

WIOA Vocational Training School Questionnaire

Career Choice: _____

Name of School: _____

Person Contacted: _____ Phone #: _____

The next **three** start dates begin on: 1.) _____ 2.) _____ 3.) _____

And should graduate or complete by: 1.) _____ 2.) _____ 3.) _____

The Class Schedule is: _____

Days: _____ Hours: _____

The Total Cost of the training is: _____

Is Financial Aid offered? What type? _____

Is placement assistance provided? _____

I like this school because:

I *do not* like this school because: