



**State Approving Agency (SAA) Application Guide – Facility Portal**

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Note: Application can be saved and continued at any time. Applications are active for 30 days and will be deleted after 30 days.

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

SAA Home Page - <https://app.wda.state.mi.us/saa>

## Facility Login

### New Facility

### Start a New Application

1. To add a new facility, click “Check Eligibility and Sign-Up.”
  - a. Facilities will have to go through the pre-determination questions to determine if the Facility meets the minimum requirements before accessing the option to Create an Account.
2. If eligible, you can create a facility account by completing the application.
3. Once account has been created, you can login using your credentials at the Facility Portal Login.

**Login**

User Name \*

youremail@michigan.gov

Password \*

Password

Sign In    [Forgot Password?](#)

**Start application to train veterans and other eligible dependents**

[SAA Application Guide](#)

Click on Check Eligibility and Sign-Up to know if you are eligible.

Check Eligibility and Sign-Up

**Schools currently approved to certify Veterans and other eligible dependents**

[Current Facilities Getting Started Guide](#)

Please note that program modifications are only available for the following Facility Types – Institute of Higher Learning (IHL) and Non-College Degree (NCD) facilities. Please contact the Michigan SAA team at [MISAA@Michigan.gov](mailto:MISAA@Michigan.gov) for additional information.

**Step 1:**  
Submit a request to SAA with your email address and facility code.

Request Access

**Step 2:**  
Create account to access your facility information (Step 1 - SAA Approved Access is required).

Create Account

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Institute of Higher Learning (IHL)

### Facility Identification

Enter the required fields for Facility Identification, Physical Address Mailing Address (if different from Physical Address) AND Other. Required fields are indicated with (\*) red asterisk. Click “Save and Continue” to proceed.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

**Name of Facility \***

**Facility Type \***

### Physical Address

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Mailing Address

Is Mailing Address Same As Physical Address?

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Other

**Facility Website**

**Facility Phone \***

All fields in Facility Additional Information are required. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

Facility Additional Information

Please note that all fields marked with an asterisk (\*) are required.

Please indicate whether your Institution is Accredited \*

Accredited  Non-Accredited

You must be accredited by one of the following accrediting agencies listed within the U.S. Department of Education at the following address:

- o [Regional and National Institutional Accrediting Agencies](#)
- o [Specialized Accrediting Agencies](#)

By what organization is your institution accredited? \*

Please attach the accreditation letter from accrediting body indicating status of your institution with that accrediting body. \*

Upload Latest accreditation letter \*

No file selected.

Type of Institution \*

Public  Private – Profit  Private – Non-Profit

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Publications

Catalog(s) and bulletin(s) are required to be submitted individually. Enter required information about a publication, then attach file by clicking “Browse” and selecting the correct file to upload.

Next click “Download Content Policy Statement Template.” This policy must be completed, signed and saved. Click “Browse” under Attach True in Content Policy Statement file, select the correct file and upload. Click “Add Publication” upon completion. At this point, you can repeat the process to enter additional publications.

Once all publications have been added, click “Save and Continue” to proceed or “Go to Previous” to return to the last section.

### Facility Publications

**Please note that all fields marked with an asterisk (\*) are required.**

List all catalog(s) and bulletin(s) submitted with this application. Attach a completed and signed certification “True in Content and Policy” statement for all catalogs and supplements i.e. Student Handbook; Class Schedules etc. submitted to support a response to any questions in any section of this application.

<b>Name of Publication *</b>	<b>Volume Number/ Identifier</b>	
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	
<b>Date of Publication *</b>	<b>Effective Start Date *</b>	<b>Effective End Date *</b>
<input style="width: 95%; height: 25px;" type="text" value="click to select date"/>	<input style="width: 95%; height: 25px;" type="text" value="click to select date"/>	<input style="width: 95%; height: 25px;" type="text" value="click to select date"/>
<b>Attach Publication File *</b>	<b>Attach True in Content Policy Statement file *</b>	
<input style="width: 95%; height: 25px;" type="text" value="Browse... No file selected."/>	<input style="width: 95%; height: 25px;" type="text" value="Browse... No file selected."/>	

[Download True in Content Policy Statement Template](#)

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Catalog Requirements

In order to help with the timely review of your application, please indicate the specific page number(s) from the catalog(s) and or bulletin(s) which the required information can be found. The catalog(s) or bulletin(s) uploaded will be prepopulate in the dropdown selection. Select the publication which contains the required documentation from the dropdown. In the text box enter the page number where the information can be found.

### Catalog Requirements

Please indicate the specific page number upon which the information requested for each of the separate items may be found either in the catalog or in the supplement.

- \* The Institutions policy and regulation relative to standards of progress required of the student by the institution this policy will define the grading system of the institution is found on page**

Catalog 2019 - 2020

v

Enter Page Number
  
- \* The minimum grade considered satisfactory is found on page**

Catalog 2019 - 2020

v

Enter Page Number
  
- \* The Conditions for interruption for unsatisfactory grades on progress and a description of the probationary period, if any, allowed by the institution is found on page**

Catalog 2019 - 2020

v

Enter Page Number
  
- \* The conditions of reentrance for those students dismissed for unsatisfactory progress is found on page**

Catalog 2019 - 2020

v

Enter Page Number
  
- \* The statement regarding the progress records maintained by the institution and furnished to the student is found on page**

Catalog 2019 - 2020

v

Enter Page Number
  
- \* The institutions policy and regulations relating to student conduct and conditions for dismissal for unsatisfactory conduct is found on page**

Catalog 2019 - 2020

v

Enter Page Number

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## IHL Programs

The Facility has the option to upload an Excel file with a list of programs for approval or add individual programs by selecting Add “New Program.”

To bulk add programs, click “Download Programs Template” and enter the information following the instructions provided in template. Save file and click “Browse” under Upload Programs for Approval, select the correct file to upload, and click “Upload Program Spreadsheet.”

**Institute of Higher Learning (IHL) Programs**

Please download the Programs Template and follow the instructions included on the Instructions sheet to upload Programs for approval. All Programs uploaded earlier will be deleted.

Upload Programs for Approval ( [Download Programs Template](#) ) \*

No file selected.

Once the programs file has been uploaded, your program information will be listed. Additional requirements may be required and will be highlighted in red. To add or edit program information click “Edit” and make updates to the selected program. To remove a program, click “Delete” for the corresponding program you wish to remove.

**Note: Please note that additional information is required for the Programs marked in red.**

Program Title	Education Objective	Length Type	Length (Hours)	Page Number	Requirements Completed?	Actions
FF LENGTH TYPE	Associate	Credit Hours	1.00	12	NO	<a href="#">Edit</a>   <a href="#">Delete</a>
AAA	Fellowship	Credit Hours	12.00	1	YES	<a href="#">Edit</a>   <a href="#">Delete</a>
BB ACCOUNTING	Certificate	Clock Hours	5.00	22	NO	<a href="#">Edit</a>   <a href="#">Delete</a>
CC TRUCK DRIVING	Certificate	Credit Hours	3.00	11	NO	<a href="#">Edit</a>   <a href="#">Delete</a>
DD	Associate	Credit Hours	12.00	12	YES	<a href="#">Edit</a>   <a href="#">Delete</a>
EE	Certificate	Credit Hours	1.00	12	YES	<a href="#">Edit</a>   <a href="#">Delete</a>



## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### Edit Program

The Edit button displays the program details and allows the User to edit the necessary program details.

To save your changes click “Save Program.” Click “Delete Program” if you wish to remove it. Click “Cancel,” to not make any changes.

### Edit Program

Please note that all fields marked with an asterisk (\*) are required.

