

Section-04 Training	P-0400300	Effective Date: 10/21/2021
Replaces TAWDB Incumbent Worker Training dated 08/13/2020 and EWB Incumbent Worker Training dated 2019		
Delaney Rea, GCWDB Chair		

Incumbent Worker Training

The Green Country Workforce Development Board (GCWDB) provides guidance and establishes the policy regarding services for the Incumbent Worker Training program.

- I. **Incumbent Worker Training:** Incumbent Worker Training (IWT) is designed to meet the special requirements of an employer, or a group of employers within the same industry, to retain a skilled workforce or avert the need to lay off employees. IWT must be conducted with a commitment by the employer to retain or avert the layoff of the incumbent worker or workers participating in the training.

- II. **Guidance:** In addition to the steps and requirements outlined in the Oklahoma Office of Workforce Development policy #09-2019, entitled [Guidance on Incumbent Worker Training Services Provided Under the Workforce Innovation and Opportunity Act \(WIOA\)](#) dated October 29, 2019, these criteria will be used to implement the initial and subsequent eligibility policies required under WIOA.

- III. **Eligible Businesses:** GCWDB must determine an employer's eligibility for participating in IWT based on the following factors which help to evaluate whether training would increase the competitiveness of the employees or both the employees and the employer:
 - A. The characteristics of the incumbent workers to be trained and how historically they represent individuals with barriers and how such individuals would benefit from retention or advancement. Consideration should be given to employers who propose to put forth extra effort to train individuals with barriers to employment as defined in WIOA Section 3(24).
 - B. Provide a quality of training which would, whenever possible, allow the participant to gain industry-recognized training experience and/or lead to industry-recognized credentials and/ or an increase in wages;
 - C. The number of participants the employer plans to train or retrain;
 - D. The wage and benefit levels of participants (before and after training);
 - E. The occupation(s) for which incumbent worker training is being provided must be in demand;

EQUAL OPPORTUNITY AND NONDISCRIMINATION: All providers must comply with WIOA's Equal Opportunity and Nondiscrimination provisions which prohibit discrimination on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, or, for beneficiaries, applicants, and participants only, on the basis of citizenship status or participation in a WIOA Title-I financially assisted program or activity. Auxiliary aids and services are available upon request to individuals with disabilities.

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F. The employer is:

1. In an in-demand industry as determined by occupations on the Critical Occupations list as presented on oklahomaworks.gov;
2. In a declining industry, but there are compelling reasons (e.g., evidence of long-term viability of the employer) justifying investment in incumbent worker training.

G. The employer must not have laid off workers within 120 days to relocate to Oklahoma from another state and has been in business a minimum of eighteen (18) months.

H. The employer is current in unemployment insurance and workers' compensation taxes, penalties, and/or interest, or related payment plan. GCWDB will also evaluate the potential number of layoffs averted as a result of this training and utilization as part of a larger sector and career pathway strategy that aligns with our identified industry clusters in the region to prioritize training funds if needed. GCWDB may also prioritize employers based on their overall efforts to develop a more competitive workforce within the region and those that show ongoing apprenticeship training models. Additionally, employers that show continued opportunities for incumbent workers to advance and increase wages within their company may be prioritized. Each of the above factors leading to the approval of an incumbent worker training project with an employer must be documented and placed in the contract file.

I. Generally, IWT should be provided to private sector employers; however, there may be instances where non-profit and local government entities may be the recipients of IWT funds. For example, IWT may be used in the health care industry where hospitals are operated by non-profit or local government entities and a nursing upskilling opportunity is available.

J. Initial discussions with employers about entering into a contract for IWT will include GCWDB Business Services Representative conversations on filling vacated positions created by advancing incumbent workers with WIOA participants.

IV. Funding Priorities: Preference is to be given to any of the following:

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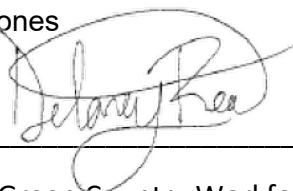
- A. Smaller businesses with less than 50 employees;
- B. Businesses located in an Opportunity Zone as defined by Oklahoma Statutes Title 68, Section 3603 Definitions, (Attachment F)
- C. Businesses located in a rural county (i.e., not a part of a metropolitan area);
- D. Training for occupations on the Critical Occupations list as presented on oklahomaworks.gov;
- E. Training provided to increase employee skills as a layoff avoidance strategy; or
- F. Training that leads to a significant upgrade in employee skills.

V. Equal Opportunity and Nondiscrimination Statement: All recipients, and subrecipients/subgrantees must comply with WIOA's Equal Opportunity and Nondiscrimination provisions which prohibit discrimination on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, or, for beneficiaries, applicants, and participants only, on the basis of citizenship status or participation in a WIOA Title-I financially assisted program or activity.

VI. Action

The Executive Director is responsible for compliance of this policy. The Executive Director is responsible for annual review and revisions if needed. Any exceptions to this policy statement will require prior written approval from the Executive Director or chair of the Green Country Workforce Development Board.

