



COMPLETE THE FOLLOWING INFORMATION FOR EACH TRAINING PROGRAM REQUESTING APPROVAL

Title of Program: _____

Description of Program: _____

Yes	No	Pell Eligible	_____	Clock Hours
Yes	No	Certificate	_____	Credit Hours
Yes	No	Diploma	_____	SOC code
Yes	No	Degree	_____	CIP Code

Costs:

\$ _____ Tuition & Fees

\$ _____ Books/Supplies (Include the cost of all items required to complete the training program that are available through the institution)

\$ _____ Testing Fees (Include the costs of all tests required to complete the program that is available through the institution)

\$ _____ Total Cost of the Training Program

List all items (uniforms, physicals, supplies, tools) not available through the institution but required to complete the training program and/or become employed in the training area.



List the tests or certifications and associated costs not included in the institution's total cost but required to complete the training program and/or become employed in the training area.

Anticipated time for completion: _____

Anticipated wage at placement: _____ (per hour)

Anticipated Employment Prospect: _____

Retention Rate: _____ Obtained Related Unsubsidized Employment Rate: _____

Is this training available to the general public at this price? Yes No

Is there a fee schedule for this training published in a catalog or on the company website? Yes No

Is the cost of this training the same for CareerSource Pinellas as for the general public or for any other Workforce region in Florida? Yes No