

**VETERAN EMPLOYMENT THROUGH TECHNOLOGY EDUCATION COURSES (VET TEC)
PILOT PROGRAM
TRAINING PROVIDER APPLICATION
INFORMATION AND INSTRUCTIONS**

The Department of Veterans Affairs (VA) is responsible for approving and monitoring selected high technology programs of education under Section 116 of the Harry W. Colmery Veterans Educational Assistance Act of 2017 (Public Law 115-48).

Section 116 of Public Law 115-48 authorizes VA to release a maximum of \$15,000,000.00 each federal fiscal year for the VET TEC Pilot Program, to be paid to Facilities and veterans. Public Law 115-48 further authorizes VA to carry out the VET TEC Pilot Program for a maximum of 5 fiscal years.

An application will not be considered completed until all information requested has been received. No section of this application can be left blank and all documents listed on page 5 must be provided with the application. Any application that is missing information or documentation will be returned to the Facility that submitted it.

When completed, this application (and all required documents) can be submitted either electronically or by mail.

Submit Electronically to: ELR-VETTEC.VBABUF@va.gov

Submit by Mail to: **VET TEC Application**
7th Floor
130 South Elmwood Avenue
Buffalo NY 14202

If you have any questions regarding the VET TEC application process please contact VA at:
ELR-VETTEC.VBABUF@va.gov

PILOT PROGRAMS REQUESTING APPROVAL MUST MEET THE FOLLOWING CRITERIA:

- The Facility cannot be an Institution of Higher Learning.
- The Facility must be an entity that has been in operation for at least two years.
- The program for which the Facility is seeking approval cannot lead to a degree (*i.e. Associates, Bachelors, Masters, etc.*).
- The program for which the Facility is seeking approval must have been offered for at least one year.
- The program must be in a "high technology program of education" (*i.e. one that provides instruction in computer programming, computer software, media application, data processing, or information science*).
- The program cannot be offered through open enrollment* or self-paced.

***Note:** Open enrollment is when the Facility does not have set terms. Instead it enrolls students and assigns them an end date based on when they enter the program.



**APPLICATION FOR VET TEC PILOT PROGRAM
(TRAINING PROVIDER)**

SECTION I: FACILITY/TRAINING SITE INFORMATION (Provide the following information for the Primary Campus)

1. NAME OF FACILITY

2. PHYSICAL ADDRESS OF FACILITY (Number and street or rural route, P.O. Box, City, State, ZIP Code and Country)

3. MAILING ADDRESS OF FACILITY (If different from physical address)

4. FACILITY WEBSITE

5. TAX IDENTIFICATION NUMBER

6. ELECTRONIC FUNDS TRANSFER

A. NAME OF FINANCIAL INSTITUTION (Provide name of bank where you want your direct deposit)

B. ADDRESS OF FINANCIAL INSTITUTION

C. ROUTING OR TRANSIT NUMBER (Nine digit number)

D. ACCOUNT NUMBER (Check only one box and provide the account number)

CHECKING Account No.: _____

SAVINGS Account No.: _____

SECTION II: TRAINING SITE INFORMATION (Provide the following information for additional training sites, if any)

7A. NAME OF TRAINING SITE 1

7B. PHYSICAL ADDRESS OF TRAINING SITE 1

8A. NAME OF TRAINING SITE 2

8B. PHYSICAL ADDRESS OF TRAINING SITE 2

9A. NAME OF TRAINING SITE 3

9B. PHYSICAL ADDRESS OF TRAINING SITE 3

10A. NAME OF TRAINING SITE 4

10B. PHYSICAL ADDRESS OF TRAINING SITE 4

SECTION III: INFORMATION REGARDING INDIVIDUAL COMPLETING APPLICATION (Provide the following information)

11. NAME OF INDIVIDUAL (First, Middle Initial, Last)

12. TITLE OF INDIVIDUAL

13. TELEPHONE NUMBER (Include Area Code)

14. EMAIL ADDRESS

SECTION IV: INFORMATION REGARDING CHIEF ADMINISTRATIVE OFFICER

***NOTE:** THE INDIVIDUAL LISTED AS A DESIGNEE **MUST HAVE** AUTHORITY TO SIGN INTO AGREEMENTS ON BEHALF OF THE FACILITY.

