

**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** Other local area required administrative forms EO & Grievance Policy (please give a signed copy to participant)**\*\*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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## WIOA PARTICIPANT FILE FORMAT

### 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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## WIOA PARTICIPANT FILE FORMAT

### SECTION FOUR

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

#### 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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## WIOA PARTICIPANT FILE FORMAT

### SECTION FIVE

Check all appropriate areas in each file section and ensure that  
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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)

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

**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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