

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK**

REGISTRATION FORM

General Overview: The Registration Form has been designed to collect all data necessary to meet Federal and state reporting requirements. If the applicant becomes a registrant, this information becomes part of the registrant record and is subject to retention requirements. The registration form should be maintained for three (3) years following the intake date for the applicant who is ineligible for the program or, for other reasons, is not enrolled in the program.

The applicant is required to sign and date the registration form certifying the accuracy of the information and the understanding that falsification may result on exiting 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 also required.

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

The following pages contain the registration form with the data elements numbered then pages describing the data elements.

NOTE: Accuracy and timelines are very important. Please follow individual WDC policy timelines.

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X REF SAMPLE	DATA ELEMENTS	DESCRIPTION																						
1	Social Security Number*	<p>Record the nine-digit identification number assigned to the applicant by the Social Security Administration under the Social Security Act.</p> <p>In accordance with the Privacy Act of 1974, the Department or a recipient/subrecipient may not deny to any individual any right, benefit or privilege provided by law because of the individual's refusal to disclose his/her Social Security Number. The recipient/subrecipient can properly require disclosure of an individual's Social Security Number when wages or stipends are paid. Applicants should be advised of the uses made of the Social Security Number at intake.</p> <p>Applicant should also be advised that the Social Security Number is used for the payment of wages and needs-based/related payments even though it may not be possible at intake to determine which form of payment the applicant may receive.</p> <p>If the applicant cannot produce a valid Social Security Number within 24 hours, it will be necessary to construct a pseudo Social Security number. The pseudo number will connect the temporary number to the applicant's name as well as his/her birth date as follows:</p> <p>Enter the code that reflects the first letter of the applicant's last name followed by his/her date of birth in the form of YY/MM/DD, for a total of nine (9) positions:</p> <p><u>Examples:</u></p> <table border="0" style="margin-left: 40px;"> <thead> <tr> <th><u>Name</u></th> <th><u>Date of Birth</u></th> <th><u>Pseudo SSN</u></th> </tr> </thead> <tbody> <tr> <td>Joe Smith</td> <td>February 6, 1944</td> <td>019-44-0206</td> </tr> <tr> <td>Jane Doe</td> <td>November 8, 1946</td> <td>004-46-1108</td> </tr> <tr> <td>Chen Wu</td> <td>October 12, 1911</td> <td>023-11-1012</td> </tr> </tbody> </table> <table border="0" style="margin-left: 40px;"> <thead> <tr> <th><u>1st Letter Name</u></th> <th><u>Code</u></th> </tr> </thead> <tbody> <tr> <td>A</td> <td>001</td> </tr> <tr> <td>B</td> <td>002</td> </tr> <tr> <td>C</td> <td>003</td> </tr> <tr> <td>D</td> <td>004</td> </tr> </tbody> </table>	<u>Name</u>	<u>Date of Birth</u>	<u>Pseudo SSN</u>	Joe Smith	February 6, 1944	019-44-0206	Jane Doe	November 8, 1946	004-46-1108	Chen Wu	October 12, 1911	023-11-1012	<u>1st Letter Name</u>	<u>Code</u>	A	001	B	002	C	003	D	004
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X	024
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Z	026

2 Name Enter the individual's legal last name, first name, and middle initial. ALL paperwork must have last name first.

3 Subrecipient Code Record the Sub Code. The code is a five-digit alphanumeric code. Refer to the Sub Code Table in your area.

4 Address Enter the home address (number, street and apartment number, if any). For those applicants without a dwelling, residence includes both physical presence and a declaration of intent to remain in the area served by the WDC.

Note: The purpose of the declaration of intent is to allow the provision of services to those most in need who do not have a dwelling.

County Enter the City and County code. The County code two-digit alpha is found in Appendix A. If you update the address at a later date, never change the county code. It must remain the same as the registration form.

KG = King County
KS = Within Seattle City Limits

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- | | | |
|-----------|---|--|
| | Zip Code | Enter the five-digit ZIP Code of the applicant's home address. The four-digit code is optional. |
| | Home Telephone | Enter the home telephone number of the applicant, including area (or number at which the applicant may be reached.) If there is no number, enter 999-9999. |
| | Email | Enter the individual's Email. If no Email leave blank. |
| 5 | ID Number | Enter the ID number of the local area representative. |
| 6 | Intake Date | Record the month, day, and year on which the applicant applied for entry into the program. |
| 7 | Birth Date/Age* | Enter the applicant's date of birth. (mm/dd/yyyy) |
| 8 | Gender* | Mark "1" if the applicant is male or "2" if the applicant is female. |
| 9 | Individual w/Disability* (Mark only one) | <p>Mark 1 for any individual who has a physical (motion, vision, hearing) or mental (learning or developmental) impairment which substantially limits one or more of such person's major life activities and has a record of such as impairment, or is regarded as having such an impairment.</p> <p>Mark 2 if the individual's physical or mental impairment constitutes or results in a substantial impediment to employment.</p> <p>Mark 3 if the individual is not disabled.</p> |
| 10 | Race* (Mark one or more) | Mark one or more designations of the applicant's race/ethnic group from among the following categories: |
| | [IF none are marked #11 MUST BE YES.] | <p>Note: the category which most clearly reflects the individual's recognition in his/her community should be used for purpose of reporting.</p> <ol style="list-style-type: none"> 1. Native American/Alaskan Native: A person having origins in any of the original peoples of North and South American (including Central American), and whose cultural identification is through tribal affiliation or community recognition. 2. Asian: A person having origins in any of the original |

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people of the far East, Southeast Asia, or the Indian Subcontinent. This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam (e.g. Indian Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkian, and Bhuton.

3. Black/African American: A person having origins in any of the black racial groups of Africa.
4. Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
5. Caucasian: A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

11 Ethnicity*

Hispanic/Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

NOTE: If Ethnicity is "2" one of the Race must be a "1".

12 Labor Status*

Mark "1" if individual is employed.

Employed. An employed individual is one who, during the 7 consecutive days prior to registration, did any work at all as a paid employee, in his or her own business, profession or farm, worked 15 hours or more as an unpaid worker in an enterprise operated by a member of the family, or 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.

Mark "2" if the individual is not employed.

Not employed. An individual who does not meet the definition of employed.

