

THE WORKFORCE INVESTMENT ACT INTAKE FORM

The Intake Form has been designed to collect all data necessary to meet federal and state reporting requirements. If the applicant becomes a participant, this information becomes a part of the participant record and is subject to retention requirements. The Intake Form should be maintained for documentation of audits, monitoring, data element validation, and other reporting requirements.

The applicant is required to sign and date the Intake Form certifying the accuracy of the information and the understanding that falsification may result in expulsion from the program. In the case of a minor (except minors who are heads of households), the signature of parent or guardian or other responsible adult is required.

The Intake Form must be filled out in ink. Forms filled out in pencil are not acceptable. White out for corrections is also unacceptable. When corrections are made, simply cross out the wrong information, enter correct information, initial and date.

The following pages contain the Intake Form with the Data Elements numbered and described. Accuracy and timeliness are very important. Data entered impacts achieving performance measures that are reviewed by Employment Training Administration (ETA) on a quarterly and yearly basis.

Items 1 through 19 of the Workforce Investment Act (WIA) Intake Form include those data elements required to be retained for each participant. (Workforce Investment Act Title I WIA Final Rule 663.105 and 664.215) In addition, ETA encourages a system capable of tracking core self-service and informational services by collecting personally identifiable data and other basic contact information.

Information collected from the participant will be used to monitor compliance of recipients with the equal opportunity and nondiscrimination requirements enforced by the Civil Rights Center (CRC). In addition, this information will be used to assist the grantee and the United States Department of Labor in evaluating and improving efforts to conduct outreach to diverse population groups, including racial and ethnic minorities and persons with disabilities.

INSTRUCTIONS

Item # 1 **Date of Application (Registration)**

Enter the month, day, and year (MMDDYYYY) the applicant applied for entry into the program.

Item #2 **Name**

- (a) Enter the last name, first name, and middle initial. **ALL paperwork must have the last name first.**
- (b) Do not enter titles such as Mr., Ms., Mrs., Dr., etc. Use the applicant's legal name-no pen names (i.e. same as that appearing on the social security card).

Item #3 **Social Security Number (SSN)**

- (a) Enter the full nine-digit social security number of the applicant. The social security number of the applicant is the key to his/her record in the Participant Tracking System. At a minimum, this number must be the same for every period of participation in the WIA Title IB programs, including National Emergency Grants, and in every local area across the state and where the applicant is receiving services or benefits financially assisted by Labor Exchange (Wagner-Peyser/VETS) and/or Trade Adjustment Assistance (TAA) programs.
- (b) A pseudo SSN may be assigned during application, if the applicant has no SSN or refuses to provide the number. However, a valid SSN for such applicants should be obtained and recorded as soon as possible. **No participant should be "EXITED" from the program without a valid SSN.**
- (c) Pseudo social security numbers must be created using the following methodology:

The first digit will always be a "9" followed by the last two digits of the birth year. The next two digits will be "00" followed by the birth month and day. If two or more applicants have the same date of birth the "00" will become "01", "02", etc. For example: Two participants with a date of birth of May 1, 1960 would be assigned the following pseudo numbers:

- i. 1st Applicant 960-00-0501
- ii. 2nd Applicant 960-01-0501

Example: For an applicant with a date of birth of September 18, 1954: 954-00-0918

NOTE: In accordance with the Privacy Act of 1974, the Mississippi Workforce Investment System may not deny to any applicant

any right, benefit, or privilege provided the law because of the applicant's refusal to disclose his/her Social Security Number. Any Federal, State, or local government agency which requests an applicant to disclose his Social Security Number shall inform that applicant whether that disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it.

Mississippi has chosen the Social Security Number as the "Applicant Identifier" a data element requirement for every record submitted on the Workforce Investment Act Standardized Record Data (WIASRD). It is also required for participation in work experience, on-the-job training, and placement into unsubsidized employment.

Item #4 Mississippi Department of Employment Security or Local Workforce Investment Area Code (MDES or LWIA)/ Location Code

Enter the appropriate code.

Location Code	Workforce Investment Area	MDES/LWIA Code
100	Delta Workforce Investment Area	28075
200	Mississippi Partnership Workforce Investment Area	28065
300	Southcentral Mississippi Works	28085
500	Twin Districts Workforce Investment Area	28090
700	MDES	
	1. National Emergency Grant	28901
	2. Statewide Rapid Response	28902
	3. Statewide Activities	28903

Item #5 Address

- (a) Enter the alpha and numeric characters of the applicant's current physical address in the space provided. It may consist of a street number and name or a rural route. Do not use post office box address (may use only in Comment Section).

For those applicants without a dwelling, residence may include physical presence and declaration of intent to remain in the area served by the LWIA or some other documented procedure. The intent is to allow services to those most in need (i.e. homeless and/or runaway) that has no dwelling.

NOTE: For Dislocated Worker, Adult, and Youth applicants enrolling from a neighboring state, record the current physical address of residence.

Item #6 City

- (a) Enter the city of applicant's address. No abbreviations.
- (b) Enter city of enrollment for homeless and/or runaway.

NOTE: For Dislocated Worker, Adult, and Youth applicants enrolling from a neighboring state, record the current city of residence

Item #7 County Code

Enter the two-digit county code identifying the county in which the applicant resides.

NOTE: For Dislocated Worker, Adult, and Youth applicants enrolling from a neighboring state, record the County Code of the WIN Job Center.

COUNTY CODE CHART

<u>Code</u>	<u>County Name</u>	<u>Code</u>	<u>County Name</u>
01	Adams	42	Leflore
02	Alcorn	43	Lincoln
03	Amite	44	Lowndes
04	Attala	45	Madison
05	Benton	46	Marion
06	Bolivar	47	Marshall
07	Calhoun	48	Monroe
08	Carroll	49	Montgomery
09	Chickasaw	50	Neshoba
10	Choctaw	51	Newton
11	Claiborne	52	Noxubee
12	Clarke	53	Oktibbeha
13	Clay	54	Panola
14	Coahoma	55	Pearl River
15	Copiah	56	Perry
16	Covington	57	Pike
17	DeSoto	58	Pontotoc
18	Forrest	59	Prentiss
19	Franklin	60	Quitman
20	George	61	Rankin
21	Greene	62	Scott
22	Grenada	63	Sharkey
23	Hancock	64	Simpson
24	Harrison	65	Smith
25	Hinds	66	Stone
26	Holmes	67	Sunflower
27	Humphreys	68	Tallahatchie
28	Issaquena	69	Tate
29	Itawamba	70	Tippah
30	Jackson	71	Tishomingo
31	Jasper	72	Tunica
32	Jefferson	73	Union
33	Jeff. Davis	74	Walthall
34	Jones	75	Warren
35	Kemper	76	Washington
36	Lafayette	77	Wayne
37	Lamar	78	Webster
38	Lauderdale	79	Wilkinson
39	Lawrence	80	Winston
40	Leake	81	Yalobusha
41	Lee	82	Yazoo

Item #8 State

- (a) Enter the two-digit abbreviation for the state.
Use the abbreviation standardized by the United States Postal Service.

