

# **Work-based Learning Handbook:**

## ***Understanding Registered Apprenticeship Programs and Other Workforce Development Strategies***



NATIONAL COUNCIL  
for **Mental Wellbeing**

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# How to Use This Guide

This handbook is primarily a tool for provider organizations planning to implement a registered apprenticeship program (RAP) or non-RAP work-based learning program (WBLP). However, if you are a non-provider hoping to partner with a provider organization to implement one of these programs, this handbook will provide helpful insight.

Given the many varying state-by-state and organization-by-organization complexities of WBLPs, this handbook is not a prescriptive, step-by-step guide to assessing your organization's workforce needs and developing a new program. Instead, it provides background information, resources and considerations around organizational supports (e.g., staff, resources, existing partnerships) and organizational goals (e.g., staffing, organizational planning, risk tolerance), to help you consider which types of WBLPs may be most beneficial and realistic, given your organization's needs and constraints. This handbook provides overviews and planning considerations around specific aspects of RAPs and non-RAP WBLPs: roles and partners, funding and budget considerations, recruitment and retention, and return on investment.



# Introduction

## *Addressing the mental health and substance use care and treatment workforce crisis: Not just more people*

Organizations making up the mental health and substance use (MH/SU) care and treatment workforce continue to feel the effects of the workforce crisis that was exacerbated by the COVID-19 pandemic and has grown to be a prominent public health issue. One survey suggests that 83% of MH/SU care and treatment workers are concerned that not enough new workers are entering the field (National Council for Mental Wellbeing, 2023).

However, the workforce crisis is more than a shortage of workers. Additionally, the MH/SU workforce remains predominantly white and female. In 2024, Black/African American workers and Hispanic/Latino workers only account for 7.9% each of the mental health workforce, while Asian American workers account for 3.1% (Zippia Careers, 2024).

Lack of diversity in the workforce has a direct impact on patient care. Members of minority groups are disproportionately impacted by experiences of discrimination and reduced access to social or economic resources. These disparities can result in stress and anxiety that are often aggravated by discrimination in diagnoses and difficulties accessing health care services that could help manage MH/SU conditions (Budhwani et al., 2015).

People want and need access to MH/SU care, but they also want care rooted in cultural humility, from providers who understand how their unique circumstances and identities are impacting their health. While conversations of diversity can often center on race, diversity goes far beyond just race to include other identities, such as gender identity, disability, sexual orientation, socioeconomic status, religion, language, and more. Research has shown that when people from minority communities are able to identify with their health care provider, they are more likely to trust their provider, better able to communicate their needs and concerns, more likely to understand and follow their treatment plan, and more satisfied with their care (Provo College, 2022).

In a survey by The Harris Poll for the National Council for Mental Wellbeing (2022):

- **13%** of U.S. adults surveyed by the Harris Poll reported that they did not obtain mental health care because they could not find a provider who was a good cultural fit.
- **17%** did not obtain substance use care because they could not find a provider who was a good cultural fit.
- **61%** feel there are not enough mental health care providers who are trained to address issues specific to race, ethnicity, sexual orientation or socioeconomic status.

One way to address gaps in treatment equity is by investing in training people from underrepresented groups to become providers. Providers that reflect the racial, ethnic, gender and/or social identities of the communities they serve may be more likely to understand the social determinants of health, cultures, barriers, strengths and resources affecting clients’ MH/SU care and treatment. As we seek solutions to the workforce crisis, doing so with a goal of creating more diverse representation in the field can contribute to more culturally sensitive and responsive care, meet demands for linguistic needs, reduce cultural stigmas surrounding mental health care, and encourage more people to seek the care they need.

## Overview of work-based learning programs

Work-based learning programs (WBLPs) are an emerging area of interest as we consider solutions to the workforce crisis that acknowledge both the pressing need for more people in the workforce and the need for workers from more diverse backgrounds. “WBLP” is an umbrella term that covers a variety of workforce solutions (e.g., internships, pathway programs) that allow individuals to gain experience, skills and knowledge of a field or trade through hands-on, practical education and work experience. Registered apprenticeship programs (RAPs), a specific type of program under the WBLP umbrella, provide paid on-the-job learning and instruction with oversight and structure from the U.S. Department of Labor (DOL). RAPs can be more formalized than other WBLPs because of DOL-mandated structure and requirements. (These will be discussed later in this handbook.) For organizations seeking established structure and guidelines, RAPs or more formalized WBLPs (e.g., programs with state oversight) can provide helpful frameworks for program development and implementation.

