

**SAA-1A**

**LETTER OF TRANSMITTAL**

Date Mailed: \_\_\_\_\_

Establishment: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_ Phone Number: \_\_\_\_\_

- A. This is a notification of:**
- 1.  New Approval
  - 2.  Revised Approval
  - 3.  Withdrawal of Approval
  - 4.  Suspension of Approval

- B. Authority for this notification:**
- 1.  CFR 21.4261 (Apprentice Courses)
  - 2.  CFR 21.4259(A) Duration of suspension is \_\_\_\_\_ days.  
Reason(s) for suspension: \_\_\_\_\_ Effective Date: \_\_\_\_\_
  - 3.  Title 38, U.S.C., Section 3679 (withdrawal of approval)  
Reason(s) for withdrawal: \_\_\_\_\_ Effective Date: \_\_\_\_\_

**C. Conditions for approval are indicated on Employer Application dated: \_\_\_\_\_**

**D. Remarks: Date completed application approval package received by SAA \_\_\_\_\_**

- E. Enclosures:**
- SAA-1A
  - Apprenticeship Standards
  - VA Form 22-8794
  - Form 2000
  - Other (Describe)

**F. 1. An on-site inspection was made of the employer's facilities and resources on (date): \_\_\_\_\_**  
 Therefore, upon considering the employer's facilities, resources, and application, I  
 do  do not recommend approval.

\_\_\_\_\_  
 Signature, Educational Consultant;  
 State Approving Agency for Veterans Training.

2. Effective date of approval: \_\_\_\_\_

3.  
 \_\_\_\_\_  
 Signature, Director;  
 State Approving Agency for Veterans Training

**SAA-1A**

Date Mailed: \_\_\_\_\_

**APPLICATION FOR APPROVAL TO ENROLL VETERANS IN APPRENTICESHIP TRAINING**

<p><b>Type of Action and Notification of:</b></p> <p><input type="checkbox"/> Address Change      <input type="checkbox"/> Change in Auth/Certifying Official</p> <p><input type="checkbox"/> Name Change        <input type="checkbox"/> Other (Specify) _____</p> <p><input type="checkbox"/> Wage Change        _____</p> <p>Effective Date _____</p>	<p><b>Type of Program (Check One Only)</b></p> <p><input type="checkbox"/> Individual Not Joint    <input type="checkbox"/> Group Waiver</p> <p><input type="checkbox"/> Individual Waiver      <input type="checkbox"/> Individual Joint</p> <p><input type="checkbox"/> Group Not Joint        <input type="checkbox"/> Group Joint</p>
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<b>Registration Agency</b> _____	<b>Contact Person</b> _____	<b>Telephone</b> _____
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<b>Name of Program Sponsor</b> _____	<b>Registration Number (If Any)</b> _____
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<b>Sponsor's Operating Headquarters Address</b> _____	<b>City</b> _____	<b>State</b> _____	<b>Zip</b> _____	<b>County</b> _____
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Trade	D.O.T. Code	Month/Hour	Hourly Rate

Trade	Interval	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th

**Comments**

  
  
  
  
  
  
  
  
  
  

I understand that a copy of this document reflecting the above noted changes will be forwarded to the Ohio State Apprenticeship Council. I agree with the terms listed under the Certification By Employer or Authorized Official on the final page of SAA-1A.

**Signature** \_\_\_\_\_ **SAA Official** \_\_\_\_\_

**Name and Title** \_\_\_\_\_ **Date** \_\_\_\_\_

**APPLICATION FOR APPROVAL TO ENROLL VETERANS IN APPRENTICESHIP TRAINING**

Standards For Approval of Establishments  
Offering Apprenticeship Training Under  
38 U.S.C. 1787

**1. Pertinent Excerpt From The Act.**

1. "Section 1683 (a) Any eligible veteran may receive the benefits of this chapter while pursuing a full-time program of the apprenticeship approved by a State Approving Agency as meeting the standards of apprenticeship published by the Secretary of Labor pursuant to section 50a of title 29, of United States Code."

**2. Pertinent Excerpts From The Code of Federal Regulations, 21.4261.****(A) General**

An apprenticeship course is any training on-the-job course which has been established as an apprenticeship course by a training establishment as defined in CFR 21.4200(c) and which has been approved as an apprenticeship course by the State Approving Agency.

**(B) Application**

Any training establishment desiring to furnish a course of apprenticeship training will submit a written application to the appropriate State Approving Agency setting forth the following:

- (1) Title and description of the specific job objective for which the veteran is to be trained;
- (2) The length of the training period;
- (3) A schedule listing various operations for major kinds of work or tasks to be learned and showing for each job operations or work, tasks to be performed, and the approximate length of time to be spent on each operation or task;
- (4) The number of hours of supplemental related instruction required;
- (5) Certification that the veteran or eligible person will pursue the program on a full-time basis; and
- (6) Any additional information required by the State Approving Agency.

**(C) Approval Criteria**

The appropriate State Approving Agency may approve a course of apprentice training when the training establishment and its apprentice courses are found upon investigation to have met the following criteria:

- (1) The standards of apprenticeship published by the Secretary of Labor pursuant to 29 U.S.C. 50a;
- (2) A signed copy of the training agreement for each veteran or eligible person, making reference to the training program and wage schedule as approved by the State Approving Agency, is provided to the veteran or eligible person and the Department of Veterans Affairs and the State Approving Agency by the employer; and
- (3) The course meets such other criteria as may be established by the State Approving Agency.

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**CERTIFICATION BY EMPLOYER OR AUTHORIZED OFFICIAL**

The wage schedule and Item 8 of this agreement, do not supersede or abrogate the provisions of the Fair Labor Standards Act or other federal and state statutes.

I agree that a representative of the Ohio State Approving Agency, the designated Approval Agency for Apprenticeship in the State of Ohio shall have access for inspection purposes at any time to the above establishment and to the records of the same.

The training program and wage schedule submitted with this application is in conformity to the state and federal Standards for Apprenticeship Training and is, to the best of my knowledge and belief, an accurate and complete plan of what we will follow.

I hereby certify that I have read the foregoing Standards for approval and that I will be responsible for compliance with the regulations and policies enumerated therein.

I understand that failure to comply will result in suspension or disapproval, in accordance with CFR 21.4259, and 38, U.S.C. 3679.