NOTE: For Dislocated Worker, Adult, and Youth applicants enrolling from a neighboring state, record the current state of residence.

Item #9 Zip Code

- (a) Enter the five-digit mailing address zip code.
- (b) The USPS web-site where one can obtain a zip code is http://www.usps.gov/ncsc/lookup_zip+4.html

NOTE: For Dislocated Worker, Adult, and Youth applicant enrolling from a neighboring state, record the zip code for current state of residence.

Item #10 Telephone Number

Enter the area code and telephone number of the applicant.

Item #11 Contact Person

Enter the name of a friend, relative, institutional representative, or other individual who does not live in the applicant's household but will always know their whereabouts. Parents or older relatives are ideal.

NOTE: Do not list the applicant or applicant's spouse as the contact person.

Item #12 Relationship to Applicant

Identify the relationship of the contact person to the applicant.

Item #13 Contact Telephone

- (a) Enter the contact person's telephone number.
- (b) The telephone number should not be the same as applicant's number in Item #10.

Item #14 Age

- (a) Enter the applicant's age.
- (b) Age (calculated at the WIA Eligibility Date in Item # 55) cannot be less than 14 or greater than 100.

Item #15 Date of Birth

Enter the month, date, and year (MMDDYYYY) of the applicant's birth. Must be a valid date (i.e. date on birth certificate).

Item #16 Gender

- (a) Enter the appropriate sex of the applicant by designating:
 - 1-Male
 - 2-Female
 - 0-Applicant does not self-identify (NSI)
- (b) Enter "1" if the applicant indicates that he is male.
- (c) Enter "2" if the applicant indicate that she is female.
- (d) Enter "0" if the applicant does not self-identify gender (NSI).

Item #17 Citizenship

- (a) Enter the appropriate response.
 - 1-Citizen-U. S. Citizen is a person having citizenship status either by birth or Naturalization.
 - 2-Eligible Non-Citizen-May be either a person who has permanent immigrant status, verification by Alien Registration Receipt Card Form I-151 or AR-3a, or an alien permitted to work in the U. S. by the Immigration and Naturalization Service (INS). Verification by Arrival Departure Record, Form I-94. A refugee is a person unwilling or unable to return to his/her country of origin because of persecution or a well founded fear of persecution on account of race, religion, nationality, membership in a particular group or political opinion.
 - 3-Neither – Any applicant marked neither is ineligible.

NOTE: The documentation of the **United States Department of Justice Immigration and Naturalization Service Employment Eligibility Verification Form I-9** may also be used to verify citizenship. At no time should the social security card alone be used to document citizenship.

Item #18 Draft Status (Selective Services)

- (a) Enter the appropriate response.
 - 1-Registered
 - 2-Not Registered
 - 3-N/A
- (b) Enter "1" for registered.
- (c) Enter "2" for not registered.
- (d) Enter "3" (N/A) for someone included in one of the categories of applicants who are not required to register:

THOSE WHO MUST REGISTER*

All male U.S Citizens born after December 31, 1959, who are 18 but not yet 26 years old must register. Those required to register include any applicant in any of the following categories:

- Cadets at the Merchant Marine Academy
- National Guardsmen and Reservists not on active duty
- Delayed Entry Program Enlistees
- ROTC students
- Separates from Active Military Service, separated for any reason before age 26**
- Men rejected for enlistment for any reason before age 26
- Civil Air Patrol members
- Permanent resident aliens
- Special (seasonal) agricultural workers (I-688)
- Refugee, parolee, and asylee aliens
- Undocumented (illegal) aliens
- Dual national U.S. citizens
- Applicants with a physical or mental disability who are able to function in public with or without assistance

THOSE WHO ARE NOT REQUIRED TO REGISTER

- Females
- Members of the Armed Forces on active duty (active duty for training purposes does not constitute "active duty" for registration purposes)
- Cadets and Midshipmen at Service Academies or the Coast Guard Academy**
- Students in Officer Procurement Programs**†
- Lawful nonimmigrant applicants who meet the other eligibility requirements may be considered for WIA programs. Examples of lawful nonimmigrant on visas include:
 1. Diplomatic and consular personnel and families
 2. Foreign students, tourist with unexpired Forms I-94, I-95A, or Border Crossing Documents I-15S6 or I-444)
 3. Special agricultural workers (I-688A)
- Incarcerated, hospitalized, or institutionalized for medical reasons
- Handicapped physically or mentally continually confined to a residence, hospital, or institution

*Residents of Puerto Rico, Guam, Virgin Islands, and Northern Mariana Islands are U.S. citizens. Citizens of American Samoa are nationals and must register when they are habitual residents in the United States. Habitual residence is presumed whenever a national or a citizen of the Republic of the Marshall Islands or the Federated States of Micronesia resides in the United States for more than one year in any status, except as a student or employee of the government of his homeland.

[Reference: TEIN 20-94 Change in Selective Service Registration Status Information Letters]

****Must register within 30 days of release unless already age 26, or already registered when released, or unless exempt during entire period age 18 through 25.**

†Students enrolled at The Citadel, North Georgia College, Norwich University, and Virginia Military Institute.

SELECTIVE SERVICE REGISTRATION STATUS INFORMATION LETTERS

When an applicant cannot show proof of draft registration, that applicant must provide the program operator with a selective service system status information letter. The Selective Service System will no longer make a determination regarding the applicant's failure to register. The WIA is now authorized to make these determinations for eligibility purposes. The WIA staff should evaluate the evidence presented by the applicant and make a determination regarding whether or not the applicant's failure to register is consistent with Public Law 99-661, 1366. If after reviewing the evidence, the WIA/SSA determines that the preponderance of the evidence shows that a man's failure to register was not knowing and willful and he is otherwise eligible, **services may be granted**. If the determination is that the evidence shows the applicant's failure to register was knowing and willful, WIA **services must be denied**, mark **"not registered"** in this field. Applicant's denied services should be advised of the available grievance procedures under WIA. Decisions by the local program are appealable to the State.