<b>Work-based Learning Programs</b> <i>Programs providing on-the-job training</i>	
<b>Registered Apprenticeship Programs (RAPs)</b>	<b>Non-RAP Work-based Learning Program (Non-RAP WBLP)</b>
<ul style="list-style-type: none"> <li>■ Registered with the Department of Labor</li> <li>■ Includes federally set standards, structure and requirements (e.g., progressive wage increases)</li> <li>■ Participants receive nationally recognized credential upon completion</li> </ul>	<ul style="list-style-type: none"> <li>■ On-the-job training program not registered with the Department of Labor</li> <li>■ Program standards and/or requirements will vary by state and specific program. No federally mandated standards</li> <li>■ Credentialing outcomes vary by program. May result in program or state-issued credential upon completion</li> </ul>

When structured thoughtfully, WBLPs have been found to benefit both employers and employees across a variety of industries (Cahill, 2016). While these programs are relatively new in the MH/SU care and treatment fields compared to, for example, trade careers, they offer promise as a potential way to address the MH/SU provider workforce crisis for several reasons:

- Pairing education with real-world experience prepares people for employment in ways that education alone cannot, helping to create a workforce that is well-versed in current and relevant issues and equipped with skills to address them.
- Currently, many jobs in the MH/SU field require higher education, such as bachelor's or master's degrees. Exploring nontraditional pathways to employment can help remove typical barriers to employment associated with obtaining higher education degrees and credentialing, such as prohibitively high cost, future debt burden and risks of predatory lending.
- Beyond increasing the number of people entering the workforce, WBLPs can help to increase the diversity among those entering the workforce by opening new pathways to employment for individuals who historically may not have the means and opportunities to join the workforce through “traditional” routes.

The [National Council for Mental Wellbeing](#) is a membership organization that drives policy and social change on behalf of more than 3,400 mental health and substance use care and treatment organizations and the more than 10 million children, adults and families they serve. We advocate for policies to ensure equitable access to high-quality services. We build the capacity of mental health and substance use care and treatment organizations. And we promote greater understanding of mental wellbeing as a core component of comprehensive health and health care.

## **National Council's Apprenticeship Program Capacity Building project**

In 2023, the National Council for Mental Wellbeing launched its Apprenticeship Program Capacity Building project. The focus of this initiative was to better understand WBLPs, including apprenticeships, and their relationship to the MH/SU care and treatment workforce crisis. The team started with an environmental scan to assess the landscape of apprenticeships in the MH/SU care and

treatment field. This included information from organizational websites that work with RAPs (e.g., [Jobs for the Future](#), [Apprenticeship USA](#), [Healthcare Career Advancement Program](#), [DOL](#)) and research to identify existing RAPs in the field. Following the environmental scan, the team conducted a survey and focus groups with National Council member organizations and other organizations in the MH/SU field.

The environmental scan, survey and focus groups highlighted a recurring theme: While there is interest in creative solutions to the workforce crisis, confusion around program availability and requirements can lead to hesitancy to invest resources in the development of new programs. (Detailed findings can be found in [The Landscape of Apprenticeship and Work-based Learning Programs: Initial Findings Report](#) [Colella et al., 2024].)

## Key findings:

- While RAPs are established in other fields, they are relatively new in health care settings, particularly in MH/SU care and treatment settings. In other fields, evidence has shown RAPs and other WBLPs positively impacting recruitment, retention and employee satisfaction.
- Many organizations are interested in learning more about RAPs and WBLPs and feel these programs could have promise for the field. They also feel there is a lack of information on how to assess whether these programs are feasible for their organizations.
- Barriers to launching a RAP include difficulties in the registration process, inadequate funding and lack of organizational capacity for long-term commitment to the demands and components of a RAP structure.
- Organizations implementing WBLPs (including RAPs) experienced resource constraints, including lack of staff to support the program through supervisory roles, program administration and applying for grants.



Findings revealed that a common initial barrier to establishing WBLPs (RAP and non-RAP) is a lack of accessible, centralized information about RAP implementation requirements (e.g., progressive wage increases, structure, involved parties). This handbook is designed to offer information about different types of WBLPs to help organizations determine how to best meet their needs, including formal RAPs and less standardized non-RAP WBLPs. Along with high-level descriptions of requirements, this handbook also contains information and insights gathered from organizations that have implemented work-based learning programs of various structures.

# Registered Apprenticeship Program and Work-based Learning Program Overview

## RAPs

RAPs are workforce training programs registered through the DOL that combine paid on-the-job learning with classroom instruction, providing both practical skills and theoretical knowledge that will set apprentices up for success in entering the workforce. Apprentices receive on-the-job training and supervision from an experienced mentor and follow the outlined, industry-vetted apprenticeship training plan to work toward full proficiency of skills. Supplemental educational instruction is determined by the program sponsor. This can be provided by any educational institution including colleges, universities, technical schools, union and non-union training programs.

Upon successfully completing the program and demonstrating proficiency in their occupation, apprentices receive a portable and nationally recognized credential from the DOL Office of Apprenticeship (the Certificate of Completion of Apprenticeship) to assist in their employability. Apprentices also take professional exams for licensures and certifications as a requirement for completion of the program

While RAPs have a more established history across other industries (e.g., trades), they have recently emerged in health care occupations. RAP standards have already been created for several occupations, including substance use disorder treatment professionals, licensed alcohol and drug addiction counselors, peer specialists and recovery support specialists. New occupations can be registered through the DOL's [Apprenticeship.gov](https://www.dol.gov/apprenticeship) website, which includes tools for [registering your program](#) as well as [creating standards](#) for the program that align with DOL requirements.

The U.S. Department of Health and Human Services' [Pathways to Work Evidence Clearing House](#) (n.d.) highlights many successful characteristics from other fields and interventions, including academic curriculum that is linked with workforce needs, career exposure and work, advisers to support participants, written agreements between employers and community partners, and supportive policies that make these programs possible. This US DPHHS initiative aims to support provider organizations in introducing these programs and their benefits to the MH/SU care and treatment field.

