

AEL PY22-23 Plan for Workplace Literacy Services

1. Introduction to Implementing a Workplace Literacy Program

Complete this survey to provide an overview of the AEL provider's plan for a **Workplace Literacy Program in PY 22-23. If you are planning an IET with an employer, you must submit an IET Implementation Plan.**

As a reminder, enrollments in a Workplace Literacy program will count towards the **Intensive Services enrollment target**. A survey for each program and employer partner must be submitted. After submitting a survey, you may email AELTA@twc.texas.gov to request a copy. Please make sure you hit the **"Done"** button so that the survey is submitted as **complete**. Direct any questions about this survey to AELTA@twc.texas.gov.

Note: Completing the online 'survey' will take 8-10 minutes, if you have planned your responses prior to starting. You are not able to return to a survey if you start and do not finish. So, know your responses before beginning.
PDF of Implementation Plan Questions: AELTA@twc.texas.gov

2. Grantee Information

1. Grant recipient
2. Service provider (enter provider name even if it is the AEL Grant recipient):
3. Name of person completing this form:
4. Email address:
5. Phone:

NOTICE:

Section 16.11 of RFP 320-18-01 prohibits the use of AEL funds awarded under this solicitation for AEL services on behalf of public employers. This means that a grantee under this solicitation shall not develop or offer services specifically on behalf of a public employer designed to train the incumbent employees of the specific employer. Services to a public employer means, but is not limited to, services designed to educate or train the incumbent employees of an Independent School District (ISD), community college, a city, a public hospital, or county jail. AEL services to individuals who are incarcerated at a public correctional facility are allowable under regular AEFLA Intensive services as Corrections.

Please select a response below to reflect your understanding and to continue.

I understand this prohibition.

Please contact me for further clarification.

7. If you have been contacted by a public employer for services, please list the employer and what services were requested. (Enter N/A if not applicable.)

8. Provide the name of the collaborating employer for workplace literacy services?

9. How was this collaboration established? (Check what applies)

Referral through WFS, Business Services

Referral from a Chamber of Commerce

Met employer representative at a networking event

Presented on AEL to a group of community members

Referral from the state office

Direct outreach from employer to AEL looking for services

Other (please specify)

10. Select the industry cluster of the employer (drop down menu)

11. Do you have an MOU with the employer (yes-No)

3. Workplace Literacy – Employer Engagement

12. Is this the first time the grantee will provide a class with this employer(s)? (Yes-No)

13. What type of incentives will the employer provide participants, if any?

(Check all that apply.)

Release time

Opportunities for wage increase

Opportunities for promotion

Tablets for participants for DL (or hot spots)

No incentives are provided

Other

4. Workplace Literacy Services

14. What type(s) of workplace literacy services will the grantee deliver in PY 21-22? (Select all that apply.)

ESL

Reading

Math

High School Equivalency Prep

Job specific ESL

Digital Literacy

English Literacy and Civics Education

AEL Activities in the context of an employer provided training

We are working with the employer to determine

Other (please specify)

How many classes are you planning with this employer over the program year?
(Fill in blank)

15. Approximately how many employees are you planning to serve over the course of the Program Year?

5. Workplace Literacy - Delivery, Completion Time, Class Location(s), Incentives

17. Estimate the number of Direct AEL instructional hours a participant will receive over the course of services this Program Year.

12-30 hours

31-40 hours

41-50 hours

51-60 hours

61-80 hours

Other (please explain)

18. Will distance education services be provided?

Yes. - No.

19. Is the provider or employer assessing the participant's digital literacy skills, access to technology and the internet before providing distance education services?

Yes - No

20. Where will the workplace class(es) be held? (Select all that apply).

Employer's worksite

At the provider's site

Services will be remote synchronous instruction

6. Measurable Skills Gains

21. What are the planned MSG(s) to be attained by participants and reported this Program Year?

MSG 1a EFL (Gain in Basic Skills/EL post-test)

MSG 1b HSE

MSG 3- Transcript or Report Card (I have reviewed this with my Program Specialist)

MSG 4- Progress Milestone (We have an MOU in place and have specified a progress milestone.)

MSG 5- Passing Technical/Occupational Knowledge Based Exam (reviewed with my Program Specialist)

If you selected MSG 3, MSG-4, or MSG 5, answer the question below:

22. What was the outcome agreed to with the employer? Enter N/A if not applicable.

7. Workplace Literacy Data Reporting

23. What TEAMS activity code(s) will students in the Workplace Literacy program be coded with? Check the code below for the class listed name/number above.

Work-based (AEFLA)

Work-based (Local)

Work-based (EL CIVICS)

Thank you for completing this Workplace Literacy survey. Please click "Done" to submit your survey responses.