NOTE: If he does not desire to select the above option mark **"not registered"**. He is not eligible to participate.

Item #19 Ethnicity Hispanic or Latino

- (a) Enter the appropriate response. This item is required for all groups (Adult, Dislocated Worker and Youth).
 - 1-Yes
 - 2-No
 - 0-If the applicant does not self-identify his/her ethnicity
- (b) Enter "1" if the applicant indicates that he/she is a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race.
- (c) Enter "2" if the applicant indicates that he/she does not meet any of these conditions.
- (d) Enter "0" if the applicant does not self-identify his/her ethnicity

NOTE: Ethnicity information (Hispanic or Latino) is collected separately from race information. Applicants who indicate that they are Hispanic or Latino should also have an opportunity to select one or more racial categories.

Item #19A Race

- (a) Enter the appropriate response. Participants may choose all or none of the following categories: American Indian or Alaska Native, Asian, Black or African American, Hawaiian Native or other Pacific Islander, or White.
1-Yes
2-No
0-If the applicant does not self-identify his/her race
- (b) Enter "1" if the applicant self-identify his/her race with a selected category
- (c) Enter "2" if the applicant indicates that he/she does not self-identify his/her race with a category
- (d) Enter "0" if the applicant does not self-identify his/her race

NOTE: The WIASRD offers the option of selecting no racial group or more than one racial group. Enter the selection (s) from the following categories to indicate the race of the applicant as defined below:

If an applicant is multi-racial using self-reported information, the option of selecting one or more racial designations shall be offered.

1. American Indian or Alaskan Native: A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains cultural identification through tribal affiliation or community recognition.
2. Asian: A person having origins in any of the original people of the Far East, Southeast Asia, the Indian Subcontinent, (e.g., India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, the Philippine Islands, Thailand, and Vietnam.
3. Black or African American: A person having origins in any of the black racial groups of Africa.
4. Hawaiian Native or Other Pacific Islander: A person having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands.
5. White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Item #20 Individual With Disability

- (a) Enter the appropriate response. This item is required for all groups, (Dislocated Worker, Adult, and Youth).
 - 1-Yes
 - 2-Yes, and the disability results in a substantial impediment to employment.
 - 3-No
 - 0-If the applicant does not wish to disclose his/her disability status
- (b) Enter "1" or "2"(depending on severity of disability). If the applicant indicates that he/she has any "disability," as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. (For definitions and examples of "physical or mental impairment" and "major life activities," see paragraphs (1) and (2) of the definition of the term "disability" in 29 CFR 37.4, the definition section of the WIA non-discrimination regulations.).
- (c) Enter "2" if the applicant indicates that he/she does not have a disability that meets the definition.
- (d) Enter "3" if none of the above apply.
- (e) Enter "0" if the applicant does not wish to disclose his/her disability status.

Item #21 Veteran Status

- (a) Enter the appropriate response.
 - 1-Yes, less than or equal to 180 days
 - 2-Yes, greater than 180 days
 - 3-No
 - 4-Yes, other Eligible Person
- (b) Enter "1" if the applicant is a person who served in the active U.S. military, naval, or air service for a period of less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable.
- (c) Enter "2" if the applicant served on active duty for a period of more than 180 days and was discharged or released with other than a dishonorable discharge; or was discharged or released because of a service connected disability; or as a member of a reserve component under an order to active duty pursuant to section 167 (a), (d), or, (g), 673 (a) of Title 10, U.S.C., served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized and was discharged or released from such duty with other than a dishonorable discharge.
- (d) Enter "3" for NO, if the applicant does not meet any one of the conditions described in (b), (c) or (e).**

- (e) Enter "4" if the applicant is a person who is (a) the spouse of any person who died on active duty or of a service-connected disability, (b) the spouse of any member of the Armed Forces serving on active duty who at the time of application for assistance under this part, is listed, pursuant to 38 U.S.C 101 and the regulations issued there under, by the Secretary concerned, in one or more of the following categories and has been so listed for more than 90 days: (i) missing in action; (ii) captured in the line of duty by a hostile force; or (iii) forcibly detained or interned in the line of duty by a foreign government or power; or (c) the spouse of any person who has a total disability permanent in nature resulting from a service-connected disability or the spouse of a veteran who died while a disability so evaluated was in existence.

Item #22 Campaign Veteran

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-Yes, Vietnam-era veteran
 - 3-No
- (b) Enter "1" if the veteran served on active duty in the U.S. armed forces during a war or in a campaign or expedition for which a campaign badge or expeditionary medal has been authorized as identified and listed by the Office of Personnel Management (OPM). A current listing of the campaigns can be found at OPM's website <http://www.opm.gov/veterans/html/vgmedal2.asp>.
- (c) Enter "2" if the applicant served in the active U.S. military, naval, or air service, and who was discharged or released from such service under conditions other than dishonorable during the Vietnam-era (the period beginning on February 28, 1961 and ending on May 7, 1975, in the case of a veteran who served in the Republic of Vietnam during that period, and the period beginning on August 5, 1964 and ending on May 7, 1975, in all other cases).
- (d) Enter "3" if neither of the above.

NOTE: If response is "Yes" then item # 21 (Veteran Status) must be "Yes".

Item #23 Disabled Veteran

- (a) Enter the appropriate response
 - 1-Yes
 - 2-Yes, Special Disabled
 - 3-No
- (b) Enter "1" if the applicant is a veteran who served in the active U.S. military, naval, or air service and who is entitled to compensation

regardless of rating (including those rated at 0%); or who but for the receipt of military retirement pay would be entitled to compensation, under laws administered by the Department of Veterans Affairs (DVA); or was discharged or released from activity duty because of a service-connected disability.

- (c) Enter "2" if the veteran is entitled to compensation (or who, but for the receipt of military retirement pay would be entitled to compensation) under laws administered by the DVA for a disability, (i) rated at 30 percent or more or, (ii) rated at 10 or 20 percent in the case of a veteran who has been determined by DVA to have a serious employment handicap.
- (d) Enter "3" if the applicant does not meet any one of the conditions described above.

NOTE: If response is "Yes" then Item #20 (Individual with a Disability) and Item #21 (Veteran Status) must be "Yes".