15. NAME OF CHIEF ADMINISTRATIVE OFFICER OR DESIGNEE* *(First, Middle Initial, Last)*

16. TITLE OF CHIEF ADMINISTRATIVE OFFICER OR DESIGNEE

17. TELEPHONE NUMBER *(Include Area Code)*

18. EMAIL ADDRESS

SECTION V: INFORMATION REGARDING OPERATIONAL STATUS OF THE FACILITY

19. IS A LICENSE OR APPROVAL FROM ANY FEDERAL, STATE OR MUNICIPAL AGENCY REQUIRED FOR THE OPERATION OF THE FACILITY?

YES NO **NOTE:** If "Yes," you must attach a copy of the license or approval to this application.

20A. THE FACILITY OPERATES AS: *(Check one)*

Individual Partnership Partnership Sole Corporation Sole Proprietorship Other *(Describe how facility operates in Item 20B)*

20B. IF "OTHER" IS CHECKED IN ITEM 20A, DESCRIBE HOW THE FACILITY OPERATES:

21. THE FACILITY OPERATES AS: *(Check one)*

Public Private-For Profit Private-Not For Profit

22. PROVIDE THE DATE FACILITY BEGAN OFFERING EDUCATION *(MM/DD/YYYY)*

23. HAS THE FACILITY CEASED OPERATIONS AT ANY TIME SINCE THE DATE GIVEN IN ITEM 22?

YES NO *(If "Yes," provide details below. Include relevant dates and details on the impact these changes had on the facility)*

24. HAS THE FACILITY EXPERIENCED A CHANGE-OF-OWNERSHIP IN THE PREVIOUS 24-MONTH PERIOD?

YES NO *(If "Yes," provide details below. Include relevant dates and details on the impact these changes had on the facility)*

25. DOES THE FACILITY PROVIDE ANY COMMISSIONS, BONUSES, OR OTHER INCENTIVE PAYMENTS BASED DIRECTLY OR INDIRECTLY, ON SUCCESS IN SECURING ENROLLMENTS OR FINANCIAL AID TO ANY PERSONS OR ENTITIES ENGAGED IN ANY STUDENT RECRUITING OR ADMISSION ACTIVITIES OR IN MAKING DECISIONS REGARDING THE AWARD OF STUDENT FINANCIAL ASSISTANCE?

YES NO

26A. HAS ANY FEDERAL OR STATE GOVERNMENT ENTITY TAKEN ADVERSE REGULATORY ACTION AGAINST THE FACILITY?

YES NO *(If "Yes," explain the circumstances that led to the adverse regulatory action below)*

26B. HAS THE FACILITY BEEN NAMED AS A DEFENDANT IN ANY LITIGATION RELATED TO ITS TRAINING PROGRAMS?

YES NO *(If "Yes," explain the circumstances and the result of the litigation below)*

SECTION VI: INFORMATION REGARDING FACILITY CATALOG OR OTHER FACILITY PUBLICATIONS

NOTE: If the facility only uses brochures and not a formal catalog, the Department of Veterans Affairs will treat the brochures as a catalog for this review process. All information requested must still be provided in the school's written brochures.

