CIRCULAR NO. 92-02

| EMPLOYMENT AND TRAINING ADMINISTRATION Bureau of Apprenticeship and Training | Distribution: A-539 All Tech Hdqtrs A-544 All Field Techs. | Subject: Code: 450.6 Apprenticeship Quality Assessment |
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| Washington, D.C. 20210 | | |
| Symbols: TWA:KOLB | | Action: |

Date: December 20,1991

PURPOSE: To issue a revised form to use in the quality assessment of apprenticeship programs.

BACKGROUND: Assuring that registered apprenticeship programs are of the highest quality is a top priority activity for BAT staff.

Throughout the years a number of formats have been utilized for recording program reviews and indications of the strengths, weaknesses and improvements. Region VIII has been using a form that they have found to be particularly effective. At a recent Regional Directors meeting it was agreed that the Region VIII form would be used on a national basis.

ACTION: As agreed upon at the December 10-12, 1991, Regional Directors meeting the attached form is to be utilized on a national basis starting with the second quarter of FY 1992, January 2, 1992, for the quality assessment of registered apprenticeship programs.

Attachments

(ALL ITEMS CHECKED "NO" SHOULD BE THOROUGHLY ADDRSSED ON PAGE 5

ON-THE-JOB TRAINING

| 1. | Apprentices receive OJT in all phases of trade, as outlined in trade schedule. [] Yes [] No |
|----|--|
| 2. | OJT is coordinated with related instruction. [] Yes [] No |
| 3. | Sponsor is providing reasonably continuous employment to all apprentices. [] Yes [] No |
| 4. | Safety training included as part of OJT. [] Yes [] No |
| 5. | The on-the-job training (trade schedule) is kept current with industry practice. [] Yes [] No |
| 6. | Sponsor's workforce is consistent with the approved ratio as registered in apprenticeship standards. [] Yes [] No |
| 7. | Program sponsor regularly evaluates the apprentices' on-the-job progress with the apprentice. [] Yes [] No |
| 8. | Is the apprentices' scheduled wage increases determined by actual hours of on-the-job training or by months in the program, and is this consistent with the registered apprenticeship standards? [] Yes [] No |
| 9. | The probationary period is reasonable (hours/months) in relation to the term of apprenticeship, and full credit is given toward the completion of apprenticeship. [] Yes [] No |
| 10 | . Is the granting of advanced credit for previously acquired experience and training applied equally to all applicants/apprentices? |
| | [] Yes [] No |

RELATED INSTRUCTION

| 1. | Identify the related instruction delivery system (classroom, correspondence, homestudy; and the source (vocational-education center, program sponsored, etc.). |
|----|--|
| 2. | How many hours per year of related instruction are actually being provided? |
| 3. | Is the related instruction being provided consistently as approved in apprenticeship standards? [] Yes [] No |
| 4. | Are related instruction curriculum and training aids kept current with industry technological changes? [] Yes [] No |
| 5. | Is safety training included as part of the related instruction? [] Yes [] No |
| 6. | Have related training instructors received formalized instructor training? What kind? How many hours? [] Yes [] No |
| | Kind and Hours: |
| 7. | Has the program sponsor established criteria/guidelines for instructors (i.e., state certification, teaching experience, craft experience? |
| | []Yes []No |
| 8. | Does the program sponsor provide feedback to apprentices on related instruction progress/test results? |
| 9. | Is related instruction provided on a regular basis during the term of apprenticeship? [] Yes [] No |
| 10 |). Is there a course outline of subjects to be covered each year? |
| | [] Yes [] No |
| 11 | I. Is the progressive wage schedule paid based on the completion of both the on-the-job training as well as related instruction? |
| | [] Yes [] No |

PROGRAM OPERATION

| 1. | Is a specific person(s) responsible for monitoring the program and providing assistance to the apprentices? |
|----|--|
| | [] Yes [] No |
| 2. | Is the registration agency promptly notified of all new registrations, cancellations, and completions? [] Yes [] No |
| 3. | Does the program periodically assess success or needed improvements in the program by interviewing apprentices, completed apprentices, and journeypersons? [] Yes [] No |
| 4. | Does the program sponsor maintain required records (selection/employment/training)? [] Yes [] No |
| 5. | Does the program sponsor submit revisions to the registration agency prior to instituting them? [] Yes [] No |
| 6. | What is the completion rate for each craft? (Analysis based on most recent RAIS data.) |
| 7. | What is the cancellation rate for each craft? (Analysis based on most recent RAIS data.) |
| 8. | Has the program sponsor addressed high cancellation rate? (If yes, explain below.) [] Yes [] No |
| | |
| 9. | Does the sponsor follow up on terminations to determine the "cause"? [] Yes [] No |
| 10 | Does the apprenticeship committee meet regularly to address the progress of apprentices and program? |
| | []Yes []No |
| 11 | . Are <u>all</u> apprentices/trainees in each craft registered with the registration agency? [] Yes [] No |
| 12 | 2. Is the "Complaint Procedure" identified in the standards and available for review by all apprentices/applicants? |
| | |

EXISTING DEFICIENCIES/RECOMMENDATIONS

ON –THE-JOB TRAINING

| RELATED INSTRUCTIO | <u>N</u> |
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| PROGRAM OPERATION | <u>N</u> |
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| REVIEWING BAT REPRESENTATIVE: | DATE: |
| SUPERVISOR'S REVIEW & APPROVAL. | DATE. |

APPRENTICESHIP PROGRAM QUALITY ASSESSMENT

| REGION | | STATE | | | |
|--------------------------------------|----------------------------|-------------|--------------------------------|--|--|
| SPONSOR NAME | | | PROGRAM NUMBER | | |
| PROGRAM SPONSOR – NAME/ADDRESS | | | DATE OF L | AST ON-SITE REVIEW: | |
| | | DATE OF T | HIS ON-SITE REVIEW: | | |
| | | | | | |
| Type & Size of Program: | INJ IJ | GNJ | GJ | | |
| Occupations Covered By Standards | # of Active Apprentices | _ | # of Jouneyworkers Employed | Current Journeyworkers Wage Rate | |
| Current Ratio: | | - - - | | | |
| Previous Review Defice Deficiencies: | iencies and Im | provemen | ats Sponsor Has Made | In Addressing/Correcting | |
| | | | | | |
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