Item #24 Recently Separated Veteran

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the veteran applied for participation under Title I of WIA within 48 months after discharge or release from active U.S. military, naval, or air service, otherwise
- (c) Enter "2" if the applicant does not meet the condition described above.

Item #25 Employment Status at Participation (Registration)

- (a) Enter the response that best describes the applicant's employment status at registration. This item is required for all groups (Dislocated Worker, Adult, and Youth).
 - 1-Employed
 - 2-Not Employed
 - 3-Employed, but Received Notice of Termination of Employment or Military Separation
- (b) Enter "1" if the participant is a person who either:
 - i. did any work at all as a paid employee,
 - ii. did any work at all in his or her own business, profession, or farm,
 - iii. worked 15 hours or more as an unpaid worker in an enterprise operated by a member of the family, or
 - iv. is one who was not working, but has a job or business from which he or she was temporarily absent because of illness, bad weather, vacation, labor-management dispute, or

personal reasons. Whether or not paid by the employer for time-off, and whether or not seeking another job.

- (c) Enter "2" if the applicant does not meet any one of the conditions described in "1" or "3".
- (d) Enter "3" if the applicant is a person who, although employed, either:
 - i. has received a notice of termination of employment or the employer has issued a Worker Adjustment and Retraining Notification (WARN) or other notice that the facility or enterprise will close, or
 - ii. is a transitioning service member.

Item # 26 Metropolitan Resident

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant resides in DeSoto, Forrest, Hancock, Harrison, Hinds, Jackson, Lamar, Madison, or Rankin.
- (c) Enter "2" for Non-Metropolitan Counties.

Item # 27 Number in Family

Enter the total number of persons within a family unit living in a single residence and are related to each other by blood, marriage, or adoption.

NOTE: A step-child or step-parent shall be considered to be related by marriage. One or more persons not living in the single residence but who were claimed as a dependent on another's Federal Income Tax return for the previous year shall be presumed, part of the family which claimed them on their Federal Income Tax.

- i. The entry shall reflect the maximum number of family members during the six (6) months before application.
- ii. A divorced or deceased spouse leaving the family unit at any time during the six (6) month period should be indicated as a family member.

Applicants in the following situations may be classified as a family of one:

- i. A disabled applicant, or
- ii. A foster child, on behalf of whom State and local government payments are made, or
- iii. A person who qualifies as homeless under the Stewart B. McKinney Homeless Assistance Act (refer to the definition in item 39), or

- iv. A single, separated (legally or otherwise), abandoned, divorced, or widowed applicant without dependents who received less than 50% support (i.e. food, shelter, money clothing) from the family for 6 months prior to the date of WIA eligibility certification and who was not, nor will be claimed as a dependent on another person's income tax return for any part of a taxable year for six months preceding the certification date.

Item # 28 Family Status

Enter one designation describing the applicant's family status from among the following categories. (The following categories of family status are meant to be descriptive and do not necessarily have a direct bearing on eligibility determination. There may be specific cases that do not technically fit into a single category. For these cases enter the designation that seems "most", appropriate.)

SINGLE PARENT STATUS:

Only the parent and his/her own child/children are considered a family, except when the single parent is providing financial support for another applicant recognized by IRS as the applicant's dependent. In such, cases, the party would be listed in the family and the applicant's family status would be single parent.

If a single parent (applicant) is claimed as another person's dependent, he/she is a part of that person's family and should be recorded as an **"other"** family member.

For parents receiving TANF payments, when there is no family income and a return was not filed with IRS:

- i. If the single parent is under 18 and resides with his/her parent/s, the single parent and child/children are considered a part of his/her parent's family. The single parent would be considered an **"other"** family member.
- ii. If the single parent is 18 or older, he/she is considered head of the household even though he/she may live with her parent's. The single parent and children make up her/his family and he/she is a **"single parent"**.

1-Single Parent -A single, separated, divorced, or widowed applicant **who has primary responsibility for one or more dependent children under age 18**. To be represented as a single parent, the applicant's dependents must meet the tax return requirement stipulation.

2-Parent in Two (2) Parent-Family-An applicant who, with another family member, shares custodial support for one or more dependent children.

3-Other Family Member-An applicant who is living with his/her family of two or more persons and not indicated in one or two above.

- i. An applicant supported by or claimed as a dependent by another applicant, or
- ii. A married person with no dependents living in the household, or
- iii. A single parent with dependents over 17 years of age, or
- iv. An unmarried, divorced or separated parent who are not providing at least 50% support for their child/children, or
- v. A grandparent supporting a grandchild are included in this category, or
- vi. An unmarried applicant, **with no children under 18 claimed as dependents**, who claim another family member, i.e., parent, and sibling, as a legal dependent.

4-Not a Family Member-An applicant who **is not** living with his/her family; or

- i. Is handicapped; or
- ii. Is a foster child on behalf of whom state or local government payments are made; or
- iii. Is a person recognized as homeless by the Stewart B. McKinney Homeless Assistance Act (see item 39 for definition); or
- iv. Is a single, separated, abandoned, divorced, or widowed applicant without dependents who received less than 50% support (i.e. food, shelter, money, clothing) from the family for 6 months prior to the date of WIA registration and who was not, nor will be, claimed as a dependent on another person's income tax return for any part of the taxable year for six months preceding the certification date.

Item # 29 Annualized Family Income

Family income includes total annual cash received before taxes from all sources, with the exceptions listed below. Record annualized family income (rounded to the nearest dollar). To derive the annualized family income amount, calculate the total family income for the six-month period before application and multiply by two.

(a) INCLUDED AS INCOME

- i. Money, wages, and salaries before any deductions (includes wages paid through the Senior Community Service

- Employment Program funded under Title V of the Older Americans Act)
- ii. Net receipts from non-farm self-employment (receipts from a person's own unincorporated business, professional enterprise, or partnership after deductions for business expense)
 - iii. Net receipts from farm self-employment (receipts from a farm which one operates as an owner, renter, or sharecropper, after deductions for farm operating expenses)
 - iv. Regular payments from railroad retirement, strike benefits from union funds, worker's compensation, and training stipends
 - v. Alimony
 - vi. Military pay for applicants on active duty, military reserves or in the National Guard
 - vii. Military family allotments or other regular support from an absent family member or someone not living in the household
 - viii. Pensions whether private, government employee (Including military retirement pay)
 - ix. Regular insurance or annuity payments
 - x. College or university grants, fellowship, and assistantships
 - xi. Dividends, interest, net rental income, net royalties, periodic receipts from estates or trusts
 - xii. Net gambling or lottery winnings