<p><b>Title *</b></p> <input style="width: 90%;" type="text" value="FF LENGTH TYPE"/>	<p><b>Education Objective *</b></p> <input style="width: 90%;" type="text" value="Associate"/>	
<p>Is this Program accredited? * <input checked="" type="radio"/> Yes <input type="radio"/> No</p>		
<p><b>Length Type *</b></p> <input style="width: 90%;" type="text" value="Credit Hours"/>	<p><b>Total Length *</b></p> <input style="width: 90%;" type="text" value="1.00"/>	<p><b>Page Number *</b></p> <input style="width: 90%;" type="text" value="12"/>
<p>Is this Program offered by Contracted Facility? * <input checked="" type="radio"/> Yes <input type="radio"/> No</p>		
<p><b>Select the contracted facility offering the Program *</b> (Note: In order for the program to be considered for approval by the SAA, the Contracted Facility must be an 'Approved' SAA Facility.)</p> <input style="width: 90%;" type="text" value="Select Contracted Facility"/>		
<div style="display: flex; justify-content: space-around;"><span style="background-color: #0070c0; color: white; padding: 10px 20px; border-radius: 5px;">Save Program</span><span style="background-color: #0070c0; color: white; padding: 10px 20px; border-radius: 5px;">Delete Program</span><span style="background-color: #0070c0; color: white; padding: 10px 20px; border-radius: 5px;">Cancel</span></div>		

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Upload Branches/Extensions

For facilities with multiple teaching locations, you must provide information for each location. If you do not have any other locations, click “No Branches/Extensions to Add.”

You have the option to upload your Branch/Extension details at once or them individually. Click “Download Branches/Extensions Template,” fill out template and save. Click “Browse” under Upload Branches/Extension, select the correct file and click “Upload Branches/Extensions.”

### Branches/Extensions

Click on the button below if you do not have any Branch/Extension

[No Branches/Extensions to Add](#)

**Branch campus** is a location of an educational institution that-

- Is geographically apart from and operationally independent of the main campus of the educational institution;
- Has its own faculty, administration and supervisory organization; and
- Offers courses in education programs leading to a degree, certificate, or other recognized education credential.

**Extension** is a location of an educational institution that is geographically apart from and is operationally dependent on the main campus or a branch campus of the educational institution.

**Please download the template and follow the instructions included in the Instructions sheet to upload Branch(es) or Extension(s). All Branch(es)/Extension(s) uploaded earlier will be deleted.**

Upload Branches/Extensions ([Download Branches/Extensions Template](#)) \*

No file selected.

Upload Branches/Extensions

[Add New Branch/Extension](#)

Once the Branch/Extensions are added, a list is built, and each Branch/Extension can be edited individually. Click “Edit” for a popup window to edit the location information. Click “Delete” to remove a location. Once all Branches/Extensions are added click “Save And Continue.”

Name	Type	Address 1	Address 2	City	State	Zip code	Actions
RACHNA IHL BRANCH 1	Branch	201 N Washington Square		Lansing	MI	48901	<a href="#">Edit</a>   <a href="#">Delete</a>
RACHNA IHL BRANCH 2	Branch	301 N Washington Square		Okemos	MI	48902	<a href="#">Edit</a>   <a href="#">Delete</a>
RACHNA IHL EXTENSION 1	Extension	401 N Washington Square		Brighton	MI	48903	<a href="#">Edit</a>   <a href="#">Delete</a>
RACHNA IHL Extension 2	Extension	501 N Washington Square		Detroit	MI	48904	<a href="#">Edit</a>   <a href="#">Delete</a>
RACHNA IHL BRANCH 3	Branch	601 N Washington Square		Auburn Hills	MI	48905	<a href="#">Edit</a>   <a href="#">Delete</a>

[Go to Previous](#)   [Save And Continue](#)

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### Assurances

The Facility must agree to all assurances listed for the Facility Type. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Assurances

**Please note that all fields marked with an asterisk (\*) are required.**

- \* The facility will maintain a written record of previous education and training of the veteran or eligible person. The record will clearly indicate that appropriate credit has been given by the institution for previous education and training and their training program was shortened proportionately.
- \* The institution does not utilize advertising of any type which is erroneous or misleading either by actual statement, omission, or intimation. A file of all advertising will be maintained.
  - \* Has this institution ever received a cease and desist order from the Federal Trade Commission?  
 Yes  No
- \* The institution will notify the State Approving Agency of any changes affecting approval.

Go to PreviousSave and Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Required Attachments

The Facility User must complete and upload the following forms: VA Form 22-8794 Designation of Certifying Officials, VA Form 20-8206 Statement of Assurance of Compliance with Equal Opportunity Laws, and VA Form 22-1919 Conflicting Interest Certification.

Click the hyperlink to download each form. Each document must be signed by school officials. To upload completed document, click “Browse” and select the correct file to upload. Once all the forms are uploaded, click “Save And Continue” to proceed.

### Required Attachments

Please note that all fields marked with an asterisk (\*) are required.

**VA Form 22-8794 Designation of Certifying Officials. \***

No file selected.

[Download VA-22-8794 Form Template](#)

**VA Form 22-8206 Statement of Assurance of Compliance with Equal Opportunity Laws. \***

No file selected.

[Download VA-22-8206 Form Template](#)

**VA Form 22-1919 Conflicting Interest Certification. \***

No file selected.

[Download VA-22-1919 Form Template](#)

Go to Previous

Save And Continue

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### Review and Submit Application

The Facility can review the application prior to submitting to State Approving Agency. User can make changes by clicking “Edit” for each section to jump back to the page and update/correct information.”

Facility User can save part of the application and come back to finish. The application is only valid for 30 days. At such time, the application will be deleted, and a new application must be started.

### Review and Submit Application

**The submission process will not be complete until you are done adding all required information.**

#### RXB IHL Facility

(111) 111-1111 x1111

**Facility Type:** Institute of Higher Learning (IHL)

<b>Physical Address</b> 201 N Washington Lansing, MI 48323	<b>Mailing Address</b> 201 N Washington Lansing, MI 48323
---	--

[Edit](#)

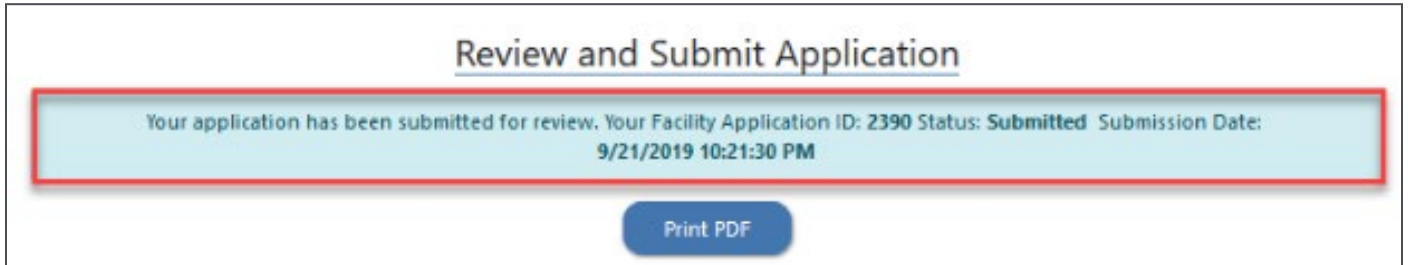
When application is ready, select the checkbox to certify the information are true and correct and click “Submit.”

I certify that the information in Section I, II, and III are true and correct in content and policy and represent the school's requirements for academic progress and graduation, and further certify that applicant institution agrees to comply with the above stated requirements \*

[Submit](#)

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

Your application will be submitted for review. For your records you will receive your Facility Application ID, Status and Submission Date. At this screen, you can print or save a PDF of your submitted application.