If employed. Indicate hours per week.

13 Unemployment Comp.

Mark: 1) Claiming unemployment, 2) Exhausted or 3) Neither.

Mark 1 if the individual has filed a claim and has been determined monetarily eligible for benefit payments under one or more state or Federal unemployment compensation program, and who has not exhausted

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benefit rights or whose benefit period has not ended.

Mark 2 if the individual has exhausted all U.E. benefit rights for which the individual has been determined monetarily eligible, including extended supplemental benefit rights.

Otherwise mark 3, neither.

14 Area Defined

Not used at this time.

**15 MILITARY
SERVICE*
Veterans**

Mark 1 if the individual is a person who served in the active US military, naval, or air service for a period less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable.

Mark 2 if the individual met the conditions described above for more than 180 days.

Mark 3 if the individual is not a veteran.

16 From

Record the from and to dates of service

17 To

18 Campaign Veteran

Mark 1 if the individual is a veteran who served on active duty in the US 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). For campaigns occurring after this date, updated information may be obtained on the OPM website: <http://www.opm.gov/betrans/html/vgedal2.htm>.

Mark 2 if the individual served in the active US 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, 1974, 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).

Otherwise mark 3.

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NOTE: If both 1 and 2 apply, mark 2 for Vietnam Era Veteran.

- 19 Disabled Veteran** Mark 1 if the individual is a veteran who is entitled to compensation regardless of rate (include those rated at 0%) for a disability under laws administered by the Department of Veterans' Affairs (DVA), or who was discharged or released from active duty because of a service-connected disability.
- Mark 2 if the individual is rated at 30% or more by the DVA, or at 10 or 20 percent for a serious employment disability.
- Otherwise mark 3.
- 20 Recently Separated Veterans** Mark 1 if the veteran who applied for participation under Title I-B of WIA within 48 months after discharge or release from active US military, naval, or air service.
- Otherwise mark 2.
- 21 Selective Service** Mark one designation for the applicant's selective service.
- To verify or register online go to:
<http://www.sss.gov/>
1. Registered. Registered as required by Section 3 of the Military Selective Service Act.
- Male applicants 18 to 26. Federal law requires that men born after December 31, 1959, must register with Selective Service within 30 days of their 18th birthday. A male may register up to 120 days prior to his 18th birthday. When a participant has his 18th birthday while enrolled in WIA, registration for selective service must occur. The only men not required to register are nonimmigrant aliens, persons not eligible for WIA, men on activity duty in the Armed Forces, including students at the military service academies, and individuals who are unable to register because they are hospitalized, incarcerated, or otherwise institutionalized at the time required to register. Men unable to register must register within 30 days of their discharge or release. Members of the National Guard, Reserve, Civil Air Patrol, ROTC students, armed forces enlistees, and delayed entry program individuals, handicapped or disabled men must register. All

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aliens, permanent resident status individuals, refugees and parolees, and documented aliens (illegal, dual nationals) must also register.

Alien males born after December 31, 1959, who entered the United States before attaining their 26th birthday, are subject to the registration requirements. Those who entered after attaining their 26th birthday are exempt from the registration requirements. INS Form 1-94 (Arrival-Departure Record) and the INS Form 1-551 (Alien Registration Receipt Card) commonly called the "Green Card" held by aliens, will show the birth date of the alien.

Male applicants 26 years and older. For males born after December 31, 1959, and 26 years of age and older a three-step process should be followed.

- a. A determination shall be made as to whether the male has complied with Section 3 of the Military Selective Service Act. The same procedures as are used for making such a determination with respect to males 18 to 25 may be used.

If the male has complied with the above-cited sections, no further action is necessary and an otherwise eligible male may participate in WIA programs.

- b. A determination shall be made as to whether the male has received an honorable discharge from the U.S. military services. If the male has received an honorable discharge from the military, no further action is necessary and an otherwise eligible male may participate in WIA programs. Appropriate documentation would include making a copy of the individual's military discharge (form DD-214) for the intake record.

If the male does not have an honorable discharge, the following determination must be made.

- c. A determination shall be made whether the male has a visible or obvious disability that would permanently disqualify him from military service. If the male has such a disability, no further action is necessary and an otherwise eligible male may participate in the WIA program. Appropriate documentation would include a notation of the type of disability observed by the WIA representative in the individual's intake record.

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If the male does not have a visible or obvious disability that would permanently disqualify him from military service, nor an honorable discharge, and has not complied with Selective Service's Registration requirements; the above determinations may be made in any order deemed appropriate by the WIA representative.

Determination of Whether an Applicant Knowingly and Willfully Failed to Register. The determination of whether a male applicant knowingly and willfully failed to register as required by the Military Selective Service Act shall be made by the Selective Service System. Where a WIA representative determines that a male applicant 26 years of age or older who was born after December 31, 1959, does not meet any of the qualifications contained above, the male should be advised that an advisory option is required from the Selective Service before he may be determined eligible to participate in WIA programs.

Males wishing to participate in WIA programs that do not meet any of the above qualifications are to be instructed to send information necessary for a determination to:

The Office of General Counsel
Selective Service System
National Headquarters

Necessary information consists of:

- a. The applicant's name;
- b. The applicant's current address;
- c. The applicant's date of birth;
- d. (optional) the applicant's Social Security Number; (applicants may voluntarily provide this to the Selective Service to aid in differentiating among persons with identical names. Selective Services does not, however, require this information.
- e. A statement that the applicant is requesting an advisory option under Section 3 of the Military Selective Service Act; and
- f. The Applicant's documentation regarding his reasons for not registering for the draft.

The Selective Service System (SSS) will send a Registration Status Information Letter. Upon receipt of a letter from SSS, WDAs are to determine whether the man was required to register and did so. If the

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information per the SSS letter indicates that the man was required to register and failed to do so or is not registered, and the individual is otherwise eligible, then the individual may not be enrolled in WIA. If the letter indicates that the individual was not required to register or was exempt, then the individual may be considered eligible for WIA.

If the applicant meets one of the above processes mark "1" Registered.

2. Not Registered. Registration is required by Section 3 of the Military Selective Service Act, and is not registered.
3. Not Applicable. Not required to register as required by Section 3 of the military Selective Service Act.

22 Citizenship

Mark one designation for the applicant's citizenship.