(b) EXCLUSIONS FROM INCOME

- i. Unemployment compensation
- ii. Child support payments (including foster child care payments)
- iii. Welfare payments (including TANF, SSI, RCA)
- iv. Capital gains
- v. Any assets drawn down as withdrawals from a bank, the sale of property, a house or a car
- vi. Tax refunds, gifts, loans, lump-sum inheritances, one-time insurance payments or compensation for injury
- vii. Non-cash benefits such as employer paid fringe benefits, food or housing received in lieu of wages
- viii. Medicare, Medicaid, Food Stamps, school meals and housing assistance
- ix. WIA income
- x. Pell Grants, educational financial assistance received under title IV of the Higher Education Act (includes Federal Supplemental Educational Opportunity Grants and Federal

- Work Study and Stafford and Perkins loans which are considered debt and not income)
- xi. Needs-based scholarship assistance (based on income as opposed to athletic scholarship)
 - xii. Emergency Assistance or General Relief money payments
 - xiii. Active military duty pay and allowances (For applicants who are veterans at the time of eligibility determination ONLY)
 - xiv. Veteran's benefits such as compensation for service-connected disabilities compensation for service-connected death, vocational rehabilitation, and education assistance
 - xv. Social Security Old Age and Survivors' Insurance

NOTE: The inclusion or exclusion of military pay and allowances is predicated on whether or not the applicant or member of the applicant's family is on active duty. The income is included (counted) when either the applicant or member of the applicant's family is on active duty at the time of eligibility determination. The income is excluded (not counted) when either the applicant or a member of the applicant's family is not on active duty at the time of eligibility determination even though they may have been on active duty during the six months immediately preceding the date of eligibility determination.

Item #30 Low Income

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
 - 3-5% Youth Exception
- (b) Enter "1" if a applicant is in one or more of the following categories (WIA section 101(251)):
 - i. receives, or is a member of a family which receives, cash payments under a Federal, State or income-based public assistance program;
 - ii. received an income, or is a member of a family that received a total family income, for the six-month period prior to registration for the program involved (exclusive of unemployment compensation, child support payments, payments described in subparagraph (A) and old-age and survivors insurance benefits received under section 202 of the Social Security Act (42 U.S.C. 402)) that, in relation to family size does not exceed the higher of: the poverty guideline, for the equivalent period; or 70 percent of the

- lower living standard income level, for an equivalent period; (see income guideline chart on page 34)
- iii. is a member of a household that receives (or has been determined within the 6-month period prior to registration for the program involved to be eligible to receive) Food Stamps pursuant to the Food Stamp Act of 1977 (7 U.S.C. 2011 et seq.);
 - iv. qualifies as a homeless applicant, as defined in subsections (a) and (c) of section 103 of the Stewart B. McKinney Homeless Assistance Act (42 U.S.C. 11302); or
 - v. is a foster child on behalf of whom State or local government payments are made; or
- (c) Enter "2" if the applicant does not meet conditions in "1" or "3".
(d) Enter "3" if applicant meets youth criteria for income exception.

NOTE: An applicant with a disability whose family does not meet income eligibility criteria under the Act is eligible for priority as a low-income adult. Even if the family of an applicant with a disability does not meet the income eligibility criteria, the applicant with a disability is to be considered a low-income applicant if the applicant's own income: meets the income criteria established in WIA section 101(25)(A) or (B); but is a member of a family whose income does not meet those requirements. [WIA section 101(25)(F)]

2006 INCOME GUIDELINES

The poverty guidelines below were issued by the U.S. Department of Health and Human Services. The LLSIL guidelines were issued by the U.S. Department of Labor. The guidelines are listed in the chart below and are effective in Mississippi immediately.

Family Size	Poverty	70% LLSIL Non-Metro	70% LLSIL Metro	100% LLSIL Non-Metro	100% LLSIL Metro
1	9,800	7,250	7,580	10,350	10,830
2	13,200	11,880	12,420	16,970	17,740
3	16,600	16,310	17,050	23,290	24,350
4	20,000	20,130	21,040	28,750	30,060
5	23,400	23,760	24,830	33,930	35,480
6	26,800	27,780	29,040	39,680	41,490
7	30,200	31,800	33,250	-----	----- -
8	33,600	35,820	37,460	-----	----- --
9	37,000	39,840	41,670	----- -	----- --
10	40,400	43,860	45,880	-----	----- --

For family units in excess of ten (10) family members:

Poverty Level	add \$ 3,400 for each additional member
70% LLSIL Non-Metro	add \$ 4,020 for each additional member
70% LLSIL Metro	add \$ 4,210 for each additional member

WIA Section 101(24) defines the LLSIL as "that income level (adjusted for regional, metropolitan, urban, and rural differences and family size) determined annually by the Secretary [of Labor] based on the most recent lower living family budget issued by the Secretary."

CASH ASSISTANCE

Other Public Assistance- The term "public assistance" means Federal, State, or local government **cash payments** for which eligibility is determined by a needs or income test.

If the applicant is a person who is receiving or has received cash assistance or other support services from one of the following sources at any time during participation in the program: General Assistance (GA) (State/local government), Refugee Cash Assistance (RCA), Food Stamp Assistance, and Supplemental Security Income (SSI-SSA Title XVI). **Do not include foster child payments. While this information may be updated during participation, such updating is not required.**

Item #31 Temporary Assistance To Needy Families (TANF)

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant is a person who is listed on the welfare grant or has received cash assistance or other support services from the TANF agency at any time during participation in the program. While this information may be updated during participation, such updating is not required.
- (c) Enter "2." if the applicant does not meet the condition described above.

Item # 32 Supplemental Security Income (SSI)

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant receives cash assistance from Supplemental Security Income (SSI-SSA title XVI).
- (c) Enter "2." if the applicant does not meet the condition described above.

Item # 33 Food Stamp Recipient

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant is included in a Food Stamp case. An applicant may be included in a Food Stamp case without actually receiving Food Stamps the month of WIA application. Occasionally, borderline cases earn too much during months with 5 pay periods. The person is then suspended for a month and reinstated the

following month. After two consecutive months of suspension, the applicant is dropped as a Food Stamp case.

- (c) Enter "2" if not included on a Food Stamp case.

Item # 34 Refugee Cash Assistance

- (a) Enter the appropriate response.
 - 1-Yes
 - 2- No
- (b) Enter "1" if the applicant receives cash assistance from Refugee Assistance.
- (c) Enter "2" if the applicant does not meet the condition described above.