Review and Submit Application

Your application has been submitted for review. Your Facility Application ID: 2390 Status: Submitted Submission Date: 9/21/2019 10:21:30 PM

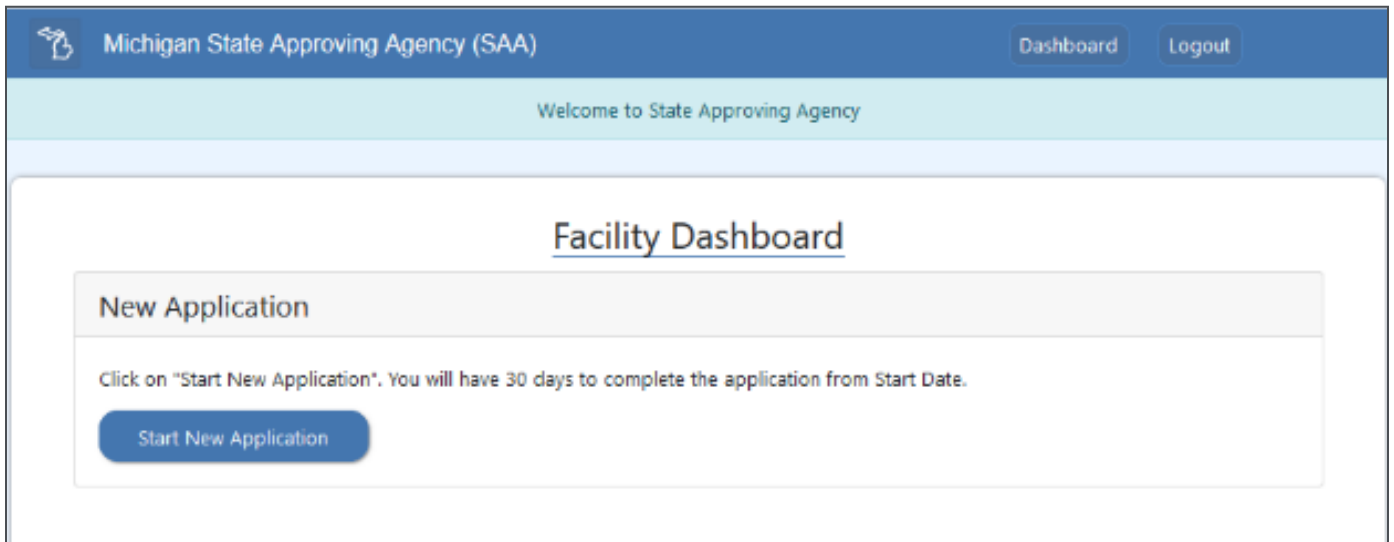
Print PDF

### Non-College Degree Institution

#### Start Non-College Degree Application

Begin a new facility application by clicking “Start New Application.”

Note: The Facility has 30 days to submit the application from the start date.



Michigan State Approving Agency (SAA) Dashboard Logout

Welcome to State Approving Agency

Facility Dashboard

**New Application**

Click on "Start New Application". You will have 30 days to complete the application from Start Date.

Start New Application

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Identification

Enter Facility Name and select Facility Type for the drop-down list. At minimum, complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

**Name of Facility \***

**Facility Type \***

### Physical Address

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Mailing Address

Is Mailing Address Same As Physical Address?

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Other

**Facility Website**

**Facility Phone \***

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Type Options

Select the appropriate Facility Type from the dropdown.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

<p><b>Name of Facility *</b></p> <input type="text" value="Enter Facility Name"/>	<p><b>Facility Type *</b></p> <div style="border: 1px solid #ccc; padding: 2px;"><p>Select Facility Type</p><p>Select Facility Type</p><p>Institute of Higher Learning (IHL)</p><p>Non-College Degree (NCD)</p><p>Apprenticeship (APP)</p><p>On-the-Job Training (OJT)</p><p>Medical Facilities</p><p>Flight (FLT)</p><p>High School</p><p>Licensing and Certification (LACAS)</p></div>
<p><b>Address Line 1 *</b></p> <input type="text" value="Enter Address 1"/>	<p><b>Physical Address *</b></p> <input type="text" value="Enter Physical Address"/>
<p><b>City *</b></p> <input type="text" value="Enter City"/>	<p><b>State *</b></p> <input type="text" value="Michigan"/>



# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Additional Information

For Facility Additional Information all required fields must be completed. Select the Type of Institution and License Information.

Michigan State Approving Agency (SAA) Dashboard Logout

Welcome to State Approving Agency

### Facility Additional Information

Please note that all fields marked with an asterisk (\*) are required.

Type of Institution \*

Public  Proprietary-Profit  Proprietary Non-Profit

### License Information

Please specify if the School/Facility is Licensed by the State of Michigan Proprietary Schools \*

Yes  No

### Accreditation Information

Please specify if the School/Facility is Accredited \*

Accredited  Non-Accredited

Go to Previous Save And Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## License Information

If the School/Facility is Licensed by the State of Michigan Proprietary Schools, the original and current license start/expiration dates are required. A copy of the Current license must be attached. Click “Save and Continue” to proceed.

### Facility Additional Information

Please note that all fields marked with an asterisk (\*) are required.

**Type of Institution \***  
 Public  Proprietary-Profit  Proprietary Non-Profit

### License Information

**Please specify if the School/Facility is Licensed by the State of Michigan Proprietary Schools \***  
 Yes  No

**Upload current License \***

No file selected.

<b>Date of Original License *</b> <input style="width: 90%; border: 1px solid #ccc;" type="text" value="mm/dd/yyyy"/>	<b>Expiration Date of Original License *</b> <input style="width: 90%; border: 1px solid #ccc;" type="text" value="mm/dd/yyyy"/>
<b>Date of Current License *</b> <input style="width: 90%; border: 1px solid #ccc;" type="text" value="mm/dd/yyyy"/>	<b>Expiration Date of Current License *</b> <input style="width: 90%; border: 1px solid #ccc;" type="text" value="mm/dd/yyyy"/>

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Accreditation Information

If the Facility is Accredited, then provide the name of the Accrediting Agency and the start and expiration dates of the original and accreditation. Attach a copy of the current Accreditation Letter by clicking “Browse” and selecting the file to upload. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Accreditation Information

**Please specify if the School/Facility is Accredited \***  
 Accredited  Non-Accredited

**By what organization is your institution accredited? \***

**Please attach the accreditation letter from accrediting body indicating status of your school with that accrediting body. \***

**Upload Latest accreditation letter \***

<b>Date of Original Accreditation *</b> <input style="width: 90%; height: 25px;" type="text" value="mm/dd/yyyy"/>	<b>Expiration Date of Original Accreditation *</b> <input style="width: 90%; height: 25px;" type="text" value="mm/dd/yyyy"/>
<b>Date of Current Accreditation *</b> <input style="width: 90%; height: 25px;" type="text" value="mm/dd/yyyy"/>	<b>Expiration Date of Current Accreditation *</b> <input style="width: 90%; height: 25px;" type="text" value="mm/dd/yyyy"/>

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Publications

For Facility Publication(s,) the Facility must provide the following

- Name of Publication – Catalog, Student handbook, Bulletins, Supplemental material
- Publication volume, if applicable
- Date of Publication (dropdown calendar will appear to select a date)
- Publication Effective Start and End Dates
- Attach a copy of the publication by clicking “Browse” and select the file to upload.

For each publication submitted with the application, a signed copy of the True in Content and Policy statement must be attached. Complete all required fields marked as (\*) and click “Save and Continue” to proceed. At this point, you can repeat the process to enter additional publications.

The screenshot shows the 'Facility Publications' section of the SAA application portal. At the top, there is a navigation bar with the Michigan State logo, the text 'Michigan State Approving Agency (SAA)', and buttons for 'Dashboard' and 'Logout'. Below this is a light blue banner with the text 'Welcome to State Approving Agency'. The main heading is 'Facility Publications'. A light blue box contains the instruction: 'Please note that all fields marked with an asterisk (\*) are required.' Below this, a paragraph explains: 'List all catalog(s) and bulletin(s) submitted with this application. Attach a completed and signed certification “True in Content and Policy” statement for all catalogs and supplements i.e. Student Handbook; Class Schedules etc. submitted to support a response to any questions in any section of this application.' The form contains several input fields: 'Name of Publication \*' (text box), 'Volume Number/ Identifier' (text box), 'Date of Publication \*' (dropdown menu with 'click to select date'), 'Effective Start Date \*' (dropdown menu with 'click to select date'), and 'Effective End Date \*' (dropdown menu with 'click to select date'). There are two file upload sections: 'Attach Publication File \*' and 'Attach True in Content Policy Statement file \*', both with 'Browse...' buttons and 'No file selected.' text. Below the second file upload section is a link: 'Download True in Content Policy Statement Template'. At the bottom center is a blue button labeled 'Add Publication'.

