

South Carolina Department of Transportation

DISADVANTAGED BUSINESS ENTERPRISE (DBE) TRAINING TUITION ASSISTANCE PROGRAM

THE LANGUAGE USED IN THIS DOCUMENT DOES NOT CREATE A CONTRACT BETWEEN THE FIRM AND THE AGENCY. THIS DOCUMENT DOES NOT CREATE ANY CONTRACTUAL RIGHTS OR ENTITLEMENTS. THE AGENCY RESERVES THE RIGHT TO REVISE THE CONTENT OF THIS DOCUMENT, IN WHOLE OR IN PART. NO PROMISES OR ASSURANCES, WHETHER WRITTEN OR ORAL, WHICH ARE CONTRARY TO OR INCONSISTENT WITH THE TERMS OF THIS PARAGRAPH CREATE ANY CONTRACT.

BACKGROUND

The South Carolina Department of Transportation's Office of Business Development and Special Programs is committed to providing training and supportive services, to include tuition assistance to enhance the business and workforce development of qualifying Disadvantaged Business Enterprises (DBEs). This initiative is being implemented in conjunction with the Business Opportunity and Workforce Development (BOWD) Program.

PURPOSE

The DBE "Training Tuition Assistance Program" (TTA) is designed for eligible South Carolina DBE firms by providing financial assistance for training with the intent of developing the educational skill levels of employees, improving job-related or career-related capabilities, thereby, enhancing the firm's capacity. Areas qualifying for training assistance include, but are not limited to, technical and management development programs, seminars and certifications.

PROGRAM COMPONENTS:

- ❖ **Tuition assistance will be made in the form of reimbursement.**
- ❖ Only an SCDOT DBE certified firm in good-standing, who has been on the Department's Unified Certification Program Directory list for a **minimum** of two (2) years, is eligible for consideration.
- ❖ Only "key" employees of the DBE firm will be approved for participation. A "key" employee is someone in a position whose decisions directly impact the day-to-day operations of the business.
- ❖ Firm must have attended **at least** two (2) SCDOT sponsored training events within the last two (2) years.
- ❖ Requested assistance must be directly related to training, which will enhance a firm's business skills allowing the firm to compete more successfully in the highway transportation industry.

PROGRAM COMPONENTS continued:

- ❖ Requests for assistance must be made on the “DBE Training Tuition Assistance Request & Reimbursement Approval Form” (TTA-1). Assistance approval must be received, in writing, from the TTA Program Manager prior to attendance.
- ❖ Failure to receive proper approval prior to attendance will result in denial of the request for assistance. Request forms should be received at least thirty (30) days prior to the start of training. The TTA Program Manager will notify the firm, in writing, of approval or denial of the request.
- ❖ Request denials do not prohibit a firm from attending training. However, the denial does mean the Department will not provide the firm with financial assistance on the specific request.
- ❖ When evaluating requests for assistance, consideration will be given based on the adherence to the stipulated request process; the firm’s program eligibility; the purpose of training and the benefit of the training to enhance the firm’s business skills in the highway transportation industry.
- ❖ Assistance is limited to the availability of funds.
- ❖ An eligible DBE firm may be provided approved assistance up to \$1,500 per year. ***(Based on the availability of funds, this amount is not guaranteed and may be subject to change.)***
- ❖ Prior to the issuance of reimbursement, the firm must submit, for each participant, a completed “Reimbursement Attendance Acknowledgement Form” (TTA-2) signed by the trainer, along with a copy of the completed training sponsor’s registration form and a copy of the paid invoice. To expedite processing, forms should be returned to the TTA Program Manager within five (5) working days of completion of training.
 1. Failure to provide the completed “Reimbursement Attendance Acknowledgement Form”, TTA-2, and stipulated attachments within fifteen (15) calendar days of completion of training will result in the forfeiture of reimbursement. Failure to attend or satisfactorily complete training approved for reimbursement will result in forfeiture of reimbursement and in disqualification for future training tuition assistance for the DBE firm.
 2. Trainer’s signature may be subject to verification.
- ❖ Denial of tuition assistance is at the final discretion of the Department.