Item # 35 Foster Child Payments

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant receives foster child care payments.
- (c) Enter "2" if the applicant does not meet the condition described above.

Item #36 Preprogram Wage

- (a) Enter the most recent hourly wage paid to the participant during the 26 weeks before application.
- (b) Enter "0" if no employment during that period.
- (c) In the case of an applicant who worked odd jobs, determine the wage based on the best week. Determine the average number of hours worked in a week during the income determination period. Divide the average wage by the average hours to arrive at an hourly wage. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned.
- (d) Enter 0 for a displaced homemaker who had no wages.

NOTE: This includes **ANY** employment and/or subsidized training where a wage was paid. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned.

Item #37 Limited English Language Proficiency

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if a participant has limited ability in speaking, reading, writing or understanding the English language and (i) whose native language is a language other than English or (ii) who lives in a

- family or community environment where a language other than English is the dominant language.
- (c) Enter "2" if the applicant does not meet the conditions described above.

Item #38 Highest Grade Completed

- (a) Enter the highest school grade completed by the applicant. The appropriate responses are as follows:
- 00=No school grades completed
 - 01-12=Number of elementary/secondary school grades completed
 - 13-15=Number of college, or full-time technical or vocational school years completed
 - 16=Bachelor's degree or equivalent
 - 17=Education beyond the Bachelor's degree
 - 87=Attained High School Diploma
 - 88=Attained GED or Equivalent
 - 89=Attained Certificate of Attendance/Completion
 - 90=Attained Other Post-Secondary Degree or Certification-to cover situations where participants received a post-secondary vocational or technical degree or certificate, associates degree, or any other post-secondary degree or certificate (excluding coding value 16=Bachelor's Degree or Equivalent).
 - 91=Attained an associates diploma or degree (AA/AS)

Item #39 Unemployment Compensation (UC)

- (a) Enter the appropriate response.
- 1-Claimant
 - 2-Exhaustee
 - 3-Neither claimant or exhaustee
- (b) Enter "1" if the applicant is a person who, at the time of application in the program, meets these conditions:
- i. filed a claim and has been determined monetarily eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and
 - ii. whose benefit year or compensation, by reason of an extended duration period, has not ended and
 - iii. who has not exhausted his/her benefit rights, and,
 - iv. but was not referred to service through the state's Worker Profiling and Reemployment System (WPRS).
- (c) Enter "2" if the applicant has exhausted all UC benefit rights for which he/she has been determined monetarily eligible, including extended supplemental benefit rights.
- (d) Enter "3" if the applicant was neither an U.C. claimant nor an exhaustee.

NOTE: An eligible U.C. claimant is an applicant who has been determined to be monetarily eligible for benefit payments under one or more State or Federal unemployment compensation programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights.

Item #40 Referred by Worker Profiling and Reemployment Services (WPRS)

- (a) Record the appropriate number.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant is a person who, at the time of application in the program,
 - i. filed a claim and has been determined monetarily eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights, and
 - ii. was referred to service through the state's Worker Profiling and Reemployment Services (WPRS) system.

Item #41 Homeless Applicants (Adult/Youth)

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant (**adult or youth**) is a person who lacks a fixed, regular, adequate night time residence.

NOTE: This definition includes any applicant who has a primary night time residence that is a publicly or privately operated shelter for temporary accommodation; an institution providing temporary residence for applicants intended to be institutionalized; or a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings; or a person under 18 years of age who absents himself or herself from home or place of legal residence without the permission of his or her family (i.e., runaway youth). This definition does not include:

- i. An applicant imprisoned or detained under an Act of Congress or State law.
- ii. An applicant who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be recorded as homeless.

Item #42 Determined Eligible for Adult

Enter the appropriate response.

- 1-Yes
- 2-No

NOTE: In the event that funds allocated to a local area for adult employment and training activities are limited, priority for intensive and training services must be given to recipients of public assistance and other low-income applicants in the local area. Since funding is generally limited, local areas shall determine the availability of funds and the process by which any priority will be applied. The process of determining whether to apply the priority of services does not necessarily mean that only the recipients of welfare and other low-income applicants may receive WIA adult funded intensive and training services when funds are determined to be limited in the local area. [Reference: WIA Title I Section 134(d)(4)(E), 134(d)(2)(e), WIA Final Rules Section 663.600.]

Item # 43 Determined Eligible for Younger Youth

Enter the appropriate response.

- 1-Yes
- 2-No

NOTE: Applicants 14 though 18 years of age are known as Younger Youth. Applicants who are 18 years old may receive services under Dislocated Worker, Adult, or Youth.

Item #44 Determined Eligible for Older Youth

Enter the appropriate response.

- 1-Yes
- 2-No

NOTE: Applicants 19 though 21 years of age are known as Older Youth. Applicants who are 19 through 21 years old may receive services under Dislocated Worker, Adult, or Youth (whichever is most beneficial to the applicant).

Item #45 Determined Eligible for Dislocated Worker

Enter the appropriate response.

- 1-Yes
- 2-No

NOTE: A dislocated worker is an applicant who-

1.
 - (a) has been terminated or laid off, or who has received a notice of termination or layoff, from employment;
 - (b) (I) is eligible for or has exhausted entitlement to unemployment compensation; or (II) has been employed for a duration sufficient to demonstrate, to the appropriate entity at a one stop center referred to in section 134(c), attachment to the workforce, but is not eligible for unemployment compensation due to insufficient earnings or having performed services for an employer that were not covered under a State unemployment compensation law; and
 - (c) is unlikely to return to a previous industry or occupation;
2.
 - (a) has been terminated or laid off, or has received a notice of termination or layoff, from employment as a result of any permanent closure of, or any substantial layoff at, a plant, facility, or enterprise;
 - (b) is employed at a facility at which the employer has made a **general announcement** that such facility will close within 180 days; or
 - (c) for purposes of eligibility to receive services other than training services described in section 134(d)(4), intensive services described in section 134(d)(3), or supportive services, is employed at a facility at which the employer has made a general announcement that such facility will close;
3. was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of **general economic conditions in the community in which the applicant resides or because of natural disasters**; or
4. is a displaced homemaker.
5. is a military service member. Under the priority of services provisions of the Jobs for Veterans Act, separating service members who, upon discharge, meet the eligibility criteria for dislocated workers would be afforded priority over applicants who are not veterans.
6. is a military spouse.