Citizenship. A citizen or naturalized citizen of the United States.

Eligible Non-Citizen. Lawfully admitted permanent resident aliens, lawfully admitted refugees and parolees, and other individuals authorized by the Attorney General to work in the United States. Enter the expiration date of the temporary alien card. If date expires during participation, INS must extend the card or the registrant must be terminated as of that date.

Non-citizen. Neither a citizen nor an eligible non-citizen.

**23 Limited English
Proficiency***

Mark "yes" if the individual has limited ability in speaking, reading, writing or understanding the English language and (a) whose native language is a language other than English or (b) who lives in a family or community environment where a language other than English is the dominant language. Otherwise mark "no".

**24 Referred
(Adult or Dislocated
Worker Only)**

Mark "1" if a UI claimant has been referred to WIA reemployment services by the Worker Profiling and Reemployment Services (WPRS) system. Otherwise mark "2".

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- 25** **Education** Record the code for the highest school grade completed by the applicant from the following list:
- 00 No school grades completed
 - 01-11 Number of elementary/secondary grades completed
- NOTE:** Individuals who completed 12th grade but did not receive a diploma or equivalent are to be coded “11”. Also individuals with a disability who successfully completed an Individual Education Program (IEP) for youth with disabilities are to be coded a “12”.
- 12 High school graduate
 - 88 Attained certificate of equivalency for a high school degree
 - 13-15 If a high school graduate or equivalent, the number of school years completed including college or full-time technical or vocational school.
 - 16 Bachelor’s degree or equivalent
 - 17 Education beyond the Bachelor’s degree
 - 18 Sixth year or more of college, Master’s degree (2-year program), Ph.D. or equivalent

NOTE: If a Dislocated Worker skip items 26 through 36.

**PUBLIC
ASSISTANCE**

- 26** **TANF** Yes. Mark “1” if the **applicant** is receiving income or money payments under the TANF Act and is not going to exhaust payments within the next 12 months.
- No. Mark “2” if the **applicant** is not receiving income or money payments under the TANF Act.
- TANF Exhaustee. Mark “3” if the **applicant** would be otherwise eligible to receive TANF assistance but is no longer receiving TANF assistance because he/she has reached either the Federal five year lifetime limit on receipt of assistance, or a State-imposed lifetime limit. This includes individuals who have no dependents under the age of 18.
- Will Exhaust Within 12 Months. Mark “4” if the

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applicant will become ineligible for assistance within 12 months due to either Federal or State-imposed duration time limits on receipt of TANF assistance.

Non-Custodial Parent. Mark "5" if the **applicant** is a non-custodial parent of a minor child. (A minor child means an individual who has not attained 19 years of age and is a full-time student in a secondary school or in the equivalent level of vocational or technical training).

- 27 **Refugee Assistance** Refugee Assistance (RCA). Mark "yes" if the **applicant** is receiving income or money payments under the Refugee Assistance Act (Public Law 96-212). Otherwise mark "no".
- 28 **General Assistance** General Assistance (GA). Mark "yes" if the **applicant** is receiving state or local government cash assistance based on need. Otherwise mark "no".
- 29 **Supplemental Security Income (SSI)** Supplemental Security Income (SSI) (SSA Title XVI). Mark "yes" if the **applicant** is receiving supplemental income or money payments pursuant to a State Plan approved under the Social Security Act, Title XVI (Supplemental Security Income for the Aged, Blind, and Disabled). Otherwise mark "no".
- 30 **Food Stamps** Food Stamps. Mark "yes" if the **applicant** is receiving, or has been determined eligible to receive in the six month period prior to registration, food stamps pursuant to the Food Stamp Act of 1977. Otherwise mark "no".
- 31 **Monthly Grant Amount or Non-Custodial Payment** Record the amount of the TANF grant if the individual is receiving TANF, or if the individual is a non-custodial parent, record the amount of the child support payment the individual is paying.
- 32 **Family Size** Record the total number of persons who are part of the applicant's family.
- "Family" means two or more persons related by blood, marriage, or decree of court, who are living in a single residence, and are included in one or more of the following categories:

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- A husband, wife, and dependent children
- A parent or guardian and dependent children
- A husband and wife

An “individual with a disability” shall, for the purpose of income eligibility determination, be considered to be an unrelated individual who is a family unit of one.

A “dependent” is totally supported by the parents. A person 18 years or older who resides in the family and who, within the last six months, has had any income totaling more than 30 percent of the OMB Poverty Income level guidelines for a family of one for 12 months may be considered a family of one.

Clarification of Dependent Child: A child will be considered a dependent child when:

1. Living with a parent or guardian and related by blood, marriage (step-child), or court decree, and
2. If 18 or older, any income of their own for the past 6 months has been less than 30% of the LLS (i.e., not self-supporting), and
3. Is not themselves:
 - a. Married or living with a dependent child, or
 - b. Receiving cash welfare payments (excluding SSI).

The phrase “living in a single residence” with other family members include temporary, voluntary residence elsewhere (e.g. attending school or college, or visiting relatives). It does not include involuntary temporary residence elsewhere (e.g. incarceration, or placement as a result of a court order).

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|-----------|-----------------------------|--|
| 33 | Family Annual Income | Refer to the Family Income page for the total includable family income (Item 8), then annualize by multiplying the family income by two (2). This is the total family income (Item 9). |
| 34 | Homeless/Runaway | Mark “yes” if the applicant lacks a fixed regular, and adequate nighttime residence; and who has a primary nighttime residence that is: <ol style="list-style-type: none">A. A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelter, and transitional housing for the mentally ill); |

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- B. An institution that provides temporary residence for individuals intended to be institutionalized; or
- C. A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

The term does not include a person imprisoned or detained pursuant to an Act of Congress or State law. Otherwise mark "no".

35 Foster Child

Mark "yes" if the **applicant** is a foster child on behalf of whom state or local government payments are made. Otherwise mark "no".

