



Workforce Investment Act Eligible Training Program

Provider Name: RI Hospitality Association

Contract #: 4050-37

Address:

94 Sabra Street
Cranston, RI 02910-1031

Addresses if program is held at a another site:

1. Locations Vary 2. _____

Program Name: First Impressions: Exceptional Customer Service™

Office use only: ONET CODE 43-4081

CONTACT INFORMATION

Program Contact Person:
Heather Singleton

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Course Outline/Topics to be Covered

The heart of this three-hour facilitated training program is based on communication with add-on components including: Appearance, Hygiene, Posture, Handshakes, and Body Language. Participants are taught that these non-verbal exchanges are where the majority of communication occurs. Additionally, this program covers: Tone of Voice, Choosing the Right Words, Serving Dissatisfied Customers and the Use of Different Communication Styles During Conflict Resolution.

Required academic grade levels to enter program

Reading Grade Level 7th Grade

Math Grade Level N/A

English Proficiency 7th Grade

Required to enter training program

Physical Yes No
Vaccinations Yes No
Drug test Yes No
BCI Yes No
License Yes No
Tools Yes No
Experience Yes No
Other :

MAY be required for employment

Physical Yes No
Vaccinations Yes No
Drug test Yes No
BCI Yes No
Certification Yes No
License Yes No
Tools Yes No
Experience Yes No
Other :

Participants will be qualified to seek employment in the following occupations:

1) Any position 2) _____
3) _____ 4) _____

Is this program Pell grant eligible?

Yes No

PROGRAM COSTS:

TUITION INCLUDES:

Tuition	\$30.00
Fees	_____
Books	_____
Licensing	_____
Certificate fees	_____
Other, provide explanation	_____
Total Tuition Cost	\$30.00

These are expenses that MAY be reimbursed after successful completion of training.

Please indicate Yes, No or enter the amount

	YES	NO	AMOUNT
Books	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____
Licensing	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____
Tools	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____
Uniforms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____
Travel	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____
Miscellaneous	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	_____
Total			\$0.00

Participant is responsible for :

Prerequisites	_____
Memberships	_____
_____	_____
_____	_____
Cost above tuition cap	\$0.00
Expenses that <u>MAY</u> be reimbursed	\$0.00
Total	\$0.00

Maximum ITA Responsibility (Max. \$5500)

\$30.00

PROGRAM LENGTH

Weeks and Hours
and

Additional Information

One, 3-hour training session.

What type of certificate will be awarded and by whom?

RI Hospitality Education Foundation First Impressions: Exceptional Customer Service™ Certification