[See this article](#) from The Denver Post for information on Colorado's experience with embracing apprenticeship programs (Finley, 2022).





Regardless of the occupation, RAPs have required core components. For example:

- **Industry Led:** Programs are industry-vetted and approved to ensure alignment with industry standards and that apprentices are trained for highly skilled, high-demand occupations.
- **Paid Job:** Apprentices earn progressive wage as their skills and productivity increase.
- **Structured On-the-Job Learning/Mentorship:** Programs provide structured on-the-job training to prepare for a successful career, which includes instruction from an experienced mentor.
- **Supplemental Education:** Apprentices are provided supplemental classroom education based on the employer's unique training needs to ensure quality and success.
- **Diversity:** Programs are designed to reflect the communities in which they operate through strong nondiscrimination, anti-harassment and recruitment practices to ensure access, equity and inclusion.
- **Quality & Safety:** Apprentices are afforded worker protections while receiving rigorous training to equip them with the skills they need to succeed and the proper training and supervision they need to be safe.
- **Credentials:** Apprentices earn a portable, nationally recognized credential within their industry.
- RAPs can be competency-based or time-based however, all programs require completion of 2,000 hours of on-the-job learning regardless of program design.\*
  - » Competency-based programs use proficiency checklists to evaluate skills, whereas time-based programs require at least 2,000 hours of on-the-job learning.
  - » A hybrid RAP structure combines both types, featuring a range of hours and a proficiency list.

A full list of requirements can be found in the [Requirements for Apprenticeship Sponsors Reference Guide](#).\*

## Non-RAP WBLPs

Non-RAP WBLPs also provide opportunities for individuals to gain on-the-job training for a variety of occupations, in this case, in the MH/SU field. Because non-RAP WBLPs are not registered with the DOL or state apprenticeship agency, they can operate through many different organizations. Due to the variety among non-RAP WBLPs, requirements and standards will look different depending on the program. Some programs will follow state-mandated requirements that will result in candidates receiving a state-recognized credential upon completion of the program. Other programs will create their own requirements and make decisions about curriculum, partnerships, wages and credentialing based on their existing capacity in each area. This flexibility may be beneficial for organizations that do not have the resources or capacity to build and implement a RAP.

\* Note: In February 2024, the DOL released a proposed rule pushing for all registered apprenticeships to be time-based programs. However, as of the time of publication of this handbook, RAP programs can be competency-based, time-based or hybrid.

Outside of RAPs, WBLPs can include internship programs run by universities, work opportunities through a single organization, work opportunities through trade associations, or national programming such as AmeriCorps. Because each non-RAP WBLP has state-specific or program-specific criteria (depending on program structure and location), they are not subject to the same standardized federal requirements as RAPs. As a result, programs can look very different when compared to each other.

## **Non-RAP WBLP features:**

- Program requirements and structure vary between programs and states. Some programs may be subject to state reporting requirements, but non-RAP programs are not subject to federal apprenticeship reporting and standards.
  - » Each program may have requirements that depend upon partnerships or affiliations (e.g., AmeriCorps, alignment with Common Core standards).
  - » Decisions regarding wages or progressive wage increases are at the discretion of the organization.
- Not subject to federal apprenticeship wage rules (e.g., progressive wage increases).
- Often run through a university internship program.
- Credentials and/or certifications will vary from program to program. Credentials may vary from organization-specific up to state-recognized.
  - » Organizations can also work with their state workforce board to create new certifications or credentials to provide upon completion of the program. State-recognized credentials may provide the opportunity to benefit from reciprocity agreements with other states.

Creating and implementing a work-based learning program, whether RAP or non-RAP WBLP, requires organizational investments of resources including money, staff and staff time — and the availability of those resources will drive much of the conversation and decision-making when deciding between implementing a RAP versus a non-RAP program. However, it is also important to assess the ultimate goals of the program. Do not lose sight of organizational priorities and the ultimate “why” for exploring a WBLP, whether it be a RAP or non-RAP WBLP.

For example, if your organization most values flexibility and being able to create a program customized to your needs, RAPs may not be a good fit. Since RAPs must adhere to all DOL requirements, organizations cannot pick and choose components that best serve them. However, if your organization most values a program that will provide a standard, nationally recognized credential for candidates and provides preexisting structure and requirements, a RAP could be a better fit than a non-RAP WBLP.

## Types of Non-RAP WBLPs

The most common work-based learning formats are internships, transitional jobs, on-the-job-training and apprenticeships. Within the MH/SU care and treatment field, these can include internships, certification programs and other pathway programs.

