Incumbent Worker Training Program

Incumbent Worker Training Program (IWTP)
- Customized Training -

Training Provider Instructions for Invoicing:
Revised: 03/18/2010

Note: Invoices must be completed by Primary Training Providers requesting reimbursement of expenditures for IWTP contracts. No expenditures can be reimbursed by the Louisiana Workforce Commission (LWC) prior to the approval of the LWC Contracts Unit. Only funds spent on the project after the contract start date will be considered eligible for reimbursement. Travel expenses reimbursed through this contract must comply with State Travel Regulations, PPM 49. LWC reserves the right to withhold payments for costs that did not occur as scheduled in the IWTP contract/application or did not receive appropriate prior written approval per the terms and conditions of the IWTP Contract. Proper support documentation is required (Reference Item #13).

A) The Primary Training Provider must Log-in to the IWTP Customized Training Web site @ http://www.laworks.net/qm_cet.asp
B) The Primary Training Provider may then be prompted with a notification of entering a ‘secured site’ and should respond affirmatively.

C) At the Customized Training Log-in screen the Primary Training Provider is presented with the following options:
   1. If the Primary Training Provider is an existing user, he will enter his username and password.
   2. If the Primary Training Provider is a new user, he will click on the ‘New user?’ link.
   3. If the Primary Training Provider is an existing user and has forgotten his username, he will click on the ‘Forgot Username?’ link.
   4. If the Primary Training Provider is an existing user and has forgotten his password, he will enter his username and click on the ‘Forgot Password?’ link.
   5. If the Primary Training Provider is an existing user and would like to change his password, he will enter his username and password and click on the ‘Password Maintenance’ link.

New User Account Creation
The Primary Training Provider will be asked if the account will be for a training provider, an employer or a consortium. The Primary Training Provider will then select a username and password, create a secret question and answer to be used for password retrieval should the password be forgotten, provide their first and last names, and their LWC Training Provider number. The username must be at least six characters long. The password must be at least six characters long, and have at least one number, one uppercase letter and one lowercase letter.

Upon validation of username and password, the Primary Training Provider will select:

   a. Select an Application/Contract below (or Enter Case # below)

Selecting an existing application or contract directs the Primary Training Provider to the Customized Training Main Menu.

The IWTP Customized Training Main Menu will consist of the following options:

A. Employer Maintenance
B. Primary Training Provider Maintenance
C. Display Current Status & View Details
D. Quarterly Report Menu
E. Customer Satisfaction Report
F. Amendment Request
G. Revision Request
H. Invoice
I. Scope of Training
J. Current Summary of Line Item Costs
K. View/Print Entire Application
L. Select Another Application/Contract

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Option A: Employer Maintenance (Allows employers to edit his/their information)

Option B: Primary Training Provider Maintenance (Allows primary training provider to edit his information.)

Option C: Display Current Status & View Details (Tracks status of application)

Option D: Quarterly Report Menu (Allows entry of Quarterly Report by Training Provider)

Option E: Customer Satisfaction Menu (Allows entry of Customer Satisfaction Report by Employer)

Option F: Amendment Request (Allows entry of an Amendment Request)

Option G: Revision Request (Allows entry of Revision Requests)

Option H: Invoice

Note: Log-Off is located in the upper right hand corner of the screen(s).

The Invoice Options will consist of items:

Item 1: Invoice Type – Click the appropriate circle in front of Regular, Final, Priority, or Credit Memo to choose the type of Invoice. Please note that a Priority Invoice is a second or subsequent Invoice that is submitted in the same calendar month. This type of Invoice would only generated by large equipment or materials purchases and requires a phone call for approval to the IWTP Supervisor as stated at the bottom of the on-line request. Please select Yes and then Submit for Authorization prior to making the phone call.

Item 2: Course Costs – Public: Enter amount expended in the box titled Expenditures Requested in the Cost Category for all Public cost per student, cost per course, and registration/assessment/testing fees. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.

Item 3: Course Costs – Private: Enter amount expended in the box titled Expenditures Requested in the Cost Category for all Private cost per student, cost per course, and registration/assessment/testing fees. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.

Item 4: Course Costs – Vendor: Enter amount expended in the box titled Expenditures Requested in the Cost Category for all Vendor cost per student, cost per course, and registration/assessment/testing fees. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.

Item 5: Materials and Supplies: Enter amount expended in the box titled Expenditures Requested for the Cost Category. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.

Item 6: Equipment/Furniture/Classroom Fixtures: Enter amount expended in the box titled Expenditures Requested for the Cost Category. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.

Item 7: Travel: Enter amount expended in the box titled Expenditures Requested for the Cost Category. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.
Item 8: Facility Rental: Enter amount expended in the box titled Expenditures Requested for the Cost Category. The amount entered must be the amount approved in the initial grant request or subsequent changes approved in writing by the LWC. The amount requested cannot exceed the amount in the Balance column.

Item 9: Total – Program Costs: Total of all Cost Category expenditures in Items 2 thru 8 above. This total will assist you in figuring your 10% Administrative Costs allowed for this request.

Item 10: Administrative Costs: Enter amount of requested reimbursement in the Expenditures Requested column. The amount requested cannot be higher than the amount in the Balance column. Administrative Costs amount entered cannot be greater than 10% of the Total – Program Cost in the Cumulative to Date Column after all expenditures have been entered.

Item 11: Grand Totals: Displays all Cost Category, Obligation, and Expenditure totals including those changes in this request.

Item 12: Save Invoice: Saves the current Invoice to be worked on at a later time.

Item 13: Submit Invoice: After clicking on Submit Invoice, the Supporting Documentation Verification will appear requiring acknowledgement of the supporting documentation requirements for each category that reimbursement has been requested. In order to finish submitting the Invoice you must acknowledge that you understand the required documentation for each category by selecting the circle next to the Yes answer in that column. Click the Print and Submit Invoice button. Print the Invoice. Sign the Invoice. Provide all the required supporting documentation and the signed Invoice and mail to IWTP.

Mail ORIGIINAL of the invoice and 1 COPY of each receipt to:

Incumbent Worker Training Program
1001 North 23rd Street
Post Office Box 94094
Baton Rouge, LA 70804-9094

If you have any questions, contact the IWTP Unit at (225) 342-8987 or at iwtp@lwc.la.gov.

Option I: Scope of Training (Displays Scope of Training)
Option J: Current Summary of Line Item Costs (Displays the Current Summary of Line Item Costs)
Option K: View/Print Entire Application (Displays/Prints Entire Application)
Option L: Select Another Application/Contract (Allows Training Provider to pick another application/contract)

...End of Instructions...