

WIOA PARTICIPANT FILE FORMAT

SECTION ONE

(Attach to left inside cover)

Check all appropriate areas in each file section and ensure that all applicable forms and documentation are filed in the appropriate section

VaWC PRINT-OUTS

INTAKE/DOCUMENTATION TO SUPPORT ELIGIBILITY

(Please file documentation in order from top to bottom)

VaWC Print-outs *(ONE copy of the most up-to-date services, but only if required by local policy)*

Signed WIOA application *(VaWC or local area developed paper application)*

State Eligibility Checklist

General Eligibility

Age verification documentation

Citizenship verification documentation

Selective service verification documentation *(if applicable)*

Specific Eligibility

Income Determination Form/Family Size *(if applicable) (adult and youth only)*

Income verification documentation *(if applicable) (adult and youth only)*

Public Assistance verification docs *(if applicable) (adult and youth only)*

Youth Barrier documentation *(youth only)*

School status Verification Form and Docs *(Youth only: in-school or out of school)*

Disability verification docs *(if applicable)*

Dislocated worker proof of separation *(dislocated worker only)*

UI benefit determination/payments *(dislocated worker only)*

Unlikely to Return Analysis/Statement *(if applicable)* accompanied with LMI print outs for job/industry *(dislocated worker only)*

Dislocated - Self Employed verification *(if applicable) (dislocated worker only)*

Displaced Homemaker/Displaced Homemaker - Military Spouse *(if applicable) (dislocated worker only)*

Additional required documentation

EEO form – signed *(copy given to client)*

Grievance Procedures – signed *(copy given to client)*

Other local area required administrative forms

****Counts as Youth Program element**

WIOA PARTICIPANT FILE FORMAT

SECTION TWO

(Attach to second flap)

Check all appropriate areas in each file section and ensure that all applicable forms and documentation are filed in the appropriate section

VaWC CASE NOTES

ASSESSMENT(S)

INDIVIDUAL EMPLOYMENT PLANS/ INDIVIDUAL SERVICE STRATEGIES

STAFF ASSISTED CAREER SERVICES

(Please file documentation in order from top to bottom)

VaWC Case Notes

Updated Case Notes *(most recent note on top to oldest note on the bottom)*

Individual Employment Plans/Individual Service Strategies

IEP/ISS completed, signed by both client and case manager

IEP/ISS reviews and updates completed, signed by both client and case manager

Assessments

Basic Skill Levels in Reading and Math *(if applicable) (e.g. TABE tests, Work Keys, etc...)*

Career/Vocational Assessment *(if applicable) (e.g. Career Choice, Career Scope, COPS, CAPS, etc...)*

Self-directed assessment from other sources such as from the Internet *(if applicable)*

School Records *(if applicable) (e.g. IEPs, standardized testing, etc...)*

Written assessment of participant *(if local area requires a written assessment)*

Staff-assisted Career Services

Documentation of WIOA staff-assisted Career services *(only if required by local policy) (Must ensure that these are not a duplication of Career services provided by Wagner-Peyser).*

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SECTION THREE

Check all appropriate areas in each file section and ensure that all applicable forms and documentation are filed in the appropriate section

DEGREE, DIPLOMA, CERTIFICATE, OR CREDENTIAL

RESUME

REFERRALS

CORRESPONDENCE

(Please file documentation in order from top to bottom. Case notes should be reflective of services provided.)

Attainment of Degree, Diploma, Certificate or Credential- Check the appropriate category and provide supporting documentation

- Copy of Degree or Diploma
- Copy of Occupational Skills Certificate
- Copy of Academic records/transcripts showing conferral of a degree, diploma, or certificate
- Copy of Occupational Skills License
- Copy of CRC

Resume

- Copy of participant's resume

Referrals- Check the appropriate category and provide supporting documentation

- Referral form(s)/ referrals
- Individual counseling *(if applicable)*
- Comprehensive guidance and counseling ****** *(if applicable)*
- Career guidance and counseling *(if applicable)*

Correspondence

- Miscellaneous correspondence (letters or emails to and from clients, general activity flyers, etc.)