- Attachment A: Project Funding Proposal/Application
- Attachment B: Grantee Worksheet
- Attachment C: Employee List
- Attachment D: Anticipated Outcomes
- Attachment E: Project Rating Form
- Attachment F: Opportunity Zones



10/21/2021

Chair, Green Country Workforce Development Board / Date

EQUAL OPPORTUNITY AND NONDISCRIMINATION: All providers must comply with WIOA's Equal Opportunity and Nondiscrimination provisions which prohibit discrimination on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, or, for beneficiaries, applicants, and participants only, on the basis of citizenship status or participation in a WIOA Title-I financially assisted program or activity. Auxiliary aids and services are available upon request to individuals with disabilities.



Incumbent Worker Project Funding Proposal

This agreement is between _____, and **Green Country Workforce**. Both parties agree to the terms of this agreement as set forth below. Project is expected to commence on _____ and terminate on _____.

Project Lead

Contact Name:	Title:
Phone:	Email:
Business/Organization:	

EMPLOYER INFORMATION

Legal Business Name:	
Owner/Officer:	Phone:
Address:	
Mailing Address (If different):	
Employer Sector: Healthcare Manufacturing Transportation Construction Finance Other:	
Is Employer expanding: YES NO	Length of time in business at this address:
Has the employer laid off workers within 120 days prior to relocation in OKLA from another state: YES NO	
Employers FEIN #:	UBI #:
The employer is current in unemployment insurance and workers' compensation taxes, penalties, and/or interest or related payment plan: YES NO	
Number of employees scheduled to participate in training:	
Total number of employed by employer in state and nationally:	
Is the company located in an area that gives preference as per OKLAHOMA WORKFORCE DEVELOPMENT ISSUANCE #09-2019?	

What is the type of preference?

Provide a brief description of what is done at this location:

Project Overview

Description of Need:

List of Partners:

Project Timeline:

Will the Project Result in: *Increased Employee Wages, Avert Future Layoffs, Other:*

EMPLOYER RESPONSIBILITIES

1. Provide the information below as required for employer and each employee participating in the approved project opportunity utilizing approved documentation.
2. Agrees to work with Green Country Workforce to identify and provide the employers process for complying with the required cost sharing requirements for this training, as determined by the size of the employer’s workforce. *(Wages paid to the participant while in training can be included as part of that share and the share can be provided as cash or in-kind that is fairly evaluated and approved by Green Country Workforce.*
 - At least 10 percent of the cost for employers with 50 or fewer employees
 - At least 25 percent of the cost for employers with more than 50 employees but not more than 100 employees; and
 - At least 50 percent of the cost for employers with more than 100 employees
3. Complete required close out report within 30 days of completion of training.
4. Complete the following regarding the total cost of the program, including employer contribution:

Employer Cash:	Total Cost of Project:
Employee Wages:	Percentage Covered by Employer:
Employer In-Kind:	Total Requested from Board:
Total Employer Contribution:	Percentage Covered by Board:

Describe Employer Contribution:

Training Provider Justification

Training Provider:

Training Description:

Training Timeline:

Will training include local, state, or nationally recognized certificate? YES NO

If so, list here:

Preferred Fiscal Contact for Training Provider: *Project Lead Employer Green Country Workforce*

The selection made will be responsible for coordinating any fiscal payments with the training provider.

Required Project Documentation

Employer

- *Employer Request Letter on Company Letterhead*
- *Project Funding Proposal, Attachment A*
- *Final Project Report*
- *IW Training Contract*

- *Grantee Worksheet, attachment B*
- *Incumbent Worker Training Employee List, attachment C*
- *Anticipated Outcomes, attachment D*
- *Project Rating Form (Required if state money is requested), attachment E*

Employee

- *Employee Enrollment Form*
- *Grievance & Complaint Procedures*
- *Photo ID*
- *Consent for Sharing of Confidential Information*
- *Form I-9, Employment Eligibility Verification*
- *OKJobMatch Account*

Project Lead & EMPLOYER ASSURANCE

EQUAL OPPORTUNITY AND NONDISCRIMINATION STATEMENT: All Recipients, and Sub-recipients/Sub-grantees must comply with WIOA's Equal Opportunity and Nondiscrimination provisions which prohibit discrimination on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, or, for beneficiaries, applicants, and participants only, on the basis of citizenship status or participation in a WIOA Title-I financially assisted program or activity.

Project Lead:

Employer – Owner/Designated Officer:

Print First/Last

Print First/Last

Signature

Signature

Date

Date

This Incumbent Worker Training (IWT) opportunity is funded through the Workforce Innovation and Opportunity Act (WIOA) provided by the U.S. Department of Labor. This is a project led by the Green Country Workforce Development Board.