27. PROVIDE THE FOLLOWING INFORMATION SHOWN IN THE FACILITY'S CATALOG/PUBLICATIONS

FACILITY'S NAME, ADDRESS, AND TELEPHONE NUMBER	<i>Provided on page(s):</i>
IDENTIFYING DATA SUCH AS, VOLUME, NUMBER, AND DATE OF PUBLICATION	<i>Provided on page(s):</i>
MISSION/PURPOSE OF THE FACILITY	<i>Provided on page(s):</i>
ACADEMIC CALENDAR(S) FOR THE PERIOD(S) COVERED IN THE CATALOG	<i>Provided on page(s):</i>
GENERAL DESCRIPTION OF THE FACILITY (Including enrollment capacity of classrooms)	<i>Provided on page(s):</i>
LISTING OF FACILITY ADMINISTRATORS	<i>Provided on page(s):</i>
LISTING OF FACULTY SHOWING DEGREES EARNED	<i>Provided on page(s):</i>
FACILITY'S ADMISSION REQUIREMENTS AND POLICIES	<i>Provided on page(s):</i>
FACILITY'S GRADUATION REQUIREMENTS	<i>Provided on page(s):</i>
FACILITY'S GRADING SYSTEM	<i>Provided on page(s):</i>
FACILITY'S METHOD OF RECORDING GRADES AND FURNISHING GRADES AND TRANSCRIPTS TO STUDENTS	<i>Provided on page(s):</i>
FACILITY'S ACADEMIC PROBATION, SUSPENSION, AND REENTRANCE POLICY	<i>Provided on page(s):</i>
FACILITY'S POLICY AND REGULATIONS RELATING TO STUDENT CONDUCT AND CONDITIONS FOR DISMISSAL FOR UNSATISFACTORY CONDUCT	<i>Provided on page(s):</i>
LISTING OF FACILITY'S TUITION, FEES, AND OTHER CHARGES	<i>Provided on page(s):</i>
FACILITY'S REFUND POLICY (If any)	<i>Provided on page(s):</i>
FACILITY'S ATTENDANCE POLICY (If any)	<i>Provided on page(s):</i>
FACILITY'S SUPPORT SERVICES FOR STUDENTS (If any)	<i>Provided on page(s):</i>
NUMBER OF CREDIT OR CLOCK HOURS REQUIRED BY A STUDENT IN ORDER TO BE IN A FULL-TIME STATUS	<i>Provided on page(s):</i>

NOTE: Provide an addendum on Facility letterhead signed by the Chief Administrative Officer for any information requested above that is not currently listed in the school catalog.

28. REQUEST FOR PREFERENCE

Section 116 of Public Law 115-48 states that when entering into a contract with a facility, the VA "shall give preference to a qualified provider that offers tuition reimbursement for any student who -

- (a) completes a program of education offered by the provider; and
- (b) does not find full-time meaningful employment in the field of study of the program within the 180-day period beginning on the date the student completes the program.

If a Facility is approved with preference, it will receive the following benefits:

- The facility will be prioritized on the GI Bill® Web Page list for approved VET TEC schools.
- The facility will be exempt from the provisions of the 85-15 requirement outlined in the Participation Agreement and "STATEMENT OF UNDERSTANDING - 85-15 RULE" provided in Section X of this application.
- The facility will be exempt from the private school tuition and fees cap.

A. IF THE FACILITY OFFERS FULL TUITION REIMBURSEMENT* FOR THE SITUATION DESCRIBED ABOVE AND REQUESTS TO BE TREATED WITH PREFERENCE, CHECK BOX BELOW.

***NOTE:** This tuition reimbursement will be made to the Department of Veterans Affairs for students who are paid under the VET TEC Pilot Program.

Facility requests to be treated with preference

B. IF THE FACILITY *DOES NOT* OFFER FULL TUITION REIMBURSEMENT FOR THE SITUATION DESCRIBED ABOVE CHECK BOX BELOW.

Facility requests to be treated without preference

29. REQUIRED DATA COLLECTION

Section 116 of Public Law 115-48 obligates the Department of Veterans Affairs to collect the following information to provide to the Comptroller General to be included in future reports supplied to Congress.

A. DOES THE FACILITY USE AN OPEN SOURCE* CURRICULUM FOR ITS PROGRAMS?

YES NO

*Note: An open source curriculum is an on-line instructional resource that can be freely used, distributed and modified. It is based on the open-source practice of creating products or software that opens up access to source materials or codes. This process invites feedback and participation from developers, educators, government officials, and students and empowers them to exchange ideas and improve best practices.

B. DID THE FACILITY COOPERATE WITH THE TECHNOLOGY INDUSTRY TO CREATE THE CURRICULUM FOR ITS PROGRAMS?

YES NO

SECTION VII: INFORMATION REGARDING PROGRAMS THE FACILITY IS REQUESTING APPROVAL FOR

NOTE - Complete Items 30A through 30T for all programs that you are requesting approval for.