36 Low Income

Mark "yes" if the individual is in one or more of the following:

- A. Receives, or is a member of a family which receives cash payments under a Federal, State or income-based public assistance program;
- B. Received an income, or 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 USC 402) that, in relation to family size does not exceed the higher of:
 - The guideline for the equivalent period, or
 - 70 percent of the lower living standard income level, for an equivalent period;
- C. 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 (7USC 20011 et seq);
- D. Qualifies as a homeless individual, as defined in subsections (a) and (c) of section 103 of the Stewart B. McKinney Homeless Assistance Act (42 USC 11302);
- E. Is a foster child on behalf of whom State or local government payments are made; or
- F. In cases permitted by regulations promulgated by the Secretary of Labor, is an individual with a disability who meets the requirements of a program describes in subparagraph A or B above, but who is a member of a family which does not meet such requirements.

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Low income youth are eligible if he/she is one or more of the following: 1) deficient in basic literacy skills; 2) a school dropout; 3) homeless, a runaway or a foster child; 4) pregnant or a parent; 5) an offender; or 6) an individual who requires additional assistance to complete an educational program or to secure and hold employment.

Note: WIA 134 (d)(4)(E): PRIORITY – In the event that funds allocated to a local area for adult employment and training activities under paragraph (2)(A) or (3) of section 133(b) are limited, priority shall be given to recipients of public assistance and other low income individuals for intensive services and training services. The appropriate local board and the governor shall direct the one-stop operators in the local areas with regard to making determinations related to such priority.

37 Single Parent

Mark “yes” if applicant is a single, separated, divorced or widowed individual who has primary responsibility for one or more dependent children under age 18. Otherwise mark “no”.

**38 Seasonal Migrant
Farm Family**

Mark “yes” if the applicant is a Migrant Farm Family Member of a seasonal/migrant farm family. Otherwise mark “no”.

Seasonal/Migrant Farmworker.

Seasonal Farmer – means a person who, during the 12 months preceding registration was employed at least 25 days in farmwork or earned at least \$400 in farmwork; and who has been primarily employed in farmwork on a seasonal basis, without a constant year-round salary from an employer.

Migrant Farmworker – means a seasonal farmworker who performs or has performed farmwork during the preceding 12 months which requires travel such that the worker is unable to return to his/her domicile or permanent place of residence within the same day.

Farmwork – means work performed for wages in agricultural production or agricultural services as defined in the most recent edition of the Standard Industries 01-Agricultural Production-Corps; 02-Agricultural Production-Livestock excluding 027-Animal Specialties; 07-Agricultural Services excluding 074-

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Veterinary Services, 0752-Animal Specialty Services,
and 078-Landscape and Horticultural Services

39 Services Mark only those services that fund activities coordinated with the individual's WIA Title I activities, possibly through a formal co-enrollment, by inclusion in the individual's WIA service plan or through follow-up services.

Services should be marked cumulatively. A "yes" should be marked for each source of service. **Do not report sources that funded only core services classified as informational or self-service.**

**DISLOCATED
WORKER**

NOTE: If a Displaced Homemaker skip to item 46.

40 Job of Dislocation Record Employer's name for the job from which the applicant was dislocated **regardless of when it occurred.**

41 Industry Code (SIC) Record the two digit SIC of the employer entered in item 40. Refer to Appendix B.

42 Date of Actual Qualifying Dislocation Record the last day of employment at the dislocation job. If there is no dislocation job (e.g. displaced homemakers) leave blank. **Leave blank until qualifying dislocation takes place, and then record the actual dislocation date.**

Note: When determining pre-program quarters for performance measurement, the registration date will be used instead of the dislocation date when the dislocation date is missing or occurs after the registration date.

43 Job Title Record the job title from which the applicant was dislocated from the employer entered in item 40.

44 DOT/OES Code Record the nine-digit DOT code or five-digit OES code for the job title of dislocation in item 43.

45 Hourly Wage Record the hourly wage for the job title of dislocation entered in item 43. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned.

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46	Displaced Homemaker	Mark "yes" if an individual that has been providing unpaid services to family members in the home and who: (1) has been dependent on the income of another family member but is no longer supported by that income; and (2) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment; or for the purposes of carrying out innovative statewide activities noted in WIA section 134, the following definition of a displaced homemaker (contained in §134(a)(A)(vi)(I) may be used: (1) an individual who is receiving public assistance and is within 2 years of exhausting lifetime eligibility under part A of Title IV of the Social Security Act (42 USC 601 et. seg). Otherwise mark "no".
	Dislocated Worker Eligibility	Mark the one criteria that makes the individual eligible to be served under WIA 1B dislocated workers.
47	General Dislocated Worker	<ol style="list-style-type: none"> 1. Has been terminated or laid off, or who has received a notice of termination or layoff, from employment; 2. Is eligible for or has exhausted entitlement or unemployment compensation; or has been employed for a duration sufficient to demonstrate to the appropriate entity at a one-stop center referred to in section (134) 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 3. Unlikely to return to a previous industry or occupation.
	Plant Closure	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;
	180 Days Prior Notice	Is employed at a facility at which the employer has made a general announcement that such facility will close within 180 days; or
	Public Notice	For purposes of eligibility to receive services other than training services described in section 134 (d)93), or supportive services, if employed at a facility at which the employer has made a general announcement that such facility will close;

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Self Employed or Unemployed Was self-employed (including employment as a farmer, a rancher, or a fisherman) but unemployed as result of general economic conditions in the community in which the individual resides or because of natural disaster.

Displaced Homemaker Is a Displaced Homemaker.

See Item 46 for definition.

YOUTH

48 Offender Mark “yes” if the individual:
(1) has been subject to any state of the criminal justice process for whom services under WIA may be beneficial; or
(2) requires assistance in overcoming artificial barriers to employment resulting from a record of arrest or conviction.

49 Pregnant Parenting Youth Mark “yes” if the individual is 21 years of age or under and who is pregnant, or a youth male or female who is providing custodial care for one or more dependents under age 18. Otherwise mark “no”.

50 Needs Additional Assistance Mark “yes” if the individual requires additional assistance to complete an educational program or to secure and hold employment as defined by state or local policy.

- Immigrant or refugee
- One or more disabilities, including learning disabilities
- Personal or family substance abuse issues
- Gang involved/affiliated/affected
- Enrolled in alternative education program or at risk of dropping out of school
- Lacks affordable housing
- Victim of domestic violence/sexual/child abuse
- An identified social adjustment or mental health issues
- A member of a migrant family
- Has limited English speaking skills
- Not at grade parity and are one or more grade levels below grade level to their age

51 Serious Barriers Mark “yes” if the individual faces serious barriers to employment as identified by the Seattle-King County Youth Council

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Youth Council.