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

Once the Facility Publications have been added, a list of Publications is built. The User has the option to remove a publication from the submission list by clicking “Delete.”

### Facility Publications

Please note that all fields marked with an asterisk (\*) are required.

List all catalog(s) and bulletin(s) submitted with this application. Attach a completed and signed certification “True in Content and Policy” statement for all catalogs and supplements i.e. Student Handbook; Class Schedules etc. submitted to support a response to any questions in any section of this application.

**Name of Publication \***

**Volume Number/ Identifier**

**Date of Publication \***

**Effective Start Date \***

**Effective End Date \***

**Attach Publication File \***

**Attach True in Content Policy Statement file \***

[Download True in Content Policy Statement Template](#)

Add Publication

Name of Publication	Volume Number/ Identifier	Date of Publication	Effective Start Date - End Date	True in Content Statement	Remove
NCD Catalog 2019	Volume XVIII	06/05/2017	09/04/2017 - 08/31/2020	Yes	<div style="background-color: #0070c0; color: white; padding: 5px 10px; border-radius: 5px; display: inline-block; cursor: pointer;">Delete</div>

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Catalog Requirements

To timely review application, please indicate the specific page number(s) from the catalog(s) and or bulletin(s) which the required information can be found. The catalog(s) or bulletin(s) uploaded will be prepopulate in the dropdown selection. In support the facility's application, populate the applicable page number(s) from the uploaded document(s) (i.e. Catalog, Student Handbook) which pertain to each Catalog Requirements item. If multiple publications are attached, then the facility must select the publication in which the catalog requirement has been specified. If a single publication is attached, the Publication name is auto-populated and cannot be changed.

### Catalog Requirements

Please indicate the specific page number upon which the information requested for each of the separate items may be found either in the catalog or in the supplement.

**\* Grading system. This must include a description of each grade assigned. All grades must be defined: Pass/Fail, A-B-C, Satisfactory/Unsatisfactory, Numerical Point System, Percentage, etc..**

<input type="text" value="Select Publication"/>	<input type="text" value="Enter Page Number"/>
<input type="text" value="Select Publication"/>	
<input type="text" value="NCD Catalog 2019"/>	
<input type="text" value="NCD Publication"/>	
<input type="text" value="Select Publication"/>	<input type="text" value="Enter Page Number"/>

**\* Minimum grade and/or grade point average or percentage considered satisfactory.**

<input type="text" value="Select Publication"/>	<input type="text" value="Enter Page Number"/>
---	--

**\* Conditions for interruption for unsatisfactory progress or grades. Define the point at which a student will be terminated from U.S. Department of Veterans Affairs (VA) certification or suspended from school for unsatisfactory academic progress.**

<input type="text" value="Select Publication"/>	<input type="text" value="Enter Page Number"/>
---	--

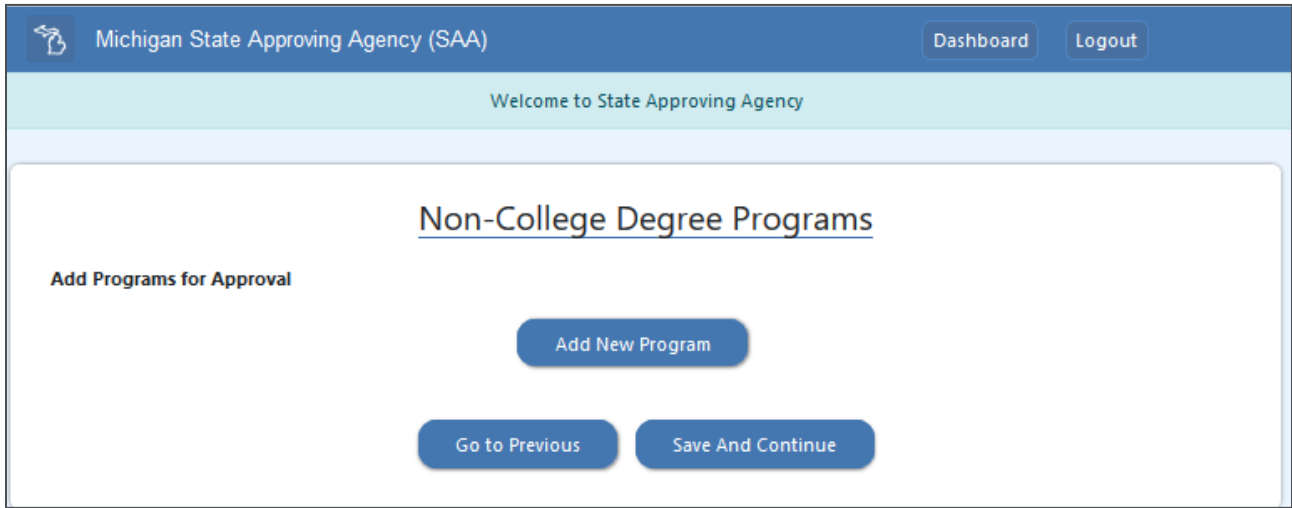
**\* Description of probationary period. IF ANY. Define the point at which a student will be placed on academic probation, the length of the probationary period and the conditions for being taken off academic probation (i.e. weeks, months, days, etc...). If a probationary police does not exist within catalog/bulletin, enter "0"**

<input type="text" value="Select Publication"/>	<input type="text" value="Enter Page Number"/>
---	--

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Add Programs

Facility can add programs for which they are requesting approval. To start adding the Programs, click “Add New Program.” Once all programs are added, click “Save and Continue” to proceed.



Each non-college degree program must be entered individually. Complete all required fields marked as (\*), for each program, the Class Schedule must be specified. The Total Hours per week will automatically calculate based on the Class Hours per day and the Length of Break and Length of Lunch per day fields. Click “Add New Program” once all the required fields are completed.

Note: The Professional Objective and Length Type are set to default values and cannot be changed.

### Non-College Degree Program

Please note that all fields marked with an asterisk (\*) are required.

Name of Program \*

Professional Objective

Length Type \*

Total Length of Program \*

Total Number of weeks of Program \*

Provide Page Number(in Catalog,bulletin or handbook) of course description \*

Modality of Instructional delivery \*

Residential  Distance

### Class Schedule

Please provide weekly class schedules you desire approved.

Class Hours Per Day							Length of Break Per Day	Length of Lunch Per Day	Total Hours Per Week
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday			
8	8	8	0	7	5	0.00	1	.5	28.5

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Modality of Instructional Delivery

If program content is online, select “Distance.” A list of criteria for distance learning is displayed. The Facility must confirm that:

1. You must be either a public or nonprofit facility.
2. You must be either an area career and technical education school that provides postsecondary level education or a postsecondary vocational institution.
3. You must be accredited by one of the accrediting agencies listed within the U.S. Department of Education at the following address: [https://www2.ed.gov/admins/finaid/accred/accreditation\\_pg4.html](https://www2.ed.gov/admins/finaid/accred/accreditation_pg4.html).

### Non-College Degree Program

Please note that all fields marked with an asterisk (\*) are required.