30. ATTACH THE FOLLOWING REQUIRED DOCUMENTS WHEN SUBMITTING THIS APPLICATION (Check box if attached)

A.	SIGNED STATEMENT OF UNDERSTANDING VET TEC APPLICATION	<input type="checkbox"/> √
B.	SIGNED COPY OF THE VET TEC PARTICIPATION AGREEMENT	<input type="checkbox"/> √
C.	SIGNED STATEMENT OF UNDERSTANDING - VA REIMBURSEMENT SCHEDULE	<input type="checkbox"/> √
D.	SIGNED STATEMENT OF UNDERSTANDING - 85-15 RULE	<input type="checkbox"/> √
E.	SIGNED STATEMENT OF UNDERSTANDING - RECORDS MAINTENANCE AND VA ACCESS TO RECORDS	<input type="checkbox"/> √
F.	SIGNED STATEMENT OF UNDERSTANDING - VA TRADEMARK	<input type="checkbox"/> √
G.	COMPLETED MEMORANDUM OF UNDERSTANDING at https://www.benefits.va.gov/GIBILL/resources/education_resources/mou.html	<input type="checkbox"/> √
H.	PROOF THE FACILITY HAS BEEN IN OPERATION FOR AT LEAST 2 YEARS	<input type="checkbox"/> √
I.	COPIES OF THE CATALOG OR OTHER PUBLICATION(S) FOR THE LAST 2 ACADEMIC YEARS (These catalogs must be notated as "true and correct in content and policy at the time of publication" and must be signed and dated)	<input type="checkbox"/> √
J.	PROOF THE FACILITY IS IN COMPLIANCE WITH ALL LOCAL, CITY, COUNTY, MUNICIPAL, STATE, AND FEDERAL REGULATIONS, SUCH AS FIRE, BUILDING AND SANITATION CODES	<input type="checkbox"/> √
K.	PROOF THE FACILITY IS FINANCIALLY SOUND AND CAPABLE OF FULFILLING ITS COMMITMENTS FOR TRAINING (Examples of documentation include copies of tax returns, bank statements, or financial reports. This documentation must cover the facility's last 2 years of operation.)	<input type="checkbox"/> √
L.	CREDENTIALS THAT SHOW THE TECHNOLOGY EXPERIENCE OF THE FACILITY'S INSTRUCTORS (This documentation should show how they are selected. Attach vitas/resumes for faculty (full and part-time), if this information is not in current catalog or on website.)	<input type="checkbox"/> √
M.	COPIES OF ALL ADVERTISING MATERIALS (Print, Radio, Television or Online) THE FACILITY USES AND HAS USED FOR THE LAST 2 YEARS	<input type="checkbox"/> √
N.	COPY OF THE FACILITY'S STUDENT ENROLLMENT CONTRACT	<input type="checkbox"/> √
O.	COPY OF THE FACILITY'S GRADUATION CERTIFICATE	<input type="checkbox"/> √
P.	COPY OF STUDENT COMPLETION RATES FOR THE LAST 2 YEARS	<input type="checkbox"/> √
Q.	IF YOU ANSWERED "YES" TO ITEM 29B, "Did the Facility cooperate with the technology industry to create curriculum for its programs", PROVIDE PROOF THAT SUBSTANTIATES THIS COLLABORATION	<input type="checkbox"/> √
R.	COPY OF EMPLOYMENT FINDING CRITERIA (If applicable)	<input type="checkbox"/> √
S.	COPY OF STUDENT EMPLOYMENT RECORDS OVER THE LAST 2 YEARS (If applicable)	<input type="checkbox"/> √
T.	IF THE FACILITY HAS ADDITIONAL TRAINING SITES NOT LISTED IN SECTION II, PAGE 1, YOU MAY COMPLETE THE VET TEC ADDITIONAL SITE PAGE AVAILABLE AT https://www.benefits.va.gov/gibill/fjib/VetTec_Providers.asp AND ATTACH IT TO YOUR APPLICATION.	<input type="checkbox"/> √

REVIEW OF PROGRAMS - YOU MUST ALSO ACCESS AND COMPLETE THE LIST OF FACILITY PROGRAMS ON THE VA EXCEL SPREADSHEET (COLUMNS A-P) AVAILABLE AT https://www.benefits.va.gov/gibill/fjib/VetTec_Providers.asp AND ATTACH IT TO YOUR APPLICATION.

