



Date

Name

School

Address

City/State/Zip

Re: Customer Name

Dear (Training Provider Name):

This letter serves as notification that the customer named above has expressed interest in your _____, _____
Program name , start and end dates of training
and is approved to enroll under the _____. It is understood that this training
Funding Title
program has been approved and is listed on the State Eligible Training Provider List (if applicable).

In order to complete this process, I am requesting your acknowledgment of the following:

1. A copy of your most recent refund policy must be submitted to our office, as it will be used as reference in the event that a refund must be processed.
Pursuant to federal and state regulations, all tuition and training funds which have been expended for which the full benefit has not been realized must be recovered since they are not allowable costs under the state and federal programs that pay for them. Therefore, any tuition, fees or training funds must be refunded and credited to the proper ITA or other training program fund.

The refund policy that you send us MUST include:

- a. **the percentage of advanced payment to be returned upon non-completion of or withdrawal from courses;**
 - b. **the time spent in training before a refund will no longer be honored.**
2. Monthly progress reports will be submitted to the customer's counselor (indicated on attached Purchase Order) **no later than the 5th of each month.**
 3. Certification(s) earned will be submitted within five days after the customer has completed the program.
 4. 24 hour notification will be provided to customer's counselor if customer has discontinued training prior to expected ending date.

5. Provided all conditions have been met to create an ITA contract, contractors providing training services to WIA clients will receive one-half of the amount due under their ITA upon the participant's completion of 50% of the training. The remaining one-half will be paid upon the client's completion of the training program. Payment of either portion of the ITA is expressly conditioned upon:

- The contractor's submission of the participant's monthly attendance and progress reports, and
- The contractor's submission of an invoice to the Oakland PIC for each unit of training.

Payments will be processed within 30 business days after invoices are received and approved.

6. In the event that an enrollment is terminated, refunds will be processed within 30 days of receipt of a cancellation or refund form submitted to the (SERVICE PROVIDER). Likewise, any refund owed must be processed within 30 days of notification of refund due.

7. Any changes made to your refund policy must be sent to _____
at the following address: _____ **Counselors Name**

Please acknowledge the terms above by signing below and returning a copy to me via fax or mail. If you have any questions or concerns, please contact me at_____. We appreciate your cooperation, and look forward to our continuing relationship.

Sincerely,

Counselor

ACKNOWLEDGMENT

By:_____

Title:_____

School:_____

Date:_____