

**SOUTH CAROLINA COMMISSION ON HIGHER EDUCATION
SOUTH CAROLINA STATE APPROVING AGENCY (SCSAA)**

1122 Lady Street, Suite 300, Columbia, SC 29201
Voice: (803) 737-2260 Fax: (803) 737-2297

INSPECTION REPORT WORKSHEET

- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> Apprenticeship | <input type="checkbox"/> New | <input type="checkbox"/> Additional Objective (s) |
| <input type="checkbox"/> On-The-Job | <input type="checkbox"/> Advance | <input type="checkbox"/> Revision |
| | <input type="checkbox"/> Reapproval | <input type="checkbox"/> Other: |

Firm: _____ FAC: _____ Effective Date: _____
 Address: _____ Voice: _____
 E-Mail: _____ Fax: _____
 Kind of Business: _____ Doing Business Since: _____
 Job Objective: _____ DOT: _____
 Adequate space, equipment, and personnel available for instructional purposes? Yes No
 Hours in Work Week: _____ Length of Program: _____ Number firm Can Train: _____
 Trainer: _____ Title: _____ Years Experience: _____

WAGE SCHEDULE

Start \$ per for months	<u>4th</u> \$ per for months	<u>7th</u> \$ per for months
<u>2nd</u> \$ per for months	<u>5th</u> \$ per for months	<u>8th</u> \$ per for months
<u>3rd</u> \$ per for months	<u>6th</u> \$ per for months	<u>Journeyman/Completion Wage</u> \$ per

Items checked are attached as a part of this application:

- VA Form 22-8794 completed (Certifying Official) Training Outline

As an authorized official of the firm, I certify that:

- The job is one in which progression is based upon skills learned through training and not on such factors as length of service and normal turnover.
- The wages paid are not less than wages paid non-veterans in the same position with equal experience. The beginning wage is at least 50% of the completion wage.
- The wages will be increased in regular periodic increments until not later than the last full month of training at which time they will be at least 85% of the completion wage.
- There is reasonable certainty that the job for which the veteran is trained will be available at the completion of training.
- Upon enrollment of a veteran in this program, a copy of the appropriate training agreement signed by the veteran and an authorized official of the firm will be furnished to the veteran, the State Approving Agency, and the U.S. Dept. of Veterans Affairs.
- The South Carolina State Approving Agency must be promptly notified of any changes which effect the approval.
- The records of any veteran enrolled will be retained for three (3) years after termination or completion.
- A certificate documenting the satisfactory completion of training will be furnished by this office.
- Provisions will be made for related instruction (to include safety training) for veterans who may need it. (144 hours/year recommended for Apprenticeship)
- The specified length of training shall include the first _____ months as a Probationary Period (Apprenticeship Only).
- The ratio of Trainee to Journeyman is one trainee for each _____ Journeyman (Apprenticeship Only).

It is my understanding that the South Carolina State Approving Agency (SCSAA) will exercise supervision of the training program and make periodic checks as to the continued adequacy of training and equipment; that this approval may be terminated by the SCSAA on fifteen (15) days notice; and that the training establishment may withdraw from this training program upon notification to the SCSAA.

Signature of Employer/Representative: _____ Title: _____

Approved by Veteran Education Coordinator: _____ Date: _____