<b>Name of Program *</b> <input style="width: 90%;" type="text" value="NCD Program 2"/>	<b>Professional Objective</b> <input style="width: 90%;" type="text" value="Certificate"/>	
<b>Length Type *</b> <input style="width: 90%;" type="text" value="Clock Hours"/>	<b>Total Length of Program *</b> <input style="width: 90%;" type="text" value="500"/>	<b>Total Number of weeks of Program *</b> <input style="width: 90%;" type="text" value="12"/>
<b>Provide Page Number(in Catalog,bulletin or handbook) of course description *</b> <input style="width: 90%;" type="text" value="23"/>		
<b>Modality of Instructional delivery *</b> <input type="radio"/> Residential <input checked="" type="radio"/> Distance		
<p>In order to Pre-quality for approval to offer program content online your facility must meet the following criteria:</p> <ol style="list-style-type: none"><li>1. You must be either a public or nonprofit facility.</li><li>2. You must be either an area career and technical education school that provides postsecondary level education or a postsecondary vocational institution.</li><li>3. You must be accredited by one of the accrediting agencies listed within the U.S. Department of Education at the following address: <a href="https://www2.ed.gov/admins/finaid/accred/accreditation_pg4.html">https://www2.ed.gov/admins/finaid/accred/accreditation_pg4.html</a></li></ol>		
<b>Please confirm that your facility meets all three requirements by selecting yes. *</b> <input type="radio"/> Yes <input type="radio"/> No		



# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## List of Programs for Which Approval is Requested

After adding each program, a list will generate under List of Programs for Which Approval is Requested. To make changes to a program by clicking “Edit.” To remove a program, click “Delete.” Once all the programs are added, click “Save and Continue” to proceed.

### Non-College Degree Programs

**Add Programs for Approval**

[Add New Program](#)

LIST OF PROGRAMS FOR WHICH APPROVAL IS REQUESTED				
Program Name	Length Type	Length of Program	Mode of Instruction	Action
NCD Program 2	Clock Hours	500.00	Distance	<a href="#">Edit</a>   <a href="#">Delete</a>
NCD Program 1	Clock Hours	350.00	Residential	<a href="#">Edit</a>   <a href="#">Delete</a>

[Go to Previous](#)[Save And Continue](#)

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Assurances

The Facility must agree to all assurances listed for the Facility Type. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Assurances

Please note that all fields marked with an asterisk (\*) are required.

- \* The facility will maintain a written record of previous education and training of the veteran or eligible person. The record will clearly indicate that appropriate credit has been given by the institution for previous education and training and their training program was shortened proportionately.
  
- \* The facility does not utilize advertising of any type which is erroneous or misleading either by actual statement, omission, or intimation. A file of all advertising will be maintained for the previous 12 months.  
  
\* Has the facility ever received a cease and desist order from the Federal Trade Commission?  
 Yes  No
  
- \* Upon request, your organization will make all appropriate records pertaining to the veterans under Title 38, United State Code available for examination by the U.S. Department of Veterans Affairs or its representative.
  
- \* No single curriculum offered at any requested facility or training location(s) has an enrollment of U. S. Department of Veterans Affairs education beneficiaries more than 85% of the total student body at the respective location.

Go to Previous Save and Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Required Attachments

To attach the required documentation, the Facility must click “Browse” to select the file and then select Upload File. Once all the attachments are upload, click “Save and Continue” to proceed.

### Required Attachments

Please note that all fields marked with an asterisk (\*) are required.

Note: To upload the required attachment, you must choose a file to upload and then select Upload File button.

**\* Copy of original and current state license(s)**  
Note: Upload multiple files at one time, allowed each file size limit is 20MB.

No file chosen

Upload File

**\* VA Form 22-8794 - Designation of Certifying Official(s)**

No file chosen

Upload File

[Download VA Form 22-8794 Template](#)

**\* VA Form 20-8206 - Statement of Assurance of Compliance With Equal Opportunity Laws**

No file chosen

Upload File

[Download VA Form 22-8206 Template](#)

**\* Certificate or Diploma received by eligible persons who complete the program**

No file chosen

Upload File

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Review and Submit

The Facility can review the application prior to submitting to State Approving Agency. User can make changes by clicking “Edit” for each section to jump back to the page and update/correct information.”

Facility User can save part of the application and come back to finish at a later time. The application is only valid for 30 days. At such time, the application will be deleted, and a new application must be started by the Facility User.

When the application is complete, select the checkbox to certify the information is true and correct in content and policy, then click "Submit."

I certify that the information in Section I, II, and III are true and correct in content and policy and represent the school's requirements for academic progress and graduation, and further certify that applicant institution agrees to comply with the above stated requirements \*

[Submit](#)

Your application will be submitted for review. For your records you will receive your Facility Application ID, Status and Submission Date. At this screen, you can print or save a PDF of your submitted application.

Michigan State Approving Agency (SAA) [Dashboard](#) [Logout](#)

Welcome to State Approving Agency

### Review and Submit Application

Your application has been submitted for review. Your Facility Application ID: 2390 Status: **Submitted** Submission Date: 9/21/2019 10:21:30 PM

[Print PDF](#)

#### NCD Facility

https://www.google.com  
(555) 111-1212

**Facility Type:** Non-College Degree (NCD)

<p><b><u>Physical Address</u></b></p> <p>201 N Washington Square Suite 500 Lansing, MI 48913</p>	<p><b><u>Mailing Address</u></b></p> <p>201 N Washington Square Suite 500 Lansing, MI 48913</p>
--	---

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Licensing and Certification Facility Application (LACAS)

### Facility Identification

Enter Facility Name and select Facility Type for the drop-down list. At minimum, complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

<p><b>Name of Facility *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Facility Name"/>	<p><b>Facility Type *</b></p> <div style="border: 1px solid #ccc; padding: 5px; display: flex; justify-content: space-between;"><span>Select Facility Type</span><span>▼</span></div>
---	---

### Physical Address

<p><b>Address Line 1 *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 1"/>	<p><b>Address Line 2</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 2"/>	
<p><b>City *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter City"/>	<p><b>State *</b></p> <div style="border: 1px solid #ccc; padding: 5px; display: flex; justify-content: space-between;"><span>Michigan</span><span>▼</span></div>	<p><b>Zip Code *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Zip Code"/>

### Mailing Address

Is Mailing Address Same As Physical Address?

Yes  No

<p><b>Address Line 1 *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 1"/>	<p><b>Address Line 2</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 2"/>	
<p><b>City *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter City"/>	<p><b>State *</b></p> <div style="border: 1px solid #ccc; padding: 5px; display: flex; justify-content: space-between;"><span>Select State</span><span>▼</span></div>	<p><b>Zip Code *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Zip Code"/>

### Other

<p><b>Facility Website</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter a Website URL"/>	<p><b>Facility Phone *</b></p> <input style="width: 90%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Phone Number"/>
---	--

Save and Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Additional Information

For Facility Additional Information all required fields must be completed. Select the Type of Organization.

The screenshot shows a web form titled "Facility Additional Information". At the top, a light blue banner contains the text: "Please note that all fields marked with an asterisk (\*) are required." Below this, the form asks for "Type of Organization \*". There are two radio button options: "Governmental" and "Non-Governmental". At the bottom of the form, there are two blue buttons: "Go to Previous" and "Save And Continue".

For Governmental Organizations, the Facility must specify whether it is a Local or State organization. Complete all required fields marked as (\*) and click "Save and Continue" to proceed.

This screenshot shows the same "Facility Additional Information" form, but with the "Governmental" radio button selected. Below the "Type of Organization" section, there is a new section titled "Type of Governmental Entity \*". It has two radio button options: "State" and "Local". The "Save And Continue" button is now highlighted in a darker blue, indicating it is the active or recommended action.

## Licensing and Certification (LACAS) Tests

Click "Add Test" and provide description of test, requirements to take test and requirements for maintaining or renewing license.

The screenshot shows a web form titled "Licensing and Certification (LACAS) Tests". Below the title, it says "Licensing and Certification (LACAS) Test Instructions" and "Below information is required to add a Test:". A bulleted list follows: "• Description of test and requirements to take test," and "• Requirements for maintaining or renewing license." At the bottom, there are three blue buttons: "Add Test", "Go to Previous", and "Save And Continue".

