _____

CHILD CARE: \$ X _____ DAYS = \$ _____

TRANSPORTATION: \$6.00 X _____ DAYS = \$ _____

NEEDS BASED PAYMENTS: \$ X _____ DAYS = \$ _____

BOOKS: \$ X _____ DAYS = \$ _____

OTHER: \$ X _____ DAYS = \$ _____

TOTAL \$ _____

AUTHORIZED DOOR SIGNATURE ONLY: _____

HempsteadWorks
Fiscal / Career Counseling Notice
Completion / Non-Completion Report

Name of School _____
Contract No. _____ Course _____
Contract Start Date _____ End Date _____

The participant listed below has completed, withdrawn from or never started the Classroom Training Course indicated above.

I. Name of Participant _____

Check One

Never Started
 Withdrew from Class
Last day attended (month, day, year) _____

Billable hours _____
Billable dollars _____
Instructional hours completed _____

Completed the Classroom Training Course
Last day attended (month, day, year) _____

If the participant completed the training course, a DIPLOMA CERTIFICATE must be attached. If a DIPLOMA CERTIFICATE is not issued, the training institution MUST submit a copy of the participant's OFFICIAL TRANSCRIPT indicating that the training course was completed and, therefore, the appropriate credentials awarded.

FINAL CLAIM WILL NOT BE PAID UNTIL THE DIPLOMA CERTIFICATE OR A COPY OF THE PARTICIPANT'S OFFICIAL TRANSCRIPT IS RECEIVED FROM TRAINING INSTITUTION.

Billable hours _____
Billable dollars _____
Instructional hours completed _____

II. Reason for withdrawal/non-completion

Health problems Babysitting problems
 Found job Other

Authorized School Representative

Date

Original: Fiscal Dept.
cc: Career Counselor

Council Members
DOROTHY L. GOOSBY
DENNIS DUNNE, SR.
THOMAS E. MUSCARELLA
CHRISTOPHER R. SCHNEIDER
MELISSA MILLER
LAURA A. RYDER

KATE MURRAY
Town Clerk

JEANINE C. DRISCOLL
Receiver of taxes

ERIC C. MALLETTE
Commissioner

Town of Hempstead Department Of Occupational Resources

50 CLINTON STREET, HEMPSTEAD, NY 11550-4201
(516) 485-5000 FAX# (516) 485-2865



DONALD X. CLAVIN, Jr.
Supervisor

STUDENT PLACEMENT REPORT

This form must be submitted to DOOR within seventy-five (75) days after the trainee has completed training.

Name of Student: _____
Training Institution: _____
Course: _____
Date of Completion: _____

Employment Placement Details

1. Employer Name: _____
2. Employer Address: _____
3. Start Date: _____
4. Hourly Wage: _____
5. Hours Per Week: _____
6. Job Title: _____

Externship/Internship (if applicable)

1. Employer Name: _____
2. Employer Address: _____
3. Start Date: _____
4. Hourly Wage: _____
5. Hours Per Week: _____
6. Job Title: _____
7. Proposed End Date: _____

Signature of Submitter

Date

Attachment F – Key Contacts