Type of Program	Main Points
<b>Internships</b>	<ul style="list-style-type: none"> <li>■ Paid or unpaid.</li> <li>■ Tend to require minimum hours for completion.</li> <li>■ Usually bachelor's- or master's-level students.</li> </ul>
<b>Certification programs</b>	<ul style="list-style-type: none"> <li>■ Specialized education programs that conclude in a certification exam that declares a specific professional competency.</li> </ul>
<b>Pathway programs</b>	<ul style="list-style-type: none"> <li>■ Preparatory courses that help students build skills, knowledge and qualifications needed to enter a bachelor's or master's degree program.</li> </ul>
<b>AmeriCorps programs</b>	<ul style="list-style-type: none"> <li>■ Service-based pathway program.</li> <li>■ Unpaid, but modest living stipend provided.</li> <li>■ Additional relevant trainings may or may not be provided.</li> <li>■ Vastly different structure depending on the program (VISTA, NCCC, AmeriCorps State and National)</li> <li>■ Each type of program has a minimum hour requirement for the length of the program.</li> </ul> <p>Learn more about AmeriCorps programming at <a href="https://www.americorps.gov">AmeriCorps.gov</a>.</p>
<b>Transitional jobs</b>	<ul style="list-style-type: none"> <li>■ "... provides a time-limited work experience, that is wage-paid and subsidized, and is in the public, private, or non-profit sectors for those individuals with barriers to employment who are chronically unemployed or have inconsistent work history, as determined by the local workforce development board. These jobs are designed to enable an individual to establish a work history, demonstrate work success in an employee-employer relationship, and develop the skills that lead to unsubsidized employment" (Legal Information Institute, n.d.).</li> </ul>

# Roles and Partners

## RAP roles

When setting up a RAP, a key early step is to identify the roles of the individuals and organizations involved, as well as partnerships that are key to supporting its implementation and management. The following table details those individuals and entities.

To start, you will need to determine if your organization is best prepared to serve as a sponsor, intermediary or employer. An organization can serve in multiple roles if so equipped. If there are any questions regarding your organization's role and partnership opportunities, you can reach out to a state Office of Apprenticeship or State Apprenticeship Agency (SAA) (ApprenticeshipUSA, n.d.).

The DOL outlines the following roles for all RAP programs. Since the roles can overlap (e.g., intermediaries and partners can both help with recruitment efforts, or one organization may fulfill multiple roles), it may be helpful to approach planning by assessing role functions first, to determine if there are functional gaps that indicate a role may need to be filled by an outside organization.

RAP Role	Function	Function Lead
<b>Apprentice</b>	Engages in on-the-job learning and related technical instruction with steady wage increases. Receives a nationally recognized credential upon successful completion of the program.	Individual participating in a RAP to receive education, experience and credentialing.
<b>Sponsor</b>	Responsible for the administration, operation, design and execution of the apprenticeship program. This includes providing jobs to apprentices, overseeing training development and providing technical instruction.	Single employer, consortium of employers, industry association, labor-management association, community college or community-based organization.
<b>Employer</b>	Assists in program development and implementation and supports training process. Helps prioritize industry standards.	Single employer or consortium of employers that hosts apprentices and provides paid work experience.
<b>Intermediary</b>	Provides industry-specific expertise, supports administration of program and aggregates demand for apprentices.	Organization with the capacity and expertise to help the employer and/or sponsor create and launch the RAP.

RAP Role	Function	Function Lead
<b>Mentor</b>	Supports, advises and instructs apprentices on the job.	Individual within employer organization with the experience to provide on-the-job training.
<b>Partner</b>	Helps identify resources needed, design programs and recruit apprentices.	Business partners, public workforce systems, educational institutions and social services.

## The roles of the RAP vary depending on the organization’s capacity.

### **Example 1: Your organization is the employer, but not the sponsor.**

[The Healthcare Career Advancement Program \(H-CAP\)](#) is a national labor/management organization that promotes innovation and quality in health care career education.

Consider a scenario in which a community behavioral health organization (CBHO) is interested in launching a RAP for peer support specialists. This CBHO could partner with an organization such as the Healthcare Career Advancement Program (H-CAP). In this scenario, H-CAP would be the sponsor, because it has

expertise in supporting efforts to create standards and register RAPs, and the CBHO would be the employer because it would provide on-the-job training for the peer support specialist apprentices.

### **Example 2: Your organization is the employer and the sponsor.**

Consider a scenario in which the CBHO has the capacity to register and administer the program (sponsor), provide on-the-job training (employer), promote the program to employers and apprentices, coordinate partners and support implementation of the program (intermediary). This organization could partner with other organizations to provide educational instruction and other program support, while it serves as sponsor, employer and intermediary.

Jobs for the Future (JFF) has [created a tool](#) (Feldman, n.d.) that breaks down the distinction between the intermediary and sponsor role at each step of the implementation process.

[Jobs for the Future \(JFF\)](#) is a national nonprofit that drives transformation of the U.S. education and workforce systems to achieve equitable economic advancement for all.

<b>Function</b>	<b>Sponsor</b>	<b>Employer</b>	<b>Intermediary</b>
<i>Responsible for administration, operation, design and execution of apprenticeship program</i>	<b>X</b>		
<i>Responsible for development and maintenance of DOL-registered program standards</i>	<b>X</b>		
<i>Responsible for recruiting and hiring apprentices</i>		<b>X</b>	
<i>Responsible for providing on-the-job learning and mentorship</i>		<b>X</b>	
<i>Supports development and promotion of apprenticeship program</i>			<b>X</b>
<i>Supports coordination of partners for employers and apprentices</i>			<b>X</b>



## RAP partners

Once your organization has decided to take on the role of employer, sponsor or intermediary, the next step is to consider organizations or systems that could serve as partners to the RAP. Examples include a local university that offers degrees in social work or mental health counseling, local workforce systems that could support recruitment efforts, or other mental health and/or substance use care organizations that could support RAP implementation efforts. The sponsor and intermediary will collaborate to reach out to stakeholders that would be fit to partner in RAP design and implementation. Your organization can also use the [DOL Partner Finder](#) (ApprenticeshipUSA, n.d.-b) to begin looking for potential partners. As you identify partners, be sure to consider not just your organization's needs, but also which organizations are established and well-connected within your community.

