

AMENDED PART I

1. Student Name		2. Social Security Number		3. ITA/IR Number		0		
0				Adult	Youth	Dis. Wkr.	Gov. Set.	Other
				0	0	0	0	0
4. Education/Training Provider			5. Location/Campus		6. Curriculum			
0								
7. Training Schedule	A. Beginning Date	01/00/00	8. # of weeks (max 104)	3. Date	9. Cost Allocation			
	B. Ending Date	01/00/00	10. Category #(1,2,3,4,or5)	0	11. Category of Form		A. Original	0
							B. Reenrollment	0
12. Item Numbers Chan					13. Date of Change			
14. Comments								
		1/0/1900				0		
<i>Signature of Enrolling Agency Representative</i>		<i>Enrolling Agency</i>		<i>Date</i>		<i>Phone Number</i>		
<i>Enrolling Approval: Signature of Authorized Representative:</i>								

*** Submit amendments to WDD for approval.**

AMENDED PART II

These budget items represent the training provider's official WIA budget for the student named above and is completed when student begins training.

1. Student Name		2. Social Security Number		3. ITA/IR Number	
0		0		0	
4. Beginning Date	01/00/00	5. Ending Date		01/00/00	
1. Tuition		Semesters @		Per Semester	\$ -
		Other @		Per	
2. Fees, insurance, etc. (list items and cost)					
3. Tools (list items and cost)					
4. Other (list items and cost)					
5. Total					\$ -
If this is an amendment - Comments					
<i>Workforce Development Division Representative</i>		<i>Date</i>		<i>Training Provider's Authorized Representative</i>	
				<i>Date</i>	

*** Submit amendments to Part II to ITA Payment Unit for approval.**

Forms Distribution

Part I

1. WDD-13 Part I is completed by WIA Career Center Staff and then submitted to Field Services for approval and recording of allocation.
2. Field Services will forward to WDD for review of errors and ineligible applicants.
3. Once approved, WDD forwards the WDD-13 to the ITA Payment Office.
4. The ITA Payment Office distributes to WIA Career Center Staff.
5. WDD-13 Part I is completed by WIA Career Center Staff and then submitted to Field Services for approval and recording of allocation.
6. Career Center will give the approved WDD-13s to the Training Providers

Part II

1. Training Provider completes Part II below the approved section Part I.
2. The Training Provider submits four (4) sets to the ITA Payment Office.
3. The ITA Payment Office reviews, approves, and distributes.

When the entire process is complete, the Training Provider, WIA Career Center Staff, ITA Payment Office, and WDD should have an approved WDD-13 with Part I and Part II on the same sheet.

Amending Forms

Amending WDD-13 Part I

1. Amendments to WDD-13 Part I can **only** be made by WIA Career Center Staff.
2. The WDD-13 Amended form must be used.
3. Complete all of Part I only.
4. Note in box #12 the numbered items that are changing and the date you are making the change or the date the change takes effect. (This date could affect fund availability depending on items changed.)
5. Please note in comment section if the change does not affect the budget.
6. Submit for approval as you would an original WDD 13.

Amending WDD-13 Part II

1. Amendments to WDD-13 Part II can **only** be made by the Training Provider.
2. Only the budget amounts can be amended.
3. The WDD-13 Amended form must be used.
4. Complete only Part II and list only the **amount** the budget will **increase/decrease**.
5. Submit for approval.

There will be instances where only one, either Part I or Part II, will need an amendment; this will leave the other Part blank and you will need to reference the original WDD-13 for information.

Training Providers are no longer required to complete a new Part II if the Part I is amended by the WIA Career Center Staff

Part I

1. Enter the student's full name. The name should appear, as it will on all WIA enrollment documents.
2. Enter the student's Social Security Number.
3. Enter the assigned ITA/IR Project number and check fund source.
4. Enter Training Provider Name.
5. Enter Training Provider Location and/or Campus.
6. Enter Curriculum .
7. a. Enter Beginning Date. b. Enter Ending Date.
8. Enter number of weeks.
9. Enter maximum cost allocation.
10. Enter category type
11. Enter category of form (original enrollment form or re-enrollment form).
12. Enter Last Employer.

13-16 Complete if Governors Set- Aside or Rapid Response.

13. Check yes or no if eligible for Rapid Response.
 14. Enter Case number for Rapid Response.
 15. Check or Enter reason for leaving previous employer.
 16. Check yes or no if concurrent employment in TAA and enter case # if yes.
 17. Enter comments if needed.
- Requires signature of enrolling agency representative, enrolling agency, date, and complete phone number.
(WIA Career Center Staff can type name of representative and then initial beside name)
- Requires signature of Approval from Authorized Representative from Workforce Development.

Part II

1. Enter estimated amount of cost for tuition per semester, enter number of semesters, and enter total amount in column.
 2. Enter estimated amount for Fees (graduation, testing, etc) and (list items and cost).
 3. Enter estimated amount for Tools and Supplies (list items and cost).
 4. Other (list item and cost).
 5. Total (this amount should be the total estimated cost of all expenses for the duration of the contract).
Note: There are maximum spending amounts depending upon length of training.(see #9 on Part I).
- Requires signature from Training Representative and date.
Requires signature from Workforce Development Division.

AMENDMENTS ON PART I AND PART I

Part I

- Complete 1-11 with correct information.
12. Enter which numbers were changed and the **date** these changes go into effect.
 17. Enter **comments** on reason for changes.
- Requires signature of enrolling agency representative, enrolling agency, date. and complete phone number.
Requires signature of Approval from Authorized Representative from Workforce Development.

Part II

- Use only to amend budget amounts.
- Complete numbers 1-5 .
- Enter the new information for budget .
- Enter comments on reason for changes.
- Requires signature from Training Representative and date.
Requires signature from Workforce Development Division.