Item #46 Offender (Adult/Youth)

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the applicant (adult or youth) is a person who, at the time of application in the program, meets either condition:

- i. is or has been subject to any stage of the criminal justice process for committing a status offense or delinquent act, or
 - ii. requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction for committing delinquent acts, such as crimes against persons, crimes against property, status offenses, or other crimes.
- (c) Enter "2" if the applicant does not meet any one of the conditions described above.

Item #47 Runaway Youth

- (a) Enter the appropriate response.
1-Yes
2-No
- (b) Enter "1" if the applicant is a runaway youth.
- (c) Enter "2" if the applicant is not a runaway youth.

NOTE: A runaway youth is a youth under 18 years of age that absents himself or herself from home or place of legal residence without the permission of parents or legal guardian. An emancipated youth is not included in this definition.

Item #48 Pregnant or Parenting Youth

- (a) Enter the appropriate response.
1-Yes
2-No
- (b) Enter "1" if the applicant is a person who is either under 22 years of age and who is pregnant, or an applicant (male or female) who is providing custodial care for one or more dependents under age 18.
- (c) Enter "2" if the applicant does not meet the conditions described above.

Item #49 Foster Child

- (a) Enter the appropriate response.
1-Yes
2-No
- (b) Enter "1" if the applicant is a person who, at the time of application, is in foster care or has been in the foster care system.
- (c) Enter "2" if the applicant does not meet the condition described above.

Item #50 Youth Who Needs Additional Assistance

- (a) Enter the appropriate response.
1-Yes
2-No

- (b) Enter "1" if the applicant is a person who is between the ages of 14 and 21, and requires additional assistance to complete an educational program, or to secure and hold employment as defined by State or local policy.
- (c) Enter "2" if the applicant does not meet the conditions described above.

Item #51 Basic Literacy Skills Deficient

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the participant is a person who computes or solves problems, reads, writes, or speaks English at or below the 8th grade level or is unable to compute or solve problems, read, write, or speak English at a level necessary to function on the job, in the applicant's family, or in society.
- (c) Enter "2" if the applicant does not meet the conditions described above.

NOTE: Grade level scores below 9.0(e.g., 8.9) should be considered as at or below the 8th grade level.

Item #52 School Status at Participation

- (a) Enter the highest grade completed by the applicant at the time of WIA eligibility (See Item #55), using the following codes:
 - 1-Student, H.S. or less (In-School)
 - 2-Student, attending post-H.S. (In-School)
 - 3-Out-of-School; H.S. dropout (Not attending School)
 - 4-Out-of-School; H.S. graduate with employment difficulty (Not attending School H.S. graduate)
 - 5-Out-of-School; H.S. graduate with no employment difficulty (Not attending School H.S. graduate)
 - 6-In School, Alternative School
- (b) Enter "1" if the applicant has not received a secondary school diploma or its recognized equivalent and is attending any secondary school (including elementary, intermediate, junior high school, whether full or part-time), or is between school terms and intends to return to school.
- (c) Enter "2" if the applicant has received a secondary school diploma or its recognized equivalent and is attending a post-secondary school or program (whether full or part-time), or is between school terms and intends to return to school.

- (d) Enter "3" if the applicant is no longer attending any school and has not received a secondary school diploma or its recognized equivalent.
- (e) Enter "4" if the applicant is not attending any school and has either graduated from high school or holds a GED. In addition is basic skills deficient, unemployed, or under employed.
- (f) Enter "5" if the applicant is not attending any school and has either graduated from high school or holds a GED. In addition is not basic skills deficient and not unemployed and not underemployed.
- (g) Enter "6" if the applicant has not received a secondary school diploma or its recognized equivalent and is attending an alternative high school or an alternative course of study approved by the local educational agency whether full or part-time.

GRADE LEVELS

When recording grade levels, for reading or math a three-digit number should be recorded. For example, if an applicant tests at 11.3 grade level, record 113. The first two characters (11) indicate the grade and the third character (3) indicates the number of months completed within that grade. Another example, if the applicant tests 07.6 record 076. An 07 indicates the grade and 6 indicates the number of months completed within that grade.

Item #53 English Reading Level Score (Youth)

Record the grade level equivalent in English reading at which the applicant is functioning at program entry as determined by a generally accepted standardized or criterion-referenced test (administered within the last 12 months) or a school record of reading level in English (determined within the last 12 months).

Additional codes may be used as appropriate:

- 130 for applicants assessed as Grade 12.9+ and above
- 870 for applicants who were not tested and who are obviously below the 9th grade level
- 880 for applicants who refused testing or who otherwise could not be tested or for whom testing was not needed

Item #54 Computational Math Score (Youth only)

Record the grade level equivalent in math (also called quantitative or computational skills) at which the applicant is functioning at program entry as determined by a generally accepted standardized test or comparable score on a criterion-referenced test (administered within the last 12 months) or a school record of math skills level (determined within the last 12 months).

Additional codes as may be used as appropriate:

- 130 for applicants assessed as Grade 12.9+ and above
- 870 for applicants who were not tested and who are obviously below the 9th grade level
- 880 for applicants who refused testing or who otherwise could not be tested or for whom testing was not needed

Item #55 WIA Eligibility Date (Youth)

Enter the month, day, and year (MMDDYYYY) the participant was determined eligible for WIA.

NOTE: This date (same as certification date) should be on or after application date.

YOUTH GOALS (YOUNGER YOUTH)

A one-goal minimum per year is required for all younger youth who need to attain basic skills, work readiness skills, or occupational skills. A maximum of three goals per year may be set for purposes of the youth skill attainment measure. Goals should be set at the point of assessment. If the younger youth is basic skills deficient, setting one basic skills goal is a requirement. The types of Younger Youth skill are as follows:

TYPE 1=Basic skills-Basic education skills include reading comprehension, math computation, writing, speaking, listening, problem solving, reasoning, and the capacity to use these skills.

TYPE 2=Occupational skills-primary occupational skills encompass the proficiency to perform actual tasks and technical functions required by certain occupational fields at entry, intermediate or advanced levels. Secondary occupational skills entail familiarity with and use of set-up procedures, safety measures, work-related terminology, record keeping and paperwork formats, tools, equipment and materials, and breakdown and clean-up routines.

