VIRGINIA CAREER WORKS
PIEDMONT REGION

Workforce Innovation and Opportunity Act (WIOA)
Individual Training Account (ITA)
Payment Authorization

A proud partner of the americanjobcenter network

WIOA Staff Contact Information	
Name:	
Title:	
Program:	☐ Adult ☐ Dislocated Worker ☐ Youth
Date:	

Vendor Information	
Name:	
Address:	
Phone Number:	
Contact Person:	

Training Information	
Customer Name:	
Training Program:	
Semester:	
Year:	
Maximum Funding:	

The above named customer is a participant in the Workforce Innovation and Opportunity Act (WIOA) program. If you have any questions, or need any assistance, please contact the WIOA staff contact named above.

Please send all invoices to:
Rappahannock Goodwill Industries, Inc.
Sherry Davis, Director Workforce Services
Email: sherry.davis@fredgoodwill.org

_____
Program Manager Signature *Date*

_____
Program Manager Name (Printed)

_____
Customer Signature *Date*

Updated 8/29/2023