- Immigrant or refugee
- One or more disabilities, including learning disabilities
- Personal or family substance abuse issues
- Gang involved/affiliated/affected
- Enrolled in alternative education program or at risk of dropping out of school
- Lacks affordable housing
- Victim of domestic violence/sexual/child abuse
- An identified social adjustment or mental health issues
- A member of a migrant family
- Has limited English speaking skills
- Not at grade parity and are one or more grade levels below grade level to their age

52 Education Below Age Level

Mark "yes" if the applicant meets one of the following:

1. Lacks basic skills for appropriate grade level; or
2. Failing in one or more classes and/or credit deficient; or
3. Tests below satisfactory level for age; or
4. Has failed to meet school's standards for promotion and has been retained in a grade for one or more years. Otherwise mark "no".

53 Basic Literacy Skill Deficiency

Mark "yes" if the individual is determined:

- (1) computes or solves problems, read, writes, or speaks English at or below grade level 8.9; or functioning one year below grade level.
- (2) unable to compute or solve problems or read, write, or speak English at a level necessary to function on the job, in the individual's family, or in society.
- (3) currently behind in credit and is unlikely to graduate on schedule.

54 Education

Mark one of the following:

1. Student, High School or Less. The individual is not a high school graduate (or equivalent) and is attending any school (including elementary, intermediate, junior high school, secondary or post secondary, or alternative school or program whether full- or part-time), or is between school terms and intends to return to school.

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2. Student, Attending Post High School. The individual is a high school graduate (or equivalent) and is attending a post-secondary school or program (whether full of part-time) or is between school terms and intends to return to school.
3. Out-of-School, High School Dropout. The individual is not attending any school, is a high school dropout and is basic skills deficient, unemployed or underemployment.
4. Out-of-School High School Graduate with Employment Difficulty. The individual is not attending any school, is a high school graduate, and is basic skills deficient, unemployed or underemployment. **NOT CURRENTLY ALLOWED.**
5. Out-of-School High School Graduate with no Employment Difficulty. **NOT CURRENTLY ALLOWED.**

55 Youth Not Low Income

Mark “yes” if the applicant is not low income otherwise mark “no”.

56 Skills Level

Reading. Record either:

- a The grade level equivalent in English reading (except in Puerto Rico) at which the applicant is functioning at program entry as determined by a generally accepted standardized or criterion-referenced test (administered within the last twelve months) or a school record of reading level (determined within the last twelve months); or
- b The raw score in reading on a generally accepted standardized or criterion referenced test.

Additional coding information for reading skills:

Record “13” for applicants assessed as Grade 13 and above.

Record “87” for applicants who were not tested and who are obviously below the 7th grade level.

Record “88” for applicants who refused testing or who otherwise could not be tested.

Record “99” for applicants with a four-year college degree or above (BA, MA, Ph.D., etc)—no testing required.

Note: If the test given can be converted to a grade level, record the grade level, not the raw score. When grade level is used, the code (23b) is left blank.

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See Appendix H for CASAS Grade Level conversion chart.

If a raw score is reported, record the code for the test administered from the following code list.

1. Adult Basic Learning Examination (ABLE)
2. DOL Workplace Literacy Test (DOL-WLT)
3. Adult Literacy Test (ALT)
4. Armed Forces Qualifying Test (AFQT)
5. Basic Occupation Literacy Test (BOLT)
6. California Achievement Test (CAT)
7. Career Ability Placement Survey(CAPS)
8. CASAS Appraisal
9. CASAS Survey Achievement Test
10. General Attitude Test Battery (GABT)
11. Iowa Test of Basic Skill (ITBS)
12. Metropolitan Achievement Test (MAT)
13. Reading Job Corps Screening Test (RJCST)
14. Test of Adult Basic Education (TABE)
15. Wide Range Achievement Test (WRAT)
16. ASSET
17. Air Force
18. Wonderlic Test
19. Differential Appl Test
20. SLEP
21. Basic English Skills Test (BEST)

Note: If the test is not listed, contact the WDC for a number.

MATH

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

(b) the raw score in math skills on a generally accepted standardized or criterion-reference test

Additional coding information for math:

Record "13" for individuals assessed as Grade 13 and above.

Record "87" for individuals who were not tested and who are obviously below the 9th grade level.

Record "88" for individuals who refused testing or who otherwise could not be tested.

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Record “99” for applicants with a four-year college degree or above (BA, MA, Ph.D., etc)—no testing required.

Note: If the test given can be converted to a grade level, record the grade level not the raw score. When grade level is used, the code is left blank.

See Appendix H for CASAS Grade Level conversion chart.

If a raw score is reported, record the code for the test administered from the following list.

1. Adult Basic Learning Examination (ABLE)
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15. Wide Range Achievement Test (WRAT)
16. ASSET
17. Air Force
18. Wonderlic Test
19. Differential Appl Test
20. SLEP

**WELFARE TO
WORK**

- | | | |
|-----------|------------------------------|---|
| 57 | WorkFirst Participant | Mark “yes” if the applicant is an individual who is a participant in the State WorkFirst program. Otherwise mark “no”. |
| 58 | Substance Abuse | Mark “yes” if the applicant is an individual who is receiving, in need of, or has received substance abuse treatment. Otherwise mark “no”. |
| 59 | Poor Work History | Mark “yes” if the applicant has not worked for longer than three consecutive months in the last 12 calendar months. |