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

Provide required information for each test for which the Facility is requesting approval.

### Licensing and Certification (LACAS) Test

Please note that all fields marked with an asterisk (\*) are required.

<b>Name of License *</b>	<b>Name of Test Required *</b>	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
<b>Fee Charged for Exam *</b>	<b>Valid Period Type *</b>	<b>Valid Period *</b>
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text" value="Select Valid Period Type"/>	<input style="width: 95%;" type="text"/>
<b>Pre-requisites *</b>		
<div style="border: 1px solid #ccc; height: 80px; width: 100%;"></div>		
<b>Attach a file that outlines the description of test and requirements to take the test. *</b>		
<input style="width: 95%;" type="text" value="Browse... No file selected."/>		
<b>Attach a file that outlines the requirements for maintaining or renewing License. *</b>		
<input style="width: 95%;" type="text" value="Browse... No file selected."/>		
<input type="button" value="Save Program"/>		<input type="button" value="Cancel"/>

Multiple tests can be added for approval. To make changes to a program, click "Edit." To remove a program, click "Delete." Once all programs are added, click "Save and Continue" to proceed.

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### Assurances

The Facility must agree to all assurances by checking the checkboxes. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Assurances

Please note that all fields marked with an asterisk (\*) are required.

- \* Your certification test or tests are generally accepted, in accordance with relevant government, (business, or industry standards, employment policies, or hiring practices as attesting to a level of knowledge or skill required to enter into, maintain or advance in employment in a particular vocation or profession.
- \* Your organization is licensed, chartered, or incorporated in Michigan and has offered such tests for a minimum of 2 years before the date on which you sign this application.
- \* Your organization employs, or consults with, individuals with expertise or substantial experience with respect to all areas of knowledge or skill that are measured by the test and that are required for the license or certificate issued.
- \* Your organization has no (1) direct financial interest in the outcome of a test or (2) the interest in the organization that provides the education or training of candidates for licenses or certificates required for vocations or professions. \*The second rule only applies if your certification is “required” for vocations or professions. If your certification is required for employment and your organization provides training to obtain the certification or your organization owns or partly owns an organization that provides such training, then you would not meet this requirement.
- \* Your organization maintains appropriate records with respect to all candidates who take such a test for a period prescribed by U. S. Department of Veterans Affairs, but in no case for a period of less than 3 years.
- \* Your organization promptly issues notice of the results of the test to the candidate for the license or certificate. In addition, your organization has in place a process to review complaints submitted against the organization with respect to a test your organization offers or the process for obtaining a license or certificate required for vocations or professions. Note: U. S. Department of Veterans Affairs recognizes that “promptly” varies because of a variety of circumstances. The review process does not necessarily have to be in writing.
- \* Your organization will furnish U. S. Department of Veterans Affairs the details of individual tests upon request including personal identifying information, fee payment, and test results. Such information shall be furnished in the form prescribed by U. S. Department of Veterans Affairs and may include submission by paper, email or other electronic means. Note: U. S. Department of Veterans Affairs may ask you to verify test data about particular individuals as claims are received. If your organization requires the individual to authorize release of this data, U. S. Department of Veterans Affairs will obtain such authorization.

Go to PreviousSave and Continue



# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Required Attachments

To attach the required documentation, the Facility must click “Browse” to select the file and then select Upload File. Once all the attachments are uploaded, click "Save and Continue" to proceed

The screenshot shows a web interface titled "Required Attachments". At the top, a light blue banner contains the text: "Please note that all fields marked with an asterisk (\*) are required." Below this, a note states: "Note: To upload the required attachment, you must choose a file to upload and then select Upload File button." There are two main sections for attachments. The first section is for "Attach form VA-8794 Designation of Certifying Officials", featuring a "Choose File" button (with "No file chosen" text), a "Download VA Form 22-8794 Template" link, and an "Upload File" button. The second section is for "Attach form VA 22-8206 Veterans Administration Statement of Assurance of Compliance with Equal Opportunity Laws", also featuring a "Choose File" button (with "No file chosen" text), a "Download VA Form 22-8206 Template" link, and an "Upload File" button. At the bottom of the page, there are two buttons: "Go to Previous" and "Save and Continue".

## Review and Submit

The Facility can review the application prior to submitting to State Approving Agency. User can make changes by clicking “Edit” for each section to jump back to the page and update/correct information.”

Facility User can save part of the application and come back to finish at a later time. The application is only valid for 30 days. At such time, the application will be deleted, and a new application must be started by the Facility User.

The screenshot shows a web interface titled "Review and Submit Application". A pink banner at the top contains the text: "The submission process will not be complete until you are done adding all required information." Below this, the facility name "RXB IHL Facility" is displayed, followed by the phone number "(111) 111-1111 x1111". The "Facility Type" is listed as "Institute of Higher Learning (IHL)". There are two columns of address information: "Physical Address" (201 N Washington, Lansing, MI 48323) and "Mailing Address" (201 N Washington, Lansing, MI 48323). At the bottom center, there is an "Edit" button.

When the application is complete, select the checkbox to certify the information is true and correct in content and policy, then click "Submit."

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

I certify that the information in Section I, II, and III are true and correct in content and policy and represent the school's requirements for academic progress and graduation, and further certify that applicant institution agrees to comply with the above stated requirements \*

Submit

Your application will be submitted for review. For your records you will receive your Facility Application ID, Status and Submission Date. At this screen, you can print or save a PDF of your submitted application.

### Review and Submit Application

Your application has been submitted for review. Your Facility Application ID: 2390 Status: Submitted Submission Date: 9/21/2019 10:21:30 PM

Print PDF

### Facility Dashboard

After logging in with your facility credentials, you will be directed to the Facility Dashboard.

The Facility Dashboard will indicate the start date of your application and the number of days remaining to complete the application. Click "Continue Application" to continue working on the application. To remove your application, click "Delete Application."

### Facility Dashboard

RXB LACAS Facility - Lansing

Application Start Date: 9/21/2019 10:34:15 PM

You have **29** days to complete the application from Start Date.

Continue Application

Delete Application

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Apprenticeship

### Facility Identification

Enter Facility Name and select Facility Type for the drop-down list. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

**Name of Facility \***

**Facility Type \***

### Physical Address

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Mailing Address

Is Mailing Address Same As Physical Address?

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Other

**Facility Website**

**Facility Phone \***

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Apprenticeship Programs

Complete all applicable fields (to include those marked as (\*)) and click "Save and Continue" to proceed.

### Apprenticeship Program

Please note that all fields marked with an asterisk (\*) are required.

Apprenticeship Job Title \*

Length of Program (Hours) \*

Hours of Related Training Instruction (RTI) required each year.

Provide the total number of RTI hours to be performed \*

Beginning hourly wage for trainees? \*

What is the current Journeyman's hourly wage? \*

Is the RTI in addition to the total program hours? \*

Yes  No

Is the Trainee paid for the hours spent on RTI? \*

Yes  No

Upload Standards \*

Upload VA 22-8865 \*

[Download VA-22-8865 Form Template](#)

Upload current wage rates

Add Program

Cancel

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Assurances

The Facility must have established business practices in place, and agree with, all assurances by checking the checkboxes. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Assurances

Please note that all fields marked with an asterisk (\*) are required.

- \* The facility will maintain a written record of previous education and training of the veteran or eligible person. The record will clearly indicate that appropriate credit has been given by the institution for previous education and training and their training program was shortened proportionately.
- \* The facility does not utilize advertising of any type which is erroneous or misleading either by actual statement, omission, or intimation. A file of all advertising will be maintained for the previous 12 months.  
  
 \* Has the facility ever received a cease and desist order from the Federal Trade Commission?  
 Yes  No
- \* Upon request, your organization will make all appropriate records pertaining to the veterans under Title 38, United State Code available for examination by the U.S. Department of Veterans Affairs or its representative.