Supervisor and program manager roles aren't specified through the RAP structure, but they're integral to running a successful program. To ensure the success of apprentices, an organization should designate a new or existing staff member as the program director or manager. In addition, an organization should be thoughtful about the program's supervision structure and responsibilities. Consider staffing structures and capacity that allow for successful supervision, prevent burnout among supervisors and program managers, and provide compensation for added responsibilities or tasks. In addition to formal supervision, mentorship is a valuable aspect of successful RAPs. Mentors are exclusively assigned to the success of one apprenticeship and could be peers, former apprentices, etc.

Careful selection of supervisors from underrepresented communities also ensures that apprentices work alongside experts who reflect both the communities in which they work and the backgrounds of the apprentices themselves. In particular, apprentices who are Black, Indigenous or people of color (BIPOC), LGBTQ+, gender nonconforming or otherwise identify with a minoritized group should have opportunities to spend some of their time with supervisors who share some of these characteristics and lived experience. Successful supervisors from minoritized groups may have overcome distinct life challenges such as discrimination or bias, and apprentices with shared backgrounds have been shown to gain valuable insight from these supervisors about less-discussed social and political dynamics in the field that could unfairly limit career growth.

Additionally, all supervisors and program managers should be enthusiastic about the career field, highlight job prospects for apprentices, have sufficient time and knowledge to provide high-quality learning experiences, and maintain an orientation of openness to bidirectional, shared learning that honors the preexisting strengths, knowledge and talents apprentices bring to the role.

# Funding

## RAP funding considerations

One of the first considerations of establishing a RAP is the budget required to implement and run a successful program; while beneficial over the long term, setting up a new program can be resource intensive.

Cost Area	Examples
<b>Recruitment</b>	Staff time for creating job postings, recruiting, interviewing.
<b>Onboarding</b>	Staff time for developing onboarding plans, meeting with new hires.
<b>Training/preceptor pay for mentors</b>	Potential for additional compensation if mentors/supervisors are taking on expanded job duties.
<b>Learning materials</b>	Review and/or creation of supplemental learning materials, organization-specific training materials.
<b>Shift in staff time from previous responsibilities to RAP support and administration</b>	Decreased bandwidth for staff to execute their previous job duties due to additional time dedicated to RAP program (e.g., mentors spending more time in supervision than direct client care).
<b>Hiring program coordinator if needed</b>	Additional staff or staff time for program monitoring, reporting (e.g., reporting to DOL on program requirements).

## Progressive wage increases

A unique aspect of RAPs is the progressive wage requirement. This requires employers to set wage schedules that increase based on skills acquired (for competency-based programs) or total on-the-job hours (for time-based programs). At minimum, each apprentice will have three increments of wages that increase over time including a starting wage, an intermediate wage once a milestone is reached, and an exit wage. The Urban Institute has developed an [example](#) of wage increases and information for competency-based or time-based schedules. This aspect of the RAP model benefits apprentices by ensuring fair wages; however, it also places a heavier financial burden on the organization as compared to organizations that have the option to not provide financial compensation or to include minimal financial compensation for their program. However, apprentices generally start below the wage of the fully qualified employee and then progress to meet the wage of a newly hired, fully qualified candidate.



The [Urban Institute](#) is a nonprofit organization that uses data and evidence to offer direction when addressing issues of discrimination, injustice and inequity.

Create clear guidelines on what education and experience are required to complete job responsibilities, and compensate staff based on those guidelines, to elevate the importance of experience alongside education. (For example, you might say, “X years of experience are considered equivalent to Y degree and will be

compensated similarly, as both equip the staff member to complete the required job functions at the same level of expertise.”) Doing so can underscore an organizational commitment to valuing on-the-job training and work experience, but it may be a shift in compensation philosophy and recruitment/hiring strategy for organizations that have typically favored candidates with higher educational attainment over candidates who may have less formal education but more years of experience.

Aligning your compensation philosophy with your organizational goals, and clearly communicating to all staff any changes and the underlying principles of how education and experience are compensated, will be essential to retaining staff from varying backgrounds. This will also help you think through how progressive wage increases for apprentices will compare to the wages for other staff and ensure equity across your compensation structure.

## Funding RAPs

There are many opportunities to acquire additional funding from outside sources to support your RAP budget. Here are a few examples:

- 1. DOL or other federal agencies** — See [Apprenticeship.gov](#) for open funding opportunities. The DOL provides grants and contracts to support apprenticeship expansion. Additional grants and contracts through other federal government agencies are listed on [Grants.gov](#) and [SAM.gov](#).
- 2. Large corporations and organizations in your local area** — Funding from corporate, state/local, family and other types of foundations and philanthropic organizations. This could also include organizations partnering with you in the RAP’s development.
- 3. Local universities and colleges** — Partnering educational institutions may have funds or grant opportunities, as well as work-study opportunities, to allocate to the RAP. Pell grants, GI bill funding and other funding sources associated with the FAFSA process are also available.
- 4. Workforce development board** — Each state has a workforce development board that can allocate funding to organizations creating or running a program, such as a RAP, that supports building up the workforce through training. Find information for your workforce development board at [CareerOneStop](#). The [Workforce Innovation and Opportunity Act](#) funding can help fund on-the-job training, supportive services and related training and instruction.
- 5. State and federal grants** — Each state has a Division of Apprentice Standards that can help you identify potential funding sources. Find information for your state apprenticeship office at [Apprenticeship.gov](#).