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- | | | |
|-----------|---|--|
| 60 | Long Term TANF Dependency | Mark "yes" if the applicant has received assistance under the State TANF (or the old AFDC) grant for 30 months or within 12 months will become ineligible for assistance from the State TANF program. Otherwise mark "no". |
| 61 | Basic Skills Deficiency | Mark "yes" if the applicant has English reading or computing skills at <u>or</u> below 8.9 grade level on a generally accepted standardized test or a comparable score of a criterion referenced test. Otherwise mark "no". |
| 62 | Authority Funded or Managed WtW Subsidized housing | Mark "yes" if the applicant is a resident of housing authority funded or managed by subsidized housing. Example: include Section 8, conventional public housing communities, senior housing, etc. Otherwise mark "no". |
| 63 | Other Funded/ Managed WtW Subsidized Housing | Mark "yes" if the applicant is a resident of other permanent subsidized housing. Example: Permanent housing funded by non-profits or public authority (that is not housing authority). The source of the funds for the subsidy may be federal, state, local government or charitable. Does not include time limited transitional housing. Otherwise mark "no". |
| 64 | Local Defined Barrier | Currently not used. |
| 65 | Comments | Use this space for any explanatory remarks. Explanatory comments are encouraged to indicate reason for action; providing additional tracking information indicates appropriateness of action and/or planned future action. |
| 67 | Signature of Applicant | Obtain the signature of the individual attesting that the information on the registration is true to the best of the applicant's knowledge and there is no intent to commit fraud. The signature should acknowledge that the information on the registration form would be used to determine eligibility, that the applicant may be required to document the accuracy of the information, that the information is subject to external verification and may be released for such purposes. The signature should also acknowledge that, if found ineligible subsequent to enrollment, the applicant will be exited. If the applicant |

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is exited as a result of falsifying information on the registration, he/she may also be prosecuted for fraud. Record the date the applicant signed the registration form using two digits each month, day, and year.

68 **Signature of Parent,
Guardian or
Responsible Adult
and Date**

For minors under 18 years, except minors who are heads of households*, the signature of a parent, guardian, or other responsible adult is required. Record the date the parent, guardian or responsible adult signed the registration form.

*An applicant who is responsible for more than 50 percent of the support of one of more members of a household or family, in addition to him/herself, is considered a head of household.

69 **Signature of Service
Provider
Representative**

The individual doing the interviewing and making eligibility determination will sign and date the registration form.

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**FAMILY INCOME
(Six Month Total)**

- | | | |
|----------|--------------------------|---|
| 1 | SSN | Record the nine-digit identification number assigned to the applicant by the Social Security Administration under the Social Security Act. |
| 2 | Name | Enter the individual legal last name, first name, and middle initial. |
| 3 | Includable Income | <p>Money, wages, and salaries before any deductions.</p> <p>Net receipts from non-farm self-employment (recipients from a person's own unincorporated business, professional enterprise, or partnership after deductions for business expense).</p> <p>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).</p> <p>Regular payments from railroad retirement, strike benefits from union funds, and worker's compensation (not lump sum) training stipends.</p> <p>Alimony.</p> <p>Military family allotments or other regular support from an absent family member or someone not living in the household.</p> <p>Pensions whether private, government employee (including military retirement pay), law enforcement firefighters (LEF) disability income.</p> <p>Regular insurance or annuity payment.</p> <p>College or university grants, fellowships, and assistantships, state work-study, (not needs based scholarships): the key is whether or not the money is a loan to be paid back. If it is to be paid back, then it is a loan, and excludable income, if not, then it is includable.</p> <p>Dividends, interest, net rental income, net royalties, and periodic receipts from estates or trusts.</p> <p>Net gambling or lottery winnings.</p> |

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OJT wages from WIA participation.

L&I paid on a monthly basis.

Bureau of Indian Affairs policy regarding Per Capita payments to Indians made pursuant to P.L.98.64 that under \$2,000.00 are exempt from consideration as a resource of income when determining eligibility for all federally assisted programs.

If the payment can not meet one of the excludable criteria, then the payment will be includable income.

- 4 Excludable Income**
- Unemployment compensation.
 - Child support.
 - Old Age and Survivors Insurance (OASI).
 - Public assistance payments (including TANF, SSI, RCA, GA, emergency assistance money payments, and general relief money payments).
 - Foster child care payments.
 - Financial assistance under Title IV of the Higher Education Act, i.e. Pell grants, federal supplemental educational opportunity grants and federal work study (Stafford and Perkins loans, like any other kind of loans, are debt and not income). Needs-based scholarship assistance.
 - Allowances, earnings, and payments (except OJT) to individuals participating in WIA.
 - Capital gains.
 - Any assets drawn down as withdrawals from a bank, the sale of property, a house or a car.
 - Tax refund, gifts, loans, lump-sum inheritance, one-time insurance payments, or compensation for injury (lump sum).
 - Non-cash benefits such as employer fringe benefits, food or housing received in lieu of wages, Medicare, Medicaid, food stamps, school meals, and housing assistance.
 - Income earned while on active military duty and other

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benefits specified at 38 U.S.C. 4213 items (1) and (3) section 4213 requires WIA to disregard pay or allowances received by any person while serving on active duty. **Note:** This should be ex-service personnel who did not receive veteran 1 status, i.e., discharged other than honorable status. Section 4213 goes on to tell us to disregard benefits received by ex-service personnel who have veteran status. These benefits can only be received if the person has not been discharged under honorable, general, unsuitable, etc. The six specific benefits are:

CH 11 – compensation for service connected with disability or death.

CH 13 dependency and indemnity compensation for service-connected death.

CH 31 – vocational rehabilitation.

CH 34 – veteran’s education assistance.

CH 35 – war orphans and widows education assistance.

CH 36 – administration of education.

If payment is a one-time lump sum, it is generally excludable. If it is in monthly installments, then it is includable.

Trade Readjustment Allowance (TRA).

Workforce Training Assistance.

Job Corp.

Computation for Annualized Income

2001 poverty income guidelines for all states except Alaska and Hawaii (effective February 14, 2002)

<u>Size of Family Unit</u>	<u>Poverty Guidelines</u>
1	\$ 8,860
2	11,940
3	15,020
4	18,100
5	21,180
6	24,260
7	27,340
8	30,420

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For family units with more than eight (8) members, add \$3,080 for each additional member.

70% of Lower Living Standard Income Level (LLSIL)
Effective **April 14, 2002**

Lower Living Standard Incomes are adjusted for metropolitan and non-metropolitan areas. Non-metropolitan levels apply to places with populations under 50,000 for purpose of these determinations. **Seattle**, Tacoma, Everett and Bremerton will use a different table.

Washington WDCs that include counties covered by more than one type of census category should always use the metropolitan figures. The intent of the state is to have only one figure be used to reduce administrative steps for determining eligibility within boundaries of WDCs.

