



WESTERN OKLAHOMA WORKFORCE DEVELOPMENT BOARD
Coordination of Training Funds (COTF)

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SECTION I: To be completed by WIOA staff and forwarded to Training Provider.

To: Financial Aid Office
 Attention: _____
 School: _____
 E-mail or Fax: _____
 Participant Name: _____

From: _____
 Attention: _____
 E-mail or Fax: _____
 PID: _____

I hereby authorize the exchange of information between the designated WIOA Service Provider Staff and the Financial Aid Office of the above named

 Signature of Participant _____
Date

SECTION II: The following section is to be completed by the financial aid office and cannot be revised by WIOA staff. WIOA staff are not authorized to change

Training Program Name: _____

Start Date: _____ End Date: _____

PERIODS COVERED			
_____	Fall:	Trimester I	<input type="checkbox"/> Full Length of Short Course
_____	Spring:	Trimester II	
_____	Summer:	Trimester III	

COST OF ATTENDANCE*	
Tuition	\$ _____
Fees	\$ _____
Books, Supplies and Tools	\$ _____
Uniforms	\$ _____
OTHER EXPENSES RELATED TO TRAINING**	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL COST OF ATTENDANCE	\$ _____

STUDENT'S FINANCIAL AID	
PELL Grant	\$ _____
<input type="checkbox"/>	Student is not PELL eligible
<input type="checkbox"/>	Program is not PELL eligible
OTHER FINANCIAL RESOURCES EXCLUDING LOANS AND VA BENEFITS	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL FINANCIAL AID	\$ _____

Total Cost of Attendance minus student's financial aid equals unmet need

By signing below, the financial aid officer (or the school's designated personnel who performs those duties) agrees to inform the local WIOA program operator of the amounts and disposition of financial aid awarded to the participant as part of a continuing regular information sharing process. **If corrections are needed, the training provider is required to complete a new COTF form.**

 Financial Aid Officer _____
Date

*As defined by the Higher Education Act, Section 472, enacted December 20, 2018.

**Other expenses related to training may include transportation, room and board (as defined by the Higher Education Act), vehicle insurance, and other items allowable in Section 472 of the Higher Education Act.

Section III: The following section is to be completed by the designated WIOA Service Provider Staff.

After a comprehensive review of services provided by partner agencies, other social service agencies, and other community resources, I have determined that WIOA funds are necessary for attainment of the participant's employment goal. I certify that WIOA funds will be coordinated with other funds and there will be no duplication of resources.

 WIOA Service Provider Staff Signature _____
Date