When identifying or comparing funding opportunities, you may want to consider how different types of funding will require different levels of reporting or support relationship management within your community (e.g., partnering with a local academic institution versus a federal grant).

## **Non-RAP WBLP funding considerations**

While non-RAP WBLPs are often less resource intensive to set up and run than RAPs, there are similar costs to consider, such as the time that goes into program development, curriculum building, recruitment, outreach and ongoing supervision.

Non-RAP programs don't typically have progressive wage requirements, as RAPs do. However, increasing accessibility for apprentices from underrepresented communities should be a goal for all programs, and providing compensation, such as a stipend, is one way to ensure this. Also, providing compensation has been shown to be predictive of many positive outcomes for organizations and apprentices. It has allowed apprentices to work a greater number of hours for the organization, organizations to attract larger pools of candidates from diverse socioeconomic backgrounds, and apprentices to assume smaller amounts of debt during their training period (Eaker & Marks, 2019).

Funding for program expenses can come from sources such as the organization's operational budget, community support, fundraising and grants. There may be grant funding available from government agencies, private foundations or nonprofit organizations that want to support work-based learning programs for MH/SU care and treatment organizations. Involving the community through fundraising informs the service population and community leaders about the organization and the services they provide, garnering financial support and in-kind contributions.

Another avenue to consider is engaging with local businesses and seeking corporate sponsorships from companies with philanthropic initiatives. Companies that have budgeted for philanthropic causes may be interested in the mission and goals of WBLPs. Some companies also match employee donations, making an even larger impact on the recipient organization.

## **Funding Considerations Snapshot**

RAPs include specific financial requirements such as progressive wage increases that must be considered when looking at potential program structures. Non-RAP WBLPs have similar financial responsibilities surrounding general program implementation, but more flexibility in participant compensation.

## **Funding Opportunities**

- RAPs: Funding from the DOL and other federal agencies, including the Division of Apprenticeship Standards for grant funding.
- RAPs and WBLPs: Grant funding through local organizations, philanthropic organizations and foundations, universities and colleges, workforce development boards, etc.

[Chinatown Service Center \(CSC\)](#) is a nonprofit organization and health center in California with the mission to provide outstanding services and advocacy that promote better quality of life and equal opportunity for immigrants and other communities. CSC offers health clinics, case management services, behavioral health services, social services, workforce development resources and youth services. CSC’s internship training program was initially funded by government grants, and Nancy Ho, director of clinical training, shared that she had to pursue corporate sponsorships to sustain the program. Ho obtained \$200,000 in funding by connecting with businesses in the community. She would organize speaking engagements with community business employees, such as banks, that informed them of CSC’s organizational mission to gain support from them. Ho called CSC’s funding strategy a “win-win, as the organization receives funding and the companies get to be philanthropic” (Ho, 2023). Organizations can even thank and recognize companies for their funding support on their websites and promotional materials.

## Recruitment and Retention

### RAP recruitment and retention

RAPs are part of a recruitment, training and retention strategy that has proven to be successful for addressing critical workforce needs and bringing diverse talent into various industries (National Governors Association, 2020). Even though MH/SU care and treatment RAPs are an emerging workforce strategy RAPs have shown promise within the broader health care space — over 40 occupations in the health care and social assistance industry have been approved for a RAP, with 13,782 registered apprentices in the health care social assistance industry in fiscal year 2021 (U.S. Department of Labor Employment and Training Administration, n.d.).

#### What are workforce development boards?

**Definition:** Federal, state and local offices that create a network that supports the U.S. workforce by connecting the DOL with a variety of industries and jobs.

The recruitment process for finding apprentices may include partnership with other local institutions such as colleges, universities and training programs, often through their experiential learning offices. The [American Job Center network](#) can also be used

for recruitment, as well as the [Universal Outreach tool](#) that can help identify organizations that support underserved populations. When defining organizational roles in a RAP (e.g., sponsor, intermediary), setting clear expectations around which organization is leading recruitment efforts and establishing a recruitment strategy will be important. Workforce development boards are a helpful resource for sharing employment opportunities and recruiting talent. These agencies operate at both state and local levels, with oversight by the DOL. They are responsible for strategic planning for local workforce development, allocation of workforce development funds and community outreach for workforce opportunities.

## For more information:

- [Local Workforce Development Boards](#) (Workforce and Talent Development Board, n.d.)
- [Certifications](#) (Mental Health and Addiction Certification Board of Oregon, n.d.)

Employers should market the opportunity by highlighting the seven RAP core components noted above (also see [apprenticeship.gov](#)). Paid opportunities can help overcome barriers to entry in the field, such as financial status or educational attainment. This opportunity can be significant for those unable to afford the traditional higher education path, due to the cost of tuition or difficulty balancing time for both classroom instruction and employment to support their living expenses and enables them to participate in the workforce.