<u>Size of Family</u>	<u>Metropolitan</u>	<u>Non-Metropolitan</u>
1	\$(7,820)	\$(7,560)
2	12,810	12,390
3	17,580	17,010
4	21,700	20,990
5	25,670	24,770
6	30,020	28,970

For family units with more than six members add \$4,340 for each additional member in a metropolitan area and \$4,200 for non-metropolitan area. These amounts are for 70 percent-adjusted income, not the base income levels. Eligibility will be determined by using these amounts.

Use the following table if applicant resided in King, Snohomish, Pierce or Kitsap counties. The Governor has determined that **King**, Snohomish, Pierce, and Kitsap are metropolitan statistical area (MSA)

<u>Size of Family</u>	<u>Poverty Guidelines</u>
1	\$(8,650)
2	14,170
3	19,450
4	24,010
5	28,340
6	33,140

For family units with more than six members **add \$4,800 for each additional member.**

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Note: Figures in parenthesis indicates amounts, which are lower than the OMB poverty income guidelines for the size of family unity.

- | | | |
|----------|--|---|
| 5 | Name | Record name of the individual or family member. |
| 6 | Relationship | Indicate whether Self, Spouse, Parent, Sibling, Guardian, Dependent child. |
| 7 | Age | Record age. |
| 8 | Total Includable Six Month Income | Total all includable income for the past six months. |
| 9 | Total Annual Income | Total all Includable income and multiply by two (2). This amount is the annualized income. This amount is entered at Item 33 on the Registration Form. |

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STATUS FORM

General Overview: The purpose of this form is to provide an accurate record of the registrant's training history in the activities from the starting date through the time of exit. The form is used to move the registrant in and out of activities.

Include those activities partially or completely funded by non-WIA sources that were included in the registrant's WIA service plan, ISS, IRP, or EDP.

The following contains the Status Form with the data elements numbered and pages describing the data elements.

Note: Accuracy and timeliness of all paperwork is very important. Please follow individual WDC policy time frames. White out for corrections is unacceptable. When corrections must be made, simply cross out the wrong information and enter correct information and initial.

The first Activity Start Date will determine the Registration Date of services.

Adults and dislocated workers who receive services funded under the Title I other than self-service or informational activities must be registered and determined eligible.

All youth must be registered. Youth must be registered when they start to receive any youth services.

When a participant has received all WIA Title I or partner services planned, the participant must enter the activity group "Finished Services and is not scheduled for future services" (FIS). If the participant is still in this group on the 90th day the participant must exit on the 90th day.

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STATUS FORM

- 1 Social Security Number** Record the nine-digit identification number assigned to the registrant by the Social Security Administration under the Social Security Act.
- 2 Name** Enter the registrant's **legal** last name, first name, and middle initial.
- 3 Sub Code** Record the five digit subcode.
- 4 ADD ACTIVITY Fund Source** Record the fund source code for the activity. Refer to Appendix C.
- 5 Activity** Record the appropriate three-digit code for the activity in which the registrant will be enrolled.

Refer to Appendix E for the correct WIA activity codes.

Refer to Appendix F for the correct WtW activity codes.
- 6 Start Date** Record the actual date that the registrant will enter the activity.

The first activity start date will determine the Registration date.
- 7 Subcode** Record the five-digit Subcode.
- 8 Estimated End Date** Record the date the registrant is expected to leave the assigned activity. If the registrant is expected to continue in this activity beyond the estimated end date, you need to send in a status form showing the new estimated end date.
- 9 ID Number** Record the ID number of the local area representative.
- 10 Job Title** If the registrant received any training for a specific occupation, record the job title.

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Note: If the registrant is in an activity under the Basic Skills group, no job title is required, but the work/training site is. The job title can be left blank if not in a training activity.

- | | | |
|-----------|--------------------------------------|--|
| 11 | DOT/OES Code | Record the nine-digit DOT code, or the five digit OES code, or the three-digit CIP code for the above job title in item 10. |
| 12 | Hourly Wage | Record hourly wage for the job title in item 10 if in a work activity. |
| 13 | Hours per Week | Record the hours per week worked in item 10 if applicable. |
| | WORK OR TRAINING SITE | |
| 14 | Name | Record the name for the work/training site. |
| 15 | Address (City/State/Zip Code) | Record the address for the work/training site.
Record the city, state and zip code for the work/training site. |
| 16 | Phone | The phone number for the worksite is the key for the Worksite/Training file. |
| 17 | Contact Name | Record the contact person's name for the work/training site. |
| 18 | Work/Training Type | Record the code for the type of the work/training site.
PRI = Private PUB = Public |
| 19 | Local Defined | This four-digit field is for locally defined use. |
| 20 | Health Care (WtW) | Record "yes" if the registrant is working in an unsubsidized employment while in WtW and is receiving health care in the job. Otherwise mark "no". |
| 21 | Non-Traditional Training | Mark "yes" if the training is in an occupation or field or work for which individuals of the registrant's gender comprise less than 25% of the individuals employed in such occupation or field or work. Both males and females can be in non-traditional training. Non - traditional training can be based on either local or |

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national data.

- 22** **Established Individual Training Account** Mark “yes” if any of the individual’s services were purchased utilizing an Individual Training Account established for adults or dislocated workers and funded by WIA Title I.
- 23** **Comments** Use this space for any explanatory remarks. Explanatory comments are encouraged to indicate reason for action; providing additional tracking information indicates appropriateness of action and/or planned future action.
- 24** **Signature of Local Area Representative** The local area representative filling out the form must sign and date the form.
- 25** **LEAVE ACTIVITY Fund Source** Record the fund source code for the activity. Refer to Appendix C.
- Activity** Record the activity code for the activity the registrant is leaving:
- 26** **Start Date** Record the start date of the activity the registrant is leaving.
- 27** **Activity Status** Record one of the following activity status codes:
- C – Completed (Note: an activity is completed if the registrant achieves the activity goal. The plan should be reviewed to determine if the activity goal has been achieved in accordance with the service plan in effect for the individual.)
- N – Did not complete
- 28** **End Date** Record the date the registrant leaves the activity. If the registrant is entering another activity this date should be the same date that he/she started the new activity. If the registrant is exiting, this date should be the same as the exit date.