TYPE 3=Work readiness skills-Work readiness skills include world of work awareness, labor market knowledge, occupational information, values clarification and personal understanding, career planning and decision-making, and job search techniques (resumes, interviews, applications, and follow-up letters). They also encompass survival\daily living skills such as using the phone, telling time, shopping, renting an apartment, opening a bank account, and using public transportation. They also include positive work habits, attitudes, and behavior such as punctuality, regular attendance, presenting a neat appearance, getting along and working well with others, exhibiting good conduct, following instruction and completing tasks, accepting constructive criticism from

supervisors and co-workers, showing initiative and reliability, and assuming the responsibilities involved in maintaining a job. This category also entails developing motivation and adaptability, obtaining effective coping and problem-solving skills, and acquiring an improved self-image.

Item #56 Goal #1

- (a) Enter the appropriate goal type from the list below.
 - 1-Basic Skills
 - 2-Occupational Skills
 - 3-Work Readiness Skills
- (b) Enter **Date Goal #1** was set- month, day, and year (**MMDDYYYY**).

NOTE: The date goal was set is the date a goal was identified for the youth, except that the date of the first goal set must be recorded as the participation date.

Item # 57 Goal #2

- (a) Enter the appropriate goal type from the list below.
 - 1-Basic Skills
 - 2-Occupational Skills
 - 3-Work Readiness Skills
- (b) Leave blank if goal #2 not set.
- (c) Enter **Date Goal #2** was set- month, day, and year (**MMDDYYYY**).

Item #58 Goal #3

- (a) Enter the appropriate goal type from the list below.
 - 1-Basic Skills
 - 2-Occupational Skills
 - 3-Work Readiness Skills
- (b) Leave blank if goal #3 not set. (See Youth Goal section above for definition)
- (c) Enter **Date Goal #3** was set- month, day, and year (**MMDDYYYY**).

NOTE: Information on additional youth goals may be recorded on WIA Status and Termination Form

Item #59 Displaced Homemaker

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the participant has been providing unpaid services to family members in the home and;

- i. has been dependent on the income of another family member but is no longer supported by that income and;
- ii. is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.

Item #60 Referred by Rapid Response (Dislocated Worker)

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the participant was referred by Rapid Response, otherwise,
- (c) Enter "2" if the participant does not meet the conditions described above.

Item #61 Date of Actual Qualifying Dislocation

Enter the last date, month, day, year, (MMDDYYYY), the participant worked with the employer of dislocation. (Record the date of separation or dislocation from employment. This date is the last day of employment at the dislocation job. If there is no dislocation job (e.g., displaced homemaker), leave "blank".

Item #62 Wage at Date of Dislocation

Enter the hourly wage of the job of dislocation. The wage should be greater than zero.

Item #63 Date of Program Participation (Registration Date)

Enter month, day, year (MMDDYYYY) of services received.

NOTE: Following a determination of eligibility, participation in a program begins when the participant receives a service funded by the program.

Item #64 Date of First Core Service(s)/First Youth Service

Record the MMDDYYYY the participant began receiving core services. Do not include unassisted core services that are informational or self-service.

NOTE: This date is DATE OF PROGRAM PARTICIPATION (Item # 63).

Item # 65 Received Core Self-Services and Informational Activities

- (a) Enter the appropriate response.
 - 1-Yes

- 2-No
- (b) Enter "1"- if the participant received core self-service and informational activities. Self-service and informational activities are those core services accessible to the general public electronically or through a physical location that are designed to inform and educate participants about the labor market and their employment strengths, weaknesses, and the range of services appropriate to their situation, and that do not require significant staff involvement with the participant.
 - (c) Enter "2" if the participant did not receive any core self-service and informational activities as described above.

Item # 66 Received Workforce Information Services

- (a) Enter the appropriate response.
 - 1-Yes
 - 2-No
- (b) Enter "1" if the participant received workforce information services which includes, but is not limited to the following:
 - i. providing information on state and local labor market conditions; industries,
 - ii. occupations and characteristics of the workforce;
 - iii. area business identified skills needs;
 - iv. employer wage and benefit trends;
 - v. short- and long-term industry and occupational projections;
 - vi. worker supply and demand; and job vacancies survey results. Workforce information also includes
 - vii. local employment dynamics information such as workforce availability;
 - viii. business turnover rates;
 - ix. job creation;
 - x. job destruction;
 - xi. new hire rates,
 - xii. worker residency,
 - xiii. commuting pattern information; and
 - xiv. the identification of high growth and high demand industries.
- (c) Enter "2" if the participant did not receive any workforce information services as described above.

Item #67 Participant Attestation and Release / Signature of Participant/Parent or Guardian

The participant must review the information recorded on the application form, read the certification statement and date and sign as indicated. If the participant is a minor, a parent or guardian must sign.

NOTE: Although WIA generally requires the signature of a parent, guardian, or next of kin (legal adult relative) on the enrollment application to serve minors, there are situations when service can and must be provided to youths without the signature of a parent or guardian. Minors in a non-dependent status are clearly those who must be served at their own request. A "non-dependent minor" is defined as an individual under the age of 18 who by marriage, official decree, or de facto circumstances is not under parental control and has means of support other than a parent or a guardian.

The following schedule lists the status of minors who can sign for themselves and the verification suggested:

<u>Status</u>	<u>Form of Verification</u>
Married	Copy of marriage certificate
Previously married	Copy of divorce or annulment decree
Widow or widower	Copy of death certificate
Emancipated by parent: A. In writing B. By parole (word of mouth)	Copy of statement *Collateral contact with an adult person having knowledge of the circumstances
Participant living at home of parent/guardian	Signature of parent/guardian

Unless:

A. Participant alleges not under parental control or support	*Collateral contact with an adult person or agency having knowledge of the circumstances
--	--

OR

B. Family is dysfunctional (e.g. parents are absent or uncooperative regarding the child's welfare)	*Collateral contact with an adult person or agency having knowledge of the circumstances matters pertaining
C. Runaways and other non-dependent agency youth	*Collateral contact with an adult person or agency having knowledge of the circumstances matters pertaining

*The collateral contact for this item is only valid if the adult person or agency having knowledge of the circumstances is:

1. a next of kin (legal adult relative);
2. a guardian ad item or "next friend," which is a court appointed guardian for the purposes legal_proceedings; or
3. an official at a recognized local or state institution.

Item #68 Certification

The certifying staff person must review the application for accuracy, legibility, and completeness, then date and sign as indicated. The certifying staff person is an individual authorized by the Grantee to verify the eligibility or non-eligibility of the participant.

Comments:

This space may be used to record any additional information or comments (not required to be reported on the WIASRD, quarterly reports, annually report or any other reports required by the WIA (Federal or State)).