There is also positive research data on retention for RAPs. Ninety percent of RAP apprentices remain with the company or organization after completing their apprenticeship, thus contributing to staff retention (ApprenticeshipUSA, 2023). RAPs contribute to increased retention in the workplace through employers training and investing in the development of skilled workers, which makes positive impacts on the workplace. Bringing in apprentices not only helps to share the workload, but it develops a career ladder and professional development opportunity for experienced, existing workers to mentor apprentices.

## **WBLP recruitment and retention**

While non-RAP WBLPs do not have federally-mandated requirements for wage increases, partnerships, etc. as RAPs do, recruitment and retention strategies do not differ significantly. These efforts can be supported through the organization's community partnerships. For example, partnerships with educational institutions can help provide a pathway for connection between students seeking opportunities and organizations with a need. Educational institutions offering undergraduate or graduate programs in social work, counseling, psychology and other similar fields may even require students to complete a WBLP to gain hands-on experience in MH/SU care and treatment. Local workforce development boards can support organizations in the development and implementation of their WBLP.

Retention incentives and strategies for WBLPs can vary for organizations, depending on their implementation approach and staffing needs. Depending on whether candidates have met their education and training requirements upon successfully completing the program, they may be ready for hiring as an early professional. For individuals who are not ready for employment, creating relationships with individuals working toward employment in the field can still be beneficial for later hiring.

## Recruitment and retention snapshot

- Recruitment and retention are high-priority items, due to the workforce crisis facing the MH/SU care and treatment field.
- RAPs and WBLPs both support recruitment into the field by providing opportunities for on-the-job training that do not require a higher education degree.
- While they are often more resource intensive to set up and run, the standardized structure, national credential and employee-friendly features of RAPs (e.g., progressive wage increases) may serve as an additional incentive in the recruitment and retention of apprentices.
- In retaining diverse talent, it's important not to exploit the value provided by individuals offering their lived experience. This value can often become another job duty, without necessarily being rewarded or compensated. For example, a staff member who speaks a second language may be leveraged as a translator, while their peers who don't speak that language do not have the same expectation added to their job duties.

## Return on Investment

### RAP ROI

Our [initial report](#) (Colella et al., 2024) found that National Council member organizations who did implement RAPs found a positive return on investment (ROI) for both employees and for their organization.

### Workers:

- Progressive wage increases and holding a paid learning position in the field.
- Opportunity to pair education with hands-on experience.
- Nationally recognized credential upon completion.

## Organizations:

- Reduced turnover and turnover costs: Some estimates say that the cost to replace an employee can be up to 1.5-2 times an employee's salary (McFeely & Wigert, 2019).
- Proven program model: While RAPs are still emerging in the MH/SU care and treatment field, this model has been successful and provided positive benefits to organizations in other industries. In a study of RAPs, the median ROI of the apprentice's productivity was 44.3% and amounted to \$144.30 in total benefits for every \$100 an employer invested into their RAP (Kuehn et al., 2022).
- Improved organizational culture and health: Employers also reported indirect benefits, such as improvements in organizational culture, pathways to skilled workers and future manager development, increased employee loyalty and coworker productivity, and reduced turnover (Marotta et al., 2022).
- Though this is still a new route for the field to take, it has shown to be a different way to increase job opportunities and diversify the workforce. Across other industries that have standing RAPs in place, they have seen improved company culture, improved coworker productivity, improved company loyalty, reduced turnover and an overall improvement in the pipeline of skilled workers in the field.

While it is reasonable to assume that some of the broadly observed benefits of RAPS within other industries will also be realized within the MH/SU care and treatment field, apprenticeships in this space are a relatively new development and an evidence base is still being built. This can make it difficult to create a quantifiable ROI and business case, particularly when some of the benefits (e.g., more culturally appropriate care) can be difficult to tie directly to financial benefits. However, the literature highlights that access to providers who reflect the culture of the individual served can improve help-seeking behavior, improve the therapeutic relationship and reduce stigma (Gopalkrishnan, 2018).

Understanding that assessing exact ROI can be difficult, key planning activities to understand the full scope of your potential investment include mapping out the necessary components of a RAP or WBLP and assessing whether your organization already has those components in place, or the ability to develop those components. While not an exhaustive list of considerations, a table such as the one below can help facilitate planning discussions.

We have existing resources and infrastructure to deliver this.	We don't yet have this capability, but we are willing to invest resources to develop and implement this.	We don't yet have this capability, and further research is needed to determine feasibility.	This is not feasible to implement now or in the future, due to limited resources.
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**Finances and Compensation**  
**Does your organization have:**

A standard, equitable and transparent staff compensation structure and philosophy (e.g., standard pay scale, policies for compensation based on education, standardized process for compensation reviews and adjustments)?				
The ability to pay RAP participants progressive wage increases?				
The ability to track financial outcomes of the RAP program?				

**Staffing**  
**Does your organization have:**

Designated staff member(s) to oversee the administrative components of a RAP program?				
Staff with the capacity and ability to supervise RAP participants?				

**Recruitment**  
**Does your organization have:**

Existing recruitment staff/team?				
A recruitment strategy that specifically includes equity considerations?				

