| | |
|---|---|
| | **NORTH CAROLINA DEPARTMENT OF COMMERCE**<br>**DIVISION OF WORKFORCE SOLUTIONS** |
| | **DWS Policy Statement Number: PS 08-2018** |
| | **Date: August 15, 2018** |
| | **Subject: Workforce Innovation and Opportunity Act Funds and Pell Grants and to Rescind DWS Policy Statement Number 08-2015** |
| | **From:** Daniel L. Giddens<br>**Daniel L. Giddens**<br>**Assistant Secretary for Workforce** |

**Purpose:** To provide clarification on the use of Workforce Innovation and Opportunity Act (WIOA) Title I resources when combined with Pell Grants and the Financial Award Analysis Form. This policy also rescinds PS 08-2015.

**Background:** The Workforce Innovation and Opportunity Act 134(c)(3)(B)(i)(I) states that WIOA funding for training is limited to participants who are unable to obtain grant assistance from other sources to pay the costs of their training or require assistance beyond that available under grant assistance from other sources to pay the costs of such training.

WIOA Section 134(c)(3)(B)(ii) states that training services may be provided under this paragraph to an individual who otherwise meets the requirements of this paragraph while an application for a Federal Pell Grant is pending, except that if such individual is subsequently awarded a Federal Pell Grant, appropriate reimbursement shall be made to the entity which provided payment from such Federal Pell Grant.

**Action:** WIOA Final Regulations 680.230(b) states that one-stop centers must consider the availability of other sources of grants to pay for training costs such as Temporary Assistance for Needy Families (TANF), state-funded training funds, and Federal Pell Grants, so that WIOA Title I funds supplement other sources of training grants. Per TEGL No. 19-16, veterans and spouses are <u>not</u> required to first use any available benefit entitlements associated with their military service before being considered eligible for WIOA funded training, and one-stop centers are not required to consider the availability of those funds.

The WIOA seeks to ensure that financial resources and services are available to the individual seeking training. Other resources that may be available to the individual, including WIOA resources, should not be reduced based on the receipt of a Pell Grant unless the combination of such resources results in a level of support that exceeds an individual's cost of training and education-related expenses. Individuals who are potentially eligible for a Federal Pell Grant must apply. WIOA Title I service providers will coordinate funds available with the financial aid office of the training provider. The Federal Pell Grant is an entitlement and the student is eligible to receive it regardless of receiving funds from external sources.

Service Providers must complete a Financial Award Analysis form (attached), or alternate form containing the same information, for individuals as a means to determine shortage/surplus of resources available. If the selected training provider refuses to complete/sign the participant's provided Financial Award Analysis form, the Service Provider may complete the form and note the signature as "Not Applicable" and check the corresponding box that the data contained herein was obtained from the training provider's handbook or catalog.

WIOA Section 134(c)(3)(B)(iii) states that in determining whether an individual requires assistance under clause (i)(II), a One-Stop Operator (or one-stop partner, where appropriate) may take into consideration the full cost of participating in training services, including the costs of dependent care and transportation, and other appropriate costs to determine full training and education-related expenses.

Therefore, where a Pell Grant payment is received by a training provider in an account first, the Division emphasizes applying WIOA Title I funds towards tuition, books, fees, and supplies while the Pell Grant funds may be applied toward the additional training and education-related expenses to include dependent care and transportation, and other appropriate costs as determined in the completed Financial Award Analysis or alternate form containing the same information.

Local Workforce Development Boards should share this information as appropriate.

**Effective Date:** Immediately

**Expiration:** Indefinite

**Contact:** Field Services
Planning and Policy Development

**Attachment:** Financial Award Analysis Form

# Financial Award Analysis

## Training Provider:

| Workforce Innovation and Opportunity Act (WIOA) Participant: | Last 4 digits of SS#: | Telephone #: |
|---|---|---|
| Training Start Date: | Estimated Training End Date: | |
| Name(s) / Type(s) Of Training : | No. of Semesters / Quarters: | |
| Training Provider Contact Person: | Telephone #: | Fax #: |

| Training and Education-Related Expenses Cost of Attendance | Fund Assignments (#1-4 Under Funding Sources) | Costs Per Semester or Quarter | Number Of Semesters or Quarters | Total Cost of Training Services |
|---|---|---|---|---|
| Application/Registration | | | | |
| Tuition | | | | |
| Books/Supplies | | | | |
| Shop/Clinic/Lab Fees/Uniforms | | | | |
| Physicals | | | | |
| Licenses/Permits | | | | |
| Parking Fees | | | | |
| Student Activity Fees | | | | |
| Transportation | | | | |
| Child Care Cost | | | | |
| Other Required Cost (specify) | | | | |
| Other Required Cost (specify) | | | | |
| **Total Projected Cost of Training** | | | | |

| **Available Funding Sources** *(Documentation must be attached)* | **Aid Per Semester or Quarter** | **Number of Semesters or Quarters** | **Total Available Resources** |
|---|---|---|---|
| 1. **Federal Pell Grant** *(attach student aid report, etc.)* | | | |
| 2. **Scholarships/Grants/Other Financial Aid** *(attach applicable award/denial letters)* | | | |
| 3. **Other Sources** *(specify)* | | | |
| 4. **Vocational Rehabilitation/Social Services** | | | |
| 5. **Total NON – WIOA Available Resources** | | | |
| 6. **Needed/ Requested WIOA Training Resources** | | | |
| 7. **Additional Resources Needed** *(normally this should be a zero balance)* | | | |

**I, _____, authorize and consent to the release and exchange of confidential information to the WIOA Service Provider and the Training Provider.**

Signatures:

_____ WIOA Participant Date

_____ WIOA Service Provider Date

_____ Training Provider Date

☐ *data contained herein was obtained from the training provider's handbook or catalog.*