

SCPa Works Board-Approved Policies

SCPa Works houses board-approved policies at scpaworks.org. Each contracted vendor staff member within the SCPa Works service area is required to read, understand, and abide by all SCPa Works board-approved policies. This form should be maintained on record by the contracted vendor.

	POLICY NAME	REVIEWED
1	2026 Additional Assistance for Youth #P-14-6.22	
2	2026 Case Notes #P-34-11.23	
3	2026 Code of Conduct & Conflict of Interest #P-28-11.22	
4	2026 Customized Training #P-40-02.26	
5	2026 Digitization and Electronic Record Keeping #P-6-7.22	
6	2026 Eligibility and Enrollment #P-21-6.22	
7	2026 EO & Discrimination Complaint Policy #P-13-2.22	
8	2026 File Management #P-36-1.24	
9	2026 Financial Management Policy #P-30-11.22	
10	2026 General Procurement Policy #P-32-1.23	
11	2026 IEP-ISS #P-4-10.22	
12	2026 Incident of Fraud Reporting #P-9-7.22	
13	2026 Incumbent Worker Training #P-8-5.22	
14	2026 Individual Training Account (ITA) #P-17-2.22	
15	2026 Integrated Education and Training (IET) #P-39-10.25	
16	2026 On-the-Job Training (OJT) #P-15-2.22	
17	2026 Oversight-and-Monitoring #P-5-3.22	
18	2026 Paid Work Experience #P-16-5.22	
19	2026 Personally Identifiable Information (PII) #P-3-2.22	
20	2026 Priority of Service #P-1-11.22	
21	2026 Records Retention #P-37-10.24	
22	2026 Registered Apprenticeship Program #P-18-6.22	
23	2026 Risk Assessment #P-24-4.22	
24	2026 Secondary Review #P-2-7.22	
25	2026 Selective Service #P-19-10.22	
26	2026 Self Attestation #P-29-8.22	
27	2026 Self Sufficiency #P-23-4.23	
28	2026 Supportive Services #P-7A-1.22	
29	2026 Training Provider Grievance #P-10-6.22	
30	2026 Transitional Jobs #P-38-9.25	
31	2026 Youth Incentives and Stipends #P-7B-7.22	
32	2026 WIOA Title I Complaint and Grievance #P-11-10.22	

Statement of Receipt:

This signature page serves as the required record of SCPa Works policies communication and explanation.

I hereby certify that I have received, read and understand the board-approved policies for all programs provided within South Central Pennsylvania service region and acknowledge so with my signature below.

Staff Name: _____

Staff Signature: _____

Date: _____

SCPa Works 01.16.2026

SCPa Works is an equal-opportunity organization.

Auxiliary aids and services are available upon request to individuals with disabilities.