

North Central Workforce Development Area

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Directive #: <u>11-97 (REV 1)</u>	Date: <u>1/18/2019</u>
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TO: SkillSource Staff and Service Providers

FROM: Dave Petersen, Executive Director

SUBJECT: ITA Tool Agreement and Request Form

Individual Training Accounts may include the cost of tools when necessary and within budgetary limits of ITA. The following guidelines must be followed:

- 1) ITA tools are purchased by SkillSource.
- 2) ITA tools may be approved if they are required by the program of study and not provided by the educational institution.
- 3) The amount of the tool purchase must be included in the full ITA amount and may not exceed ITA limit.
- 4) The trainee must get two valid quotes for purchases over \$500, and one quote for purchases under \$500.
- 5) The Training/Tools & Uniforms/Test Fee Request Worksheet must be completed and approved by SkillSource Trainer and Manager prior to purchase.

Please direct any questions regarding ITA procedures to your Program Manager.



ITA TOOL AND EQUIPMENT AGREEMENT

1. I understand that tools and equipment are purchased by SkillSource only if they are essential to completion of a SkillSource-approved training program.
2. I agree that all tools and equipment purchased by SkillSource remain the property of SkillSource until I have completed training and have a permanent job which requires use of those tools.
3. **I agree that if I do not complete my training program, or if I do not have a training related job within 90 days of the end of my training, all tools and equipment purchased by SkillSource must be returned to SkillSource within 5 working days.**
4. In no instance will tools and equipment become the property of the educational institution.
5. For tool purchases exceeding \$500, the trainee must provide two full cost comparisons and attach them to this agreement. SkillSource will purchase the tools based on cost, availability and quality.
6. Tools and equipment will be expressly used for job related work.

I have examined the attached list of items and prices and I agree that it is complete and correct. I agree to accept responsibility to keep these items in good condition, in my possession or in a secure location, safe from loss.

Participant Signature

Date

Trainer Signature

Date



Training/Tools & Uniform/Test Fee Request Worksheet

I, _____ CMS# _____ request assistance with:

ITEM	COST
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
7.	\$
8.	\$
Subtotal	\$
Tax	\$
Total	\$

Vendor _____

Phone # _____

I understand this training/support service must be purchased within 30 days and will be used to satisfy the needs indicated above.

Signed _____

Date _____

<p>STAFF USE ONLY</p> <p>Training Cost \$ _____</p> <p>Trainer Approval _____</p> <p><input type="checkbox"/> LA <input type="checkbox"/> LD <input type="checkbox"/> RRAA</p>	<p>ACTIVITY</p> <p><input type="checkbox"/> ITA</p> <p><input type="checkbox"/> OJT Contract # _____</p> <p><input type="checkbox"/> Other (Specify) _____</p> <p>Training Manager Approval _____</p> <p><input type="checkbox"/> LI <input type="checkbox"/> E3 <input type="checkbox"/> DWG</p> <p><input type="checkbox"/> LO <input type="checkbox"/> E4 <input type="checkbox"/> STATE ED</p> <p><input type="checkbox"/> OTHER _____</p>
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