PLEASE SEND ALL CORRESPONDENCE TO:

South Carolina Department of Transportation
Office of Business Development & Special Programs
PO Box 191
Columbia, South Carolina 29202
ATT: TTA Program Manager

**SCDOT DBE TRAINING TUITION ASSISTANCE REQUEST & REIMBURSEMENT
APPROVAL FORM**

{PLEASE TYPE OR PRINT}

COMPANY NAME: _____

COMPANY ADDRESS: _____

COMPANY MAILING ADDRESS, IF DIFFERENT: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

ORIGINAL SCDOT CERTIFICATION DATE: _____ LAST CERTIFICATION RENEWAL DATE: _____

MY FIRM HAS ATTENDED THE FOLLOWING SCDOT SPONSORED TRAINING EVENTS DURING THE LAST TWO (2) YEARS:

Event/Training & Date: _____

Event/Training & Date: _____

Event/Training & Date: _____

REIMBURSEMENT REQUESTED FOR:

NAME & TITLE : _____

TITLE OF PROGRAM (*attach announcement/registration form*): _____

TRAINER: _____ TRAINING LOCATION: _____

COST OF TRAINING: \$ _____ AMOUNT REQUESTED: \$ _____

{PLEASE PROVIDE A BRIEF SUMMARY OF TRAINING AND HOW IT WILL ENHANCE YOUR FIRM'S/EMPLOYEE'S BUSINESS SKILLS. You may attach additional pages, if necessary.}

I understand that reimbursement is contingent upon prior written approval, attendance/satisfactory completion of the above mentioned program and my compliance with the attendance acknowledgement procedure. My failure to adhere to the stipulated guidelines will result in my ineligibility of reimbursement and jeopardize my eligibility for future training tuition assistance. I understand that denial of assistance is at the final discretion of the SCDOT.

Signature

Date

RECOMMENDED NOT RECOMMENDED _____ DATE: _____

(TTA Program Manager)

DIRECTOR, Office of Business Development & Special Programs _____

DATE: _____

APPROVED DENIED _____

(TTA-1)

**DBE TRAINING TUITION ASSISTANCE
"REIMBURSEMENT"
ATTENDANCE ACKNOWLEDGEMENT FORM**

{ PLEASE TYPE OR PRINT }

PARTICIPANT'S NAME: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

COMPANY MAILING ADDRESS, IF DIFFERENT: _____

TELEPHONE NUMBER: _____ FAX NUMBER: _____

E-MAIL ADDRESS: _____ FEIN#: _____

TITLE OF TRAINING: _____

DATE(S) OF TRAINING: _____

{ CHECK ONE OF THE BELOW }:

_____ I certify that I DID attend the above training program as requested on the attached "SCDOT DBE TRAINING TUITION ASSISTANCE REQUEST & REIMBURSEMENT APPROVAL FORM". I have attached a completed copy of the training sponsor's registration form, a copy of the paid invoice. I have obtained the trainer's attendance verification signature.



_____ I CERTIFY THAT I DID NOT ATTEND/SATISFACTORILY COMPLETE THE ABOVE TRAINING PROGRAM FOR THE FOLLOWING REASON(S):

I understand requests for reimbursement are contingent upon prior approval, attendance/ satisfactory completion of the above mentioned program and my compliance with the "Attendance Acknowledgement Form" procedure. My failure to adhere to the stipulated guidelines will result in my ineligibility of reimbursement, and jeopardize my eligibility for future training tuition assistance. I understand that the "Trainer's Signature" is subject to verification. I understand that denial of assistance is at the final discretion of the Department.

PARTICIPANT'S SIGNATURE

DATE

NOTE: PLEASE RETURN THIS FORM TO:

South Carolina Department of Transportation
Office of Business Development & Special Programs
PO Box 191
Columbia, South Carolina 29201
Att: TTA Program Manager