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Grantee Worksheet

BUDGET NARRATIVE

(local WDB)

Add additional pages as necessary

TRAINING COSTS

Description	Detail	Amount	Match
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00

Subtotal \$ - \$ -

PERSONAL SERVICES

Description	Detail	Amount	Match
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00

Subtotal \$ - \$ -

TRAVEL

Description	Detail	Budget	Employer
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00

Subtotal \$ - \$ -

CONTRACTUAL

Description	Detail	Amount	Match
		0.00	0.00
		0.00	0.00

Subtotal \$ - \$ -

SUPPLIES

Description	Detail	Amount	Match
		0.00	0.00
		0.00	0.00

Subtotal \$ - \$ -

ADMINISTRATION

Description	Detail	Amount	Match
		0.00	0.00
		0.00	0.00

Subtotal \$ - \$ -

Total \$ - \$ -

Grantee Name
Program, File#
Original Agreement

Anticipated Outcomes of Incumbent Worker Training

Employer:

Section 1. Check all that are applicable

- Will help prevent possible relocation of operations (layoff aversion)
- Will assist in the training of target groups or make employees more competitive
- Will contribute to the long term viability of our company
- Will be an important component of our company's overall workforce development efforts, such as sector or career pathway strategy

- Will make this location more competitive
- Important to the stated mission of our company
- Will contribute to the short term viability of our company
- Will assist in the improvement of international trade opportunities

Section 2. At least six of the following ten must be completed

Will save _____ jobs within the company

Will create _____ openings in entry-level positions

Will create _____ new jobs within our company

Will improve unit or labor costs by _____ percent

Will lower turnover in our company by _____ percent

Will increase overall efficiency by _____ percent

Will increase profit margin by _____ percent over the next _____ months

Will increase or retain sales by _____ percent over the next _____ months

Will improve the long-term wage levels of trainees by _____ percentage

Will improve the short-term wage levels of trainees by _____ percentage

Return on Investment Information

Planned ROI is expected to be _____ percentage over _____ months / years

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Project Rating Form – Future of Work	
APPLICANT:	
Contact Name & Title:	
County:	
REVIEWER NAME:	
REVIEW DATE:	
Interview Questions:	
Please rate project on the questions below. The scoring range goes from 0 – 5, 0 being the worst, 5 being the best. Please score the project and make any comments or notes needed.	
1. What is the training? How many employees will attend? What is the duration? What is the requested funding? What is the company contribution? Who is the training entity?	Score:
Comments:	
2. How will the training benefit the region, the employees, and the employer? Why is this training needed? Will it avert future layoffs or upskill employees to meet promotional requirements?	Score:
Comments:	
3. Is the training and/or employer directly associated with one of the local/regional priority ecosystems (Healthcare, Energy, Manufacturing, Transportation, Construction or Finance?)	Score
Comments:	

4. Will the training include a nationally, regionally, or industry recognized certificate?	Score:
Comments:	
5. Is the project aligned with an industry association partnership, such as an EDC, or other such business supported agency?	Score:
Comments:	
6. Beyond the required in-kind/cash match, does the application for funds include additional funding to support the project?	Score:
Comments:	
Reviewer signature: _____ Date _____ Overall Score: _____	

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Attachment to Incumbent Worker Training Policy dated 00/00/2021		
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Opportunity Zones

The following GCWDB census tracts are Designated Opportunity Zones as certified by the Secretary of the U.S. Treasury. See [IRS Notices 2018-48](https://www.irs.gov/pub/irs-drop/n-18-48.pdf) <https://www.irs.gov/pub/irs-drop/n-18-48.pdf>

County	Census Tract Number	Tract Type
Adair	40001376900	Low-Income Community
Cherokee	40021978100	Low-Income Community
Creek	40037020102	Low-Income Community
Creek	40037021000	Low-Income Community
McIntosh	40091779700	Low-Income Community
Muskogee	40101000400	Low-Income Community
Muskogee	40101000600	Low-Income Community
Okmulgee	40111000100	Low-Income Community
Okmulgee	40111000200	Low-Income Community
Osage	40113940002	Low-Income Community
Pawnee	40117957500	Low-Income Community
Sequoyah	40135030302	Low-Income Community
Tulsa	40143000100	Low-Income Community
Tulsa	40143000200	Low-Income Community
Tulsa	40143000900	Low-Income Community
Tulsa	40143001000	Low-Income Community
Tulsa	40143001200	Low-Income Community
Tulsa	40143002100	Low-Income Community
Tulsa	40143002301	Low-Income Community
Tulsa	40143002500	Low-Income Community
Tulsa	40143003400	Low-Income Community
Tulsa	40143004600	Low-Income Community
Tulsa	40143004900	Low-Income Community
Tulsa	40143005900	Low-Income Community
Tulsa	40143006200	Low-Income Community
Tulsa	40143006600	Low-Income Community
Tulsa	40143006801	Low-Income Community
Tulsa	40143007402	Low-Income Community
Tulsa	40143007608	Low-Income Community
Tulsa	40143008001	Low-Income Community
Tulsa	40143008002	Low-Income Community
Tulsa	40143009300	Low-Income Community
Tulsa	40143011100	Low-Income Community
Wagoner	40145030102	Low-Income Community