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SECTION FOUR

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TRAINING

(Please file documentation in order from top to bottom. Separate employment and training sections with blank/colored piece of paper)

Training- Check appropriate category and provide supporting documentation

Type

- OJT
- Occupational skills training
- Incumbent worker training
- Workplace training with related instruction, including cooperative education training
- Private sector training
- Skills upgrading and retraining
- Entrepreneurial training**
- Job readiness training
- Work Experience (paid/unpaid) **
- Adult Ed/ Basic literacy/Basic Skills **
- Customized training
- Transitional jobs in accordance with Subsection (d)(5) *(adult/DW only)*
- Tutoring/Study Skills ** *(youth only)*
- Work readiness ** *(youth only)*
- Leadership Development ** *(youth only)* – description, progress, attendance, completion
- Adult Mentoring ** *(youth only)* - description, progress, attendance, completion
- Alternative School services ** *(youth only)* - description, progress, attendance, completion
- Prep for/transition to postsecondary education and training** *(youth only)*
- Career counseling, career awareness, career exploration** *(youth only)*
- Financial literacy education** *(youth only)*

Documentation

- Customer Choice in training form
- Training Progress- *(grades, records, transcripts)*
- ITA's/Training Authorizations,
- School or training provider invoices, etc. applicable for training services
- FAFSA application
- Financial Award Analysis and documentation on availability of other funds *(e.g. Pell Grants, etc...)*
- Curriculum information-*(required course listings for training program)*
- Labor Market Information *(show training is high demand/high growth occupation)*
- Vouchers, Invoices, etc. for OJT/Work Exp. related expenses
- Timesheets signed by participant and supervisor
- Performance Evaluations signed by participant and supervisor
- OJT/Work Exp. contract signed by appropriate parties
- OJT/Job Description

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SECTION FIVE

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INCENTIVES

SUPPORTIVE SERVICES**

(Please file documentation in order from top to bottom. Separate employment and training sections with blank/colored piece of paper)

Incentives

Incentives provided *(youth only)*

Documentation *(Please file documentation in order from top to bottom)*

Supporting Documentation of incentives provided and explanation of need *(see local policy for accepted documentation sources.-ex. Grades, Diploma, assessment scores showing increase in basic skills, etc.)*

Copy of local area or provider policy on Incentives

Supportive Services ** - Check the appropriate category and provide supporting documentation

(Please file documentation in order from top to bottom)

Transportation

Family Care

Medical

Temporary Shelter

Needs based payments

Other

Documentation *(Please file documentation in order from top to bottom)*

Expenditures tracker *(if used by local area-see local policy. Depicts training, work experience and supportive service dollars- cap amounts, used/unused funds)*

Supporting Documentation of services *(see local policy for accepted documentation sources.-ex. MapQuest and attendance records for mileage reimbursement; invoices/receipts for clothing/tools etc...)*

Supportive Services determination form completed and signed by client and case manager *(must show other resources attempted/used/eliminated for supportive services)*

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WIOA PARTICIPANT FILE FORMAT

SECTION SIX

(Attach to last flap)

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FOLLOW-UP

EMPLOYMENT VERIFICATION

CLOSURE/EXIT REASON

MISCELLANEOUS DOCUMENTS

(Please file documentation in order from top to bottom. Separate employment and training sections with blank/colored piece of paper)

Follow-Up **

- Follow-Up contact log/information collected (employment, credential, etc.)
- Follow-up Activities/Services provided
- Documentation to support Follow-Up activities/services

Employment Verification

- Employment verification form signed by employer, letter from employer
- Copy of Work Number or other online employment verification documentation

Closure/Exit Reason

- VaWC Outcome Screens, Exit Screens, etc... *(if required by local area)*

Exclusions: *(if applicable) (provide supporting documentation and detailed case note thoroughly describing the reason for using the exclusion)*

Institutionalized

Health/medical

Deceased

Reserve Forces called to active duty

Relocation to a mandated program *(youth only)*

Invalid or missing SSN

Supporting Documentation regarding Exit/Exclusion reason

Miscellaneous Documents

- Any other documentation that does not fall under other categories

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