

U.S. Department of Labor

Office of Apprenticeship



WIPS/AI DEMOGRAPHICS PORTAL DESIGNATION FORM

☐ **WIPS Access:** Required fields are outlined in red. Please use the dropdown menus to select the correct state, region, and grant type for your grant.

☐ **AI Demographics Portal:** See page 3.

Section 1 – Grant Information

Date:

Authorized Representative:

Email Address:

Phone Number:

Mailing Address:

State: VI

Grant 1 Type: SAFE4

Grant 1 Number:

Grant 2 Type: SAFE4

Grant 2 Number:

Grant 3 Type: SAFE4

Grant 3 Number:

Section 2 – Submitter/Certifier Information

The submitter and certifier roles are now combined – Meaning that one person may both submit data and certify the report generated from that data.

Submitter/Certifier Name:

Submitter/Certifier Email Address:

Submitter/Certifier Phone Number:

Does this person have a RAPIDS or WIPS Account? Yes: No:

Does this person report for another Apprenticeship Grant? Yes: No:

If so, which grant? SAFE4

Is this person replacing another submitter/certifier? Yes: No:

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If so, who?

Section 3 – Submitter/Certifier 2 Information

The submitter and certifier roles are now combined– Meaning that one person may both submit data and certify the report generated from that data.

Submitter/Certifier Name:

Submitter/Certifier Email Address: Submitter/Certifier

Phone Number:

Does this person have a RAPIDS or WIPS Account? Yes: No:

Does this person report for another Apprenticeship Grant? Yes: No:

If so, which grant? SAFE4

Is this person replacing another submitter/certifier? Yes: No:

If so, who?

Section 4 – Submitter/Certifier 3 Information

The submitter and certifier roles are now combined– Meaning that one person may both submit data and certify the report generated from that data.

Submitter/Certifier Name:

Submitter/Certifier Email Address: Submitter/Certifier

Phone Number:

Does this person have a RAPIDS or WIPS Account? Yes: No:

Does this person report for another Apprenticeship Grant? Yes: No:

If so, which grant? SAFE4

Is this person replacing another submitter/certifier? Yes: No:

If so, who?



Section 5 – RAPIDS Apprenticeship Information (AI) Demographics Portal

Grantees may use a print-out from the AI Demographics Portal as source documentation for certain data elements as indicated in TEGL 23-19 Change 2. By completing the information below, grantee staff will be given access to this Portal (i.e., not full access to RAPIDS).

Please list the names and email addresses of 1-2 people in your organization who need access to the AI RAPIDS Demographics Portal. This information includes the Apprentice ID number, name, occupation, and the date the individual began in the RAP. NOTE: The AI Demographics Portal will not be used by SAA states that do not use RAPIDS.

Name 1:

Email Address 1:

Name 2:

Email Address 2:

Authorized Representative Signature:

Please attach this form to your WIPS Technical Assistance Request.