Go to PreviousSave and Continue

## Required Attachments

To attach the required documentation, the Facility must click “Browse” to select the file and then select Upload File. Once all the attachments are upload, click “Save and Continue” to proceed.

### Required Attachments

Please note that all fields marked with an asterisk (\*) are required.

**Note: To upload the required attachment, you must choose a file to upload and then select Upload File button.**

\* VA 22-8794 Designation of Certifying Officials.

No file chosen

Upload File

[Download VA Form 22-8794 Template](#)

Go to PreviousSave and Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## On-The-Job Training (OJT)

### Facility Identification

Enter Facility Name and select Facility Type for the drop-down list. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

<p><b>Name of Facility *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Facility Name"/>	<p><b>Facility Type *</b></p> <div style="border: 1px solid #ccc; padding: 5px; display: flex; justify-content: space-between;"><span>Select Facility Type</span><span>▼</span></div>
---	---

### Physical Address

<p><b>Address Line 1 *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 1"/>	<p><b>Address Line 2</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 2"/>	
<p><b>City *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter City"/>	<p><b>State *</b></p> <div style="border: 1px solid #ccc; padding: 5px; display: flex; justify-content: space-between;"><span>Michigan</span><span>▼</span></div>	<p><b>Zip Code *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Zip Code"/>

### Mailing Address

Is Mailing Address Same As Physical Address?

<p><b>Address Line 1 *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 1"/>	<p><b>Address Line 2</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Address 2"/>	
<p><b>City *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter City"/>	<p><b>State *</b></p> <div style="border: 1px solid #ccc; padding: 5px; display: flex; justify-content: space-between;"><span>Select State</span><span>▼</span></div>	<p><b>Zip Code *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Zip Code"/>

### Other

<p><b>Facility Website</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter a Website URL"/>	<p><b>Facility Phone *</b></p> <input style="width: 95%; border: 1px solid #ccc; padding: 5px;" type="text" value="Enter Phone Number"/>
---	--

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Additional Information

For Facility Additional Information complete required fields. Select the Type of Institution and click “Save And Continue” to proceed.

### Facility Additional Information

Please note that all fields marked with an asterisk (\*) are required.

**Address Where Veterans Records Training Records Will be Kept is Same As Physical Address**

<b>Address Line 1 *</b> <input style="width: 95%; height: 25px;" type="text"/>	<b>Address Line 2</b> <input style="width: 95%; height: 25px;" type="text"/>	
<b>City *</b> <input style="width: 95%; height: 25px;" type="text"/>	<b>State *</b> <input style="width: 95%; height: 25px;" type="text" value="Michigan"/>	<b>Zip Code *</b> <input style="width: 95%; height: 25px;" type="text"/>

### Veteran Record Contact

**Name of Person Responsible for Training Records if different than yourself**

<b>First Name *</b> <input style="width: 95%; height: 25px;" type="text"/>	<b>Middle Initial</b> <input style="width: 95%; height: 25px;" type="text"/>	<b>Last Name *</b> <input style="width: 95%; height: 25px;" type="text"/>
<b>Title</b> <input style="width: 95%; height: 25px;" type="text"/>	<b>Phone Number *</b> <input style="width: 95%; height: 25px;" type="text"/>	<b>Email Address *</b> <input style="width: 95%; height: 25px;" type="text"/>

### Other Information

**Is This Facility a Federal, State or Local Government Agency ? \***

Yes  No

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### Programs

Add individual programs by selecting Add “New Program.”

### Programs

On-the-Job Training programs must meet the following criteria -

- Training program has defined task groups and approximate training hours for each group,
- Training program is between 6 and 24 months, and
- A Certificate of Completion is offered at the end of the training.

[Add New Program](#)

There are no Programs added yet.

[Go to Previous](#)    [Save And Continue](#)

Complete all required fields marked as (\*) and click “Save and Continue” to proceed.



## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### On-The-Job Training(OJT) Program

Please note that all fields marked with an asterisk (\*) are required.

\* Name of OJT Program for which Veteran is to be trained

OJT PROGRAM

\* Length of training period in Months

12

\* Length of training period in Hours

2080

\* Standard number of hours for the trainee work week

40

Related Training Instruction (RTI) is not necessary for the overall SAA program/approval; however, if RTI is not written into the OJT program, the trainee must have access to learning/training manuals/books or reference materials on the trade or skill to be mastered.

\* Is RTI required for the OJT program?

Yes  No

\* Enter total number of RTI hours to be performed

100

\* Are RTI hours in addition to the total length of the program hours indicated above?

Yes

\* Is the trainee paid for the hours spent on RTI?

Yes

If applicable, attach training curriculum/syllabi (i.e. FTO Manual, etc.)

Certificate of Achievement.docx

Add Program and Continue

Cancel

### Facility Dashboard

Facility User can save part of the application and come back to finish. Facility will have 30 days to complete the application and submit. At such time, the application will be deleted, and a new application must be started.

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Dashboard

### ON THE JOB FACILITY - LANSING

Application Start Date: 9/22/2019 3:51:53 PM

You have **29** days to complete the application from Start Date.

[Continue Application](#)

[Delete Application](#)

## Programs

Edit button displays the program details and allows the User to edit the necessary program details. Click “Save and Continue” to proceed.

## Programs

On-the-Job Training programs must meet the following criteria -

- Training program has defined task groups and approximate training hours for each group,
- Training program is between 6 and 24 months, and
- A Certificate of Completion is offered at the end of the training.

[Add New Program](#)

**Note: Programs highlighted below are incomplete or missing some required information.**

Name	Length in Hours	Length in Months	Work week Standard Hours	Is RTI Required?	Tasks/Wage Schedule	Actions
OJT PROGRAM	1800	18	40	Yes	<a href="#">View</a>	<a href="#">Edit</a>   <a href="#">Delete</a>

[Go to Previous](#)

[Save And Continue](#)

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Task and Wage Schedule

For each Program, the tasks and wage schedule must be defined. After adding each task, click “Add Task.”

### Tasks and Wage Schedule

Please note that all fields marked with an asterisk (\*) are required.

Job Task(s) in which Trainee will receive instructions or will be trained  
Identify task(s) to be mastered with hours per task

**Note:** The sum of all tasks hours must be equal to 2080 (length of training period in hours) for the program to be approvable.

**No tasks added**

<p>* Task Name</p> <input type="text"/>	<p>* Task Hours</p> <input type="text"/>
<p>* Task Description</p> <div style="border: 1px solid #ccc; height: 100px; width: 100%;"></div>	

## List of Tasks for each OJT Program

A list is generated for the tasks entered, to remove a task click “Delete.”

Task Name	Task Hours	Task Description	Delete
Task 1	1080	Task1	<a href="#">Delete</a>
Task2	200	Task2	<a href="#">Delete</a>
Task 3	400	Task 4	<a href="#">Delete</a>

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Wage Schedule for the OJT Program

Complete all required fields marked as (\*) and click “Save Wage Schedule” to proceed.

### Wage Schedule

The OJT program must show a minimum of one wage rate increment/step during the training period.

\* Beginning Wage (The beginning wage for the trainee may not be less than 50% of the wages paid to a fully trained employee)

\* First Wage Increment (Enter the month of training of which the trainee will receive a scheduled wage increment)

\* First Wage Increment Amount (Enter the hourly wage amount)

Add Next Wage Increment

\* Hourly Wage for the Last Month of Training (This wage must be at least 85% of the Finish Wage)

\* Hourly Finish Wage (This is the wage of the trainee when the OJT has been completed)

Save Wage Schedule

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Assurances

The Facility must have established business practices in place, and agree with, all assurances by checking the checkboxes. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Assurances

Please note that all fields marked with an asterisk (\*) are required.