SECTION VIII: STATEMENT OF UNDERSTANDING - VET TEC APPLICATION

NOTE: VET TEC Memorandum of Understanding (MOU) is online at https://www.benefits.va.gov/GIBILL/resources/education_resources/mou.html.

I CERTIFY THAT all information contained in this application and accompanying school catalog and supporting materials is true and correct in content and policy.

31A. SIGNATURE OF CHIEF ADMINISTRATIVE OFFICER (*Sign in ink*)

31B. DATE SIGNED (*MM/DD/YYYY*)

31C. NAME OF CHIEF ADMINISTRATIVE OFFICER (*Type or print name*)

SECTION IX: STATEMENT OF UNDERSTANDING - VA REIMBURSEMENT SCHEDULE

Section 116 of Public Law 115-48 provides payment at the following intervals:

- 25% of the submitted tuition and fees will be paid upon the initial enrollment of the student.
Note: "initial enrollment" requires the student to attend at least one day of class.
- 25% of the submitted tuition and fees will be paid upon the student's successful completion of the program.
Note: "successful completion of the program" means that the student has completed all required training and has received a graduation certificate from the Facility.
- 50% of the submitted tuition and fees will be paid once the student has found meaningful employment.
Note: "meaningful employment" is defined as:
 - Traditional employment in a career the program of study was in, **or**
 - Promotion in the student's current career if the student is currently employed in a career the program of study was in, **or**
 - Self-Employment if the student is owning/operating a business and is utilizing skills from the program of study they were in.

The Chief Administrative Officer has read and understands that the Department of Veterans Affairs will only provide reimbursement at the milestones identified above.

32A. SIGNATURE OF CHIEF ADMINISTRATIVE OFFICER (*Sign in ink*)

32B. DATE SIGNED (*MM/DD/YYYY*)

32C. NAME OF CHIEF ADMINISTRATIVE OFFICER (*Type or print name*)

SECTION X: STATEMENT OF UNDERSTANDING - 85-15 RULE

The Department of Veterans Affairs will not approve an enrollment in any program for an eligible veteran, not already enrolled, for any period during which more than 85 percent of the students enrolled in the program are having all or part of their tuition, fees, or other charges paid for them by the educational institution, or by VA under the VET TEC Pilot Program.

An 85-15 percent ratio must be computed for each program. Computations are made based on a student's program(s), not on individual classes that a student may take. Pursuit of a program that varies in any way from a similar course of study requires a separate 85-15 percent computation. A program will be considered to vary from another if there are different attendance requirements, required unit subjects are different, required completion length is different, etc.

IMPORTANT - When calculating the 85-15 Rule, the following process must be followed by the Facility:

- (1) The Facility must assign its students into their individual programs. 85-15 Rule computations are done by program, not individual classes (or modules) students might be taking through separate programs of education. Separate concentrations or tracks, must be individually identified and are subject to their own 85-15 Rule computations.

SECTION X: STATEMENT OF UNDERSTANDING - 85-15 RULE (Continued)

(2) The school must assign students in two categories:

(A) Non-Supported Students -

- Students who are not veterans and are not in receipt of institutional aid.
- Students in receipt of any Federal aid (other than VET TEC benefits).
- Students receiving any assistance provided by the Facility, if the institutional policy for determining recipients of such aid is equal with respect to veterans and non-veterans.

Example 1: The Facility offers a \$500.00 tuition scholarship to all students who get or maintain a 3.5 Grade Point Average (GPA) or higher. This scholarship is offered to all students, whether they are receiving VET TEC benefits or not. Students not receiving VET TEC benefits who receive this scholarship can be counted as Non-Supported Students.

Example 2: The Facility waives all tuition costs for the spouses and children of faculty members. This waiver is offered to all spouses and children even if they are receiving VET TEC benefits. Students not receiving VET TEC benefits who receive this waiver can be counted as Non-Supported Students.

