Training Institution Information

* The information you are providing is for an initial, continued or renewal request to CareerSource Escarosa to remain on, or to be added to, the Eligible Training Provider List (ETPL). You will need to fill out one of these forms for each program you currently have on the ETPL.

Institution Name\* 

Institution Phone Number

Address 1\* Address Line 1\* 

City

State

ZIP Code

Federal EIN\* 

Contact Person\* 

Name & Title\* 

Is this institution accredited?

YesNoNot Applicable

Expiration Date

https://careersourceescarosa.formstack.com/forms/images/2/calendar.png 

Month



Year

Select Date

Accreditation Documents

File uploads may not work on some mobile devices.

Is this Institution licensed?

YesNo

If yes, who is the licensing body? 

License Number 

Date of Expiration

https://careersourceescarosa.formstack.com/forms/images/2/calendar.png 

Month



Day



Year

Select Date

License Documents

File uploads may not work on some mobile devices.

Carrier for Liability Insurance\* 

$ Amount Insured\* 

Insurance Documentation\*

Is this institution currently a training provider for other Local Workforce Development Boards in Florida?

Yes No

If Yes, provide the name / number of the Board: 

How long have you provided training? 

Do you currently participate in the Florida Education & Training Placement Information Program (FETPIP)?\*

Yes No

If you are not currently participating in FETPIP, will you agree to register in FETPIP prior to approval of this application?\*

Yes No

Does this institution provide classes / programs on-line/distance learning?\*

Yes No

If yes, provide a list of classes/programs:

Training Provider\* 

**Program Cost**: Include all costs necessary for enrollment and completion of the specific program. Include tuition, books, lab fees, physical, medical cost, uniforms, support services, certification, testing, licensure and other cost that may be associated with the program. Include only costs the provider is responsible for. For example, if the provider does not pay for licensure, do not include it in the total program cost.

If you are applying for numerous programs you may attach a spread sheet here. You must include required information by Career Source Escarosa. These are the following: Training program, total program cost, tuition, books, lab fees, physical, medical support services, certification, licensure, testing and any other cost associated with the training programs.

Training Program\*

Total Program Cost\* 

Tuition Cost\* 

Book Cost 

Lab Fees 

Physical / Medical Cost 

Uniforms, Support Services Cost 

Certification, Licensure or Testing Cost 

Other Cost 

Are these programs eligible for Pell Grant?\*

Yes No

Total number of persons enrolled in approved training programs\* 

Total number of WIOA participants enrolled in approved training programs\* 

Total number of persons completing these training programs\* 

Total number of WIOA participants completing these programs\* 

Total number of persons awarded a Recognized Postsecondary Credential (or other credential, if applicable.)\* 

Total number of WIOA participants awarded a Recognized Postsecondary Credential (or other credential, if applicable.)\* 

Total number of persons employed after completing the program.\* 

Total number of WIOA participants employed after completing the program.\* 