- \* The selection of trainees will be made on the basis of qualifications alone and without regard to race, color, creed, national origin, sex or occupationally irrelevant physical requirements.
- \* The facility will maintain a written record of previous education and training of the veteran or eligible person. The record will clearly indicate that appropriate credit has been given by the institution for previous education and training and their training program was shortened proportionately.
- \* Adequate records will be kept to show the progress that is made by each veteran towards the veteran's job objective. In addition, records of work experience, wages and attendance on the job will be available to properly designated representatives of the SAA and the U.S. Department of Veterans Affairs (VA) for routine inspection.
- \* Wages to be paid the veteran upon entrance into training are not less than wages paid to non-veterans in the same training position. Training wages are at least 50% of the wages paid for the job for which the veteran is to be trained. The training wages will be increased in the identified increments prior to the last full month of the scheduled training period at which time the wages will be at least 85% of the wages paid for the job for which the veteran is being trained.
- \* There is reasonable certainty that the job for which the veteran is to be trained will be available to the veteran at the end of the training period.
- \* The training program is available to both veterans and non-veterans training from basic to advance skill levels.
- \* The objective of the training program is for the progression and appointment to the next higher classification based upon skills learned through organized (and supervised) on-the-job training and not through such factors as length of service and normal turnover.
- \* That the training content of the course is adequate to qualify the veteran for appointment to the job for which veteran is to be trained.

Go to PreviousSave and Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Required Attachments

To attach the required documentation, the Facility must click “Browse” to select the file and then select Upload File. Once all the attachments are upload, click “Save and Continue” to proceed.

### Required Attachments

Please note that all fields marked with an asterisk (\*) are required.

**Note: To upload the required attachment, you must choose a file to upload and then select Upload File button.**

**\* Designation of Certifying Official(s) VA Form 22-8794 is completed, signed and dated**

No file selected.

Upload File

[Download VA Form 22-8794 Template](#)

**\* Veterans Administration Statement of Assurance of Compliance with Equal Opportunity Laws VA Form 20-8206 is completed, signed and dated**

No file selected.

Upload File

[Download VA Form 22-8206 Template](#)

**\* Example of 'Certificate of Completion' to be awarded upon the completion of OJT**

No file selected.

Upload File

Go to Previous

Save and Continue

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## High School Facility

### Facility Identification

Enter Facility Name and select Facility Type for the drop-down list. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Facility Identification

Please note that all fields marked with an asterisk (\*) are required.

**Name of Facility \***

**Facility Type \***

### Physical Address

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Mailing Address

Is Mailing Address Same As Physical Address?

**Address Line 1 \***

**Address Line 2**

**City \***

**State \***

**Zip Code \***

### Other

**Facility Website**

**Facility Phone \***

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Additional Information

For Facility Additional Information complete required fields. Select the Type of Institution and click “Save And Continue” to proceed.

### Facility Additional Information

**Please note that all fields marked with an asterisk (\*) are required.**

**Type of Institution \***  
 Public  Private

**Name of School District where high school is located**

Enter Name of School District

Go to Previous

Save And Continue

For Private Institutions, indicate if facility is licensed through the State of Michigan to provide K – 12 curriculum and click “Save And Continue” to proceed.

### Facility Additional Information

**Please note that all fields marked with an asterisk (\*) are required.**

**Type of Institution \***  
 Public  Private

**Facility is licensed through the State of Michigan to provide K – 12 curriculum? \***  
 Yes  No

**Name of School District where high school is located**

Enter Name of School District

Go to Previous

Save And Continue



## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

For Public Institutions, indicate whether your School/Facility is Accredited and click “Save And Continue” to proceed.

### Facility Additional Information

Please note that all fields marked with an asterisk (\*) are required.

**Type of Institution \***  
 Public  Private

**Please indicate whether your School/Facility is Accredited \***  
 Accredited  Non-Accredited

**Name of School District where high school is located**

[Go to Previous](#)[Save And Continue](#)

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Facility Publications

Catalog(s) and bulletin(s) are required to be submitted individually. Enter required information about a publication, then attach file by clicking “Browse” and selecting the Publication File to upload.

Next click “Download True in Content Policy Statement Template.” This policy must be completed, signed and saved. Click “Browse” under “Attach True in Content Policy Statement file,” select the correct file and upload. Click “Add Publication” upon completion.

Once all publications have been added, click “Save and Continue” to proceed or “Go to Previous” to return to the last section. At this point, you can repeat the process to enter additional publications.

### Facility Publications

Please note that all fields marked with an asterisk (\*) are required.

List all catalog(s) and bulletin(s) submitted with this application. Attach a completed and signed certification “True in Content and Policy” statement for all catalogs and supplements i.e. Student Handbook; Class Schedules etc. submitted to support a response to any questions in any section of this application.

<b>Name of Publication *</b>	<b>Volume Number/ Identifier</b>	
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	
<b>Date of Publication *</b>	<b>Effective Start Date *</b>	<b>Effective End Date *</b>
<input style="width: 95%; height: 25px;" type="text" value="click to select date"/>	<input style="width: 95%; height: 25px;" type="text" value="click to select date"/>	<input style="width: 95%; height: 25px;" type="text" value="click to select date"/>
<b>Attach Publication File *</b>	<b>Attach True in Content Policy Statement file *</b>	
<input style="width: 95%; height: 25px;" type="text" value="Browse... No file selected."/>	<input style="width: 95%; height: 25px;" type="text" value="Browse... No file selected."/>	

[Download True in Content Policy Statement Template](#)

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## High School Program Section

Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

Note: Only one program can be added for the High School Facility.

### High School Program Section

Please note that all fields marked with an asterisk (\*) are required.

School is seeking approval of regular high school curriculum:  Yes

Name of Program

High School Completion

Professional Objective

Diploma

Date First Offered \*

Total Length of Program (Clock Hours) \*

### Class Schedules

Please provide weekly class schedules you desire approved.

Class Hours Per Day							Length of Break Per Day	Length of Lunch Per Day	Total Hours Per Week
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday			
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Go to Previous

Save And Continue

## Michigan State Approving Agency (SAA) Application Guide – Facility Portal

### Assurances

The Facility must agree to all assurances by checking the checkboxes. Complete all required fields marked as (\*) and click “Save and Continue” to proceed.

### Assurances

Please note that all fields marked with an asterisk (\*) are required.

- \* The facility will maintain a written record of previous education and training of the veteran or eligible person. The record will clearly indicate that appropriate credit has been given by the institution for previous education and training and their training program was shortened proportionately.
  
- \* The facility assures that it does not utilize advertising of any type which is erroneous or misleading either by actual statement, omission, or intimation. A file of all advertising will be maintained for the previous 12 months.  
  
  - \* Has your facility ever received a cease and desist order from the Federal Trade Commission?  
 Yes  No
  
- \* The facility assures that it will notify the State Approving Agency of all changes affecting approval.
  
- \* Upon request, your organization will make all appropriate records pertaining to the veterans under Title 38, United State Code available for examination by the U.S. Department of Veterans Affairs or its representative.

# Michigan State Approving Agency (SAA) Application Guide – Facility Portal

## Required Attachments

To attach the required documentation, the Facility must click “Browse” to select the file and then select Upload File. Once all the attachments are upload, click “Save and Continue” to proceed.

### Required Attachments

Please note that all fields marked with an asterisk (\*) are required.

**Note:** To upload the required attachment, you must choose a file to upload and then select Upload File button.

**\* VA Form 22-8794 Designation of Certifying Official(s).**

No file chosen

Upload File

[Download VA Form 22-8794 Template](#)

**\* VA Form 22-8206 Statement of Assurance of Compliance with Equal Opportunity Laws.**

No file chosen

Upload File

[Download VA Form 22-8206 Template](#)

**\* Attach State License from the State Department of Education.**

No file chosen

Upload File

**\* Attach Certificate or Diploma received by eligible persons who complete the program.**

No file chosen

Upload File

Go to Previous

Save and Continue