(B) Supported Students -

- Veterans in receipt of VET TEC benefits.
- Students who are receiving institutional aid, where the institution's policy for determining the recipients of such aid is unequal with respect to veterans and non-veterans.

Example 1: The facility offers a \$500.00 tuition scholarship to students who get or maintain a 3.5 Grade Point Average (GPA) or higher. This scholarship is not offered to students receiving VET TEC benefits. All students receiving the scholarship would now be counted as Supported Students.

Example 2: The Facility waives all tuition costs for the spouses and children of faculty members. This waiver is not offered to the spouses and children if they are receiving VET TEC benefits. All students receiving this waiver would now be counted as Supported Students.

(3) The number of Supported Students is added to the number of Non-Supported Students for a Total Number of Students.

The number of Supported Students is then divided by the Total Number of Students. This number is then converted into a percentage. If this percentage is equal to or under 85% the Facility is in compliance with the 85-15 Rule. If this percentage is over the 85%, then the Facility has violated the 85-15 Rule.

(4) The Facility will complete the Statement of Assurance of Compliance with 85/15 Enrollment Ratios for each term.

NOTE: If a Facility is approved with preference, they will be exempt from this provision. If a Facility is approved with preference, their approval letter from the Department of Veterans Affairs will expressly show this status.

The Chief Administrative Officer has read and understands that students can only be certified if the 85-15 percent ratio is maintained and that if the Facility has any questions about this calculation the site will contact the VET TEC Education Liaison Representative *prior* to certifying the enrollment. Furthermore, the Chief Administrative Officer understands that willful false reporting of the 85-15 percent ratio may result in loss of approval to receive funds from the Department of Veterans Affairs and may result in School Liability of monies paid to both the school and students. If a school is approved with preference, they will be exempt from this provision. If a facility is approved with preference, their approval letter from the Department of Veterans Affairs will expressly list this preference.

33A. SIGNATURE OF CHIEF ADMINISTRATIVE OFFICER (*Sign in ink*)

33B. DATE SIGNED (*MM/DD/YYYY*)

33C. NAME OF CHIEF ADMINISTRATIVE OFFICER (*Type or print name*)

SECTION XI: STATEMENT OF UNDERSTANDING - RECORDS MAINTENANCE AND VA ACCESS TO RECORDS

Notwithstanding any other provision of law, the records and accounts of facilities pertaining to eligible veterans who receive educational assistance under the VET TEC Pilot Program, as well as the records of other students which the Department of Veterans Affairs determines necessary to ascertain institutional compliance with the requirements of the program, shall be available for examination by duly authorized representatives of the Government.

The Buckley Amendment (Public Law 93-80) requires that institutions receiving Federal funds administered by the Department of Education must obtain the student's consent to release information from school records. One exception to the law, however is that information sought in connection with a student's application for receipt of financial aid is exempt. It has been determined that school records relating to VA benefits fall into "financial aid" category and are therefore exempt from the provisions of the Buckley amendment. Therefore, the Department of Veterans Affairs shall have access to the records of VA beneficiaries as well as non-VA students without the written consent of students in order to monitor the school's compliance.

The Chief Administrative Officer has read and understands that all records, for all students, must be made available to a duly authorized representative of the Government when requested. These documents must be supplied as requested, either in a physical or electronic format.

34A. SIGNATURE OF CHIEF ADMINISTRATIVE OFFICER *(Sign in ink)*

34B. DATE SIGNED *(MM/DD/YYYY)*

34C. NAME OF CHIEF ADMINISTRATIVE OFFICER *(Type or print name)*

SECTION XII: STATEMENT OF UNDERSTANDING - VA TRADEMARK

The Chief Administrative Officer has read the [VA Trademark Terms of Use](https://www.benefits.va.gov/GIBILL/Trademark_Terms_of_use.asp) at https://www.benefits.va.gov/GIBILL/Trademark_Terms_of_use.asp and understands that the facility must remain in compliance with these provisions at all times.

35A. SIGNATURE OF CHIEF ADMINISTRATIVE OFFICER *(Sign in ink)*

35B. DATE SIGNED *(MM/DD/YYYY)*

35C. NAME OF CHIEF ADMINISTRATIVE OFFICER *(Type or print name)*