	We have existing resources and infrastructure to deliver this.	We don't yet have this capability, but we are willing to invest resources to develop and implement this.	We don't yet have this capability, and further research is needed to determine feasibility.	This is not feasible to implement now or in the future, due to limited resources.
The ability to track and report recruitment metrics, including equity metrics? <i>(Note: For RAPs, this may be required reporting to the DOL, based on pending new rules as of time of this handbook's publishing.)</i>				
<b>Curriculum and Structure</b> <i>Does your organization have:</i>				
Existing relationships with all roles and partners required to develop and implement a RAP <i>(see "RAP Roles and Partners" on <a href="#">page 10</a>)?</i>				
Existing partnerships and/or infrastructure to support the educational requirements of a RAP?				
<b>Reporting and Compliance</b> <i>Does your organization have:</i>				
An understanding of required DOL compliance reporting?				
Staff members to provide DOL required reporting and ensure ongoing program compliance?				



## WBLP ROI

Non-RAP WBLPs have many of the same benefits as RAPs: increasing equitable access to careers, the potential for increased recruitment and retention, creating partnerships with organizations within the community, etc. As noted previously, non-RAP WBLPs often will have lower up-front planning and implementation costs when compared to RAPs. This can make the initial cost-benefit ratio of non-RAP programs more attractive, particularly to organizations with limited resources. While RAPs carry their own unique benefits,



some organizations have used the flexibility afforded by the non-RAP approach to create programs that incorporate the benefits of work-based learning while finding creative areas for cost savings — for example, a non-RAP WBLP might not be able to offer progressive wage increases, but instead may offer a “retention bonus” for staff who join the organization after completing the program.

WBLPs tend to require partnerships with other groups, including educational institutions and community organizations. Developing positive relationships with other community institutions can amplify the presence and reputation of an organization for long-term impact.

## ROI snapshot

- RAPs and WBLPs help alleviate challenges created by the workforce crisis, by creating more accessible entry points into the field.
- RAPs and WBLPs contribute to building a more equitable, culturally responsive and diverse representation of providers in the field.
- While WBLP structures (and corresponding costs to implement) vary widely, non-RAP programs will typically have more flexibility to structure themselves for cost savings, as compared to the stricter requirements of RAPs.
- As these programs become more common in the field, more research must be done on quantifiable ROI of these programs.

# Conclusion

RAP and non-RAP WBLP Considerations		
	RAP	Non-RAP WBLP
<b>Participant Salary</b>	Requires progressive wage increases	Not subject to federal apprenticeship wage requirements. May be subject to state-level requirements
<b>Partnerships</b>	Requires identifying sponsor, mentor and partners as part of program development	Flexibility surrounding partnerships in program development
<b>Credentials</b>	Nationally recognized credential through the DOL	Credential only available if program adheres to state-mandated credentialing requirements or creates a new credential/certification for the program
<b>Program Development Lift Level</b>	Heavier lift, due to DOL requirements and application process	Potential for lighter lift due to flexibility in program structure. Broad range of program types allows for selection of program type most advantageous to organization
<b>Staffing Capacity</b>	Program lead and/or coordinator needed to ensure success of program	Program lead and/or coordinator needed to ensure success of program

**RAP:** Best fit for organizations that are ready to make substantial investments in their recruitment strategies and would prefer to implement a program with preexisting structure and requirements. Given that there are set requirements for RAPs, it is likely a larger investment of time and resources to set up and run a RAP while ensuring ongoing compliance with federal standards.

**Non-RAP WBLP:** Best fit for organizations that may not be ready to commit to DOL requirements and related financial and administrative responsibilities but are interested in implementing a program that provides on-the-job training. This is also a great option for organizations that already have established relationships with other organizations that support recruitment for program participants. Also, non-RAP WBLPs can be an entry point to RAPs, as non-RAPs can be converted to RAPs later by meeting federal requirements and registering with the DOL.

As the MH/SU care and treatment field continues to grapple with workforce challenges, it is crucial to consider potential innovative solutions to these challenges. RAPs and non-RAP WBLPs present promising opportunities to create more accessible entry points into the workforce, which could ultimately lead to a broader, more equitable, more diverse workforce pipeline. We encourage you to use the information in this handbook to consider which programs could be best fit for your organization, and to review the included resources to initiate conversations about RAP or non-RAP WBLP development and implementation among your colleagues and organization leadership. These creative solutions to the workforce crisis could lay the foundation for more sustainable work environments for providers and improved outcomes for the communities we serve.

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## Appendix – Quick Links to Further Resources

1. [New Study: Behavioral Health Workforce Shortage Will Negatively Impact Society](#)
2. [2022 Access to Care Survey Results](#)
3. [Apprentice.gov](#)
4. [Registered Apprenticeship Program: Register Your Program](#)
5. [Registered Apprenticeship Program: Standards Builder](#)
6. [Pathways to Work: Evidence Clearing House](#)
7. [Requirements for Apprenticeship Sponsors Reference Guide](#)
8. [AmeriCorps Partner information](#)
9. [Map of Office of Apprenticeship \(OA\) and State Apprenticeship Agencies \(SAA\)](#)
10. [Jobs for the Future: Registered Apprenticeship Roles and Responsibilities](#)
11. [Jobs for the Future](#)
12. [Apprenticeship.gov Partner Finder](#)
13. [Urban Institute](#)
14. [Apprenticeship.gov Open Funding Opportunities](#)