



Program Name: _____

Related Technical Instruction (RTI):

List RTI Content: (Occ Skills Train, Workforce Prep, etc.)	RTI Contact Hrs
Total RTI Contact Hours	

Meaningful Hands-On Experience (OJT/OJL):

List Type of Experience: (Simulation, Lab, Paid, Volunteer)	Experience Hrs
Total Experience Hours	

Industry Recognized Certifications:

List Name of Certification:	Total Experience Hours

Articulation Agreement:

List RTI Content: (Occ Skills Train, Workforce Prep, etc.)	
Name of RAP Sponsor:	
RAP Program Name:	
Occupation:	
Point of Contact:	
Copy of Signed Agreement	