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- | | | |
|-----------|--|--|
| 29 | Received Supportive Services | <p>Mark “yes” if the registrant received Supportive services. Otherwise mark “no”.</p> <p>NOTE: For adults and dislocated workers, support services include services such as transportation, childcare, dependent care, and housing, that are necessary to enable an individual to participate in activities authorized under Title I of WIA consistent with the provisions of Title I.</p> <p>For youth, as defined in WIA section 1010 (46), may include linkage to community services; assistance with transportation, assistance with child care and dependent care; assistance with housing; referrals to medical services; and assistance with uniforms or other appropriate work attire and work related tools, including such items as eye glasses and protective eye gear.</p> |
| 30 | Received Needs-Related Payment | <p>Mark “yes” if the registrant received Needs Related Payments. Otherwise mark “no”.</p> |
| 31 | Received PELL Grant | <p>Mark “yes” if the registrant received PELL Grant. Otherwise mark “no”.</p> <p>NOTE: This item may be updated at anytime while the individual is receiving WIA services.</p> |
| 32 | Received High School Diploma or GED | <p>Mark “yes” if the registrant received a High School Diploma or GED while in WIA. Otherwise mark “no”. Record the date the registrant received the High School Diploma or GED.</p> |
| 33 | Attained Recognized Credential | <p>Mark one of the following types of recognized education/occupational certificate, credential, and diploma/degree attained.</p> <ol style="list-style-type: none"> 1. High School Diploma/Equivalency/GED 2. AA or AS Diploma/Degree 3. BA or BS Diploma/Degree 4. Occupational Skills License 5. Occupational Skills Certificate or Credential 6. Other (record other) 7. N/A |
| | WAGE PROGRESSION UPDATE | |
| 34 | Wage Date | <p>Enter the date the hourly wage or hours per week changed for the unsubsidized job in WtW or date the registrant begins receiving health care in an</p> |

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unsubsidized job.

- 35** **Hourly Wage** Enter the new wage the registrant is receiving for the unsubsidized job in WtW.
- 36** **Health Care (WtW)** Mark “yes” if the registrant is working in unsubsidized employment while in WtW and starts receiving health care in that position. Otherwise mark “no”.
- 37** **Hours per week** Enter the new hours per week worked for the registrant that is in unsubsidized job in WtW.
- 38** **Service Participation** Mark only those programs that fund activities coordinated with the individual’s WIA Title I activities, possibly through a formal co-enrollment by inclusion in the individual WIA service plan or through follow-up services. Services should be recorded cumulatively. A “yes” should be recorded for each source of service. **Do not report sources that funded only core services classified as informational or self-service.**

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WIA YOUTH SKILLS OUTCOME FORM

General Overview The WIA Youth Skills Outcome Form has been designed to collect all data necessary to report the youth skills outcomes for individuals.

If a registrant is deficient in basic literacy skill, the individual must set, at a minimum, one basic skills goal (the registrant may also get work readiness and/or occupational skills goals, if appropriate).

All youth included in performance measures must have a minimum of one skill goal per year and maximum of 3 goals per year.

Target date for accomplishing each skill goal is no longer than one calendar year.

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WIA YOUTH SKILLS OUTCOME FORM

- | | | |
|---|-------------------------------|--|
| 1 | Social Security Number | Record the nine-digit identification number assigned to the applicant by the Social Security Administration under the Social Security Act. |
| 2 | Name | Enter the applicant's legal last name, first name, and middle initial. |
| 3 | Sub Code | Enter the five-digit sub code. |
| 4 | ID Number | Record the ID number for the local area representative. |
| 5 | GOAL Year | Record Program Year. |
| 6 | Goal Number | Record number (1), (2), or (3). |
| 7 | Type of Goal | Record type of goal selected: |

Basic Skill Goals: Basic education skills include reading comprehension, math computation, writing, speaking, listening, problem solving, reasoning, and the capacity to use these skills.

Occupational Skills Goals: Primary occupational skills encompass the proficiency to perform actual tasks and technical functions required by certain occupational fields at entry, intermediate or advance 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.

Work Readiness Skills Goals: 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, registrations, 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

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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 instructions 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.

- 8 **Date Goal Set** Record date goals set.
- 9 **Signature of Local Area Representative** Local area representative's signature.
- 10 **Date** Date the form was filled out.
- 11 **FIRST HOLD Hold** Mark "yes" if there was a hold implemented. Otherwise mark "no".
- 12 **Hold Start Date** Indicate the date the hold was implemented.
- 13 **Hold End Date** Indicate the date the hold ended (**do not estimate an end date**).
- 14 **Reason for Hold** Use this space for any explanatory remarks. Explanatory comments are encouraged to indicate reason for actions; providing additional tracking information indicates appropriateness of action and/or planned future action.
- (9) **Signature of Local Area Representative** Local area representative's signature.
- (10) **Date** Date the form was filled out.
- 11 **SECOND HOLD Hold** Mark "yes" if there was a hold implemented. Otherwise mark "no".

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- | | | |
|-------------------|---|--|
| 12 | Hold Start Date | Indicate the date the hold was implemented. |
| 13 | Hold End Date | Indicate the date the hold ended. |
| 14 | Reason for Hold | Use this space for any explanatory remarks. Explanatory comments are encouraged to indicate reason for actions; providing additional tracking information indicates appropriateness of action and/or planned future action. |
| (9) | Signature of Local Area Representative | Local area representative's signature. |
| (10) | Date | Date the form was filled out. |
| ATTAINMENT | | |
| 15 | Type of Attainment | Record (1) Attained, (2) Set but not attained, or (3) Set but attainment pending.

(1) <u>Attained</u> . Attainment of a goal is based on individual assessments using widely accepted and recognized measurement/assessment techniques.

(2) <u>Set but not attained</u> Goal set, but not attained. Goals not attained include goals whose anniversary date has passed without attainment of the goal. The anniversary date of a goal is one calendar year after the date the goal was set.

(3) <u>Set but attainment pending</u> Goal set, but attainment pending. Includes goals that have not been attained, but have anniversary dates after the end of the report quarter. This category also includes goals that have been postponed because of gaps in service where the participant was placed in a hold status during which services were not received, but the registrant planned to return to the program. |
| 16 | Attainment Date | Record the date the goal was attained. This date should normally be on or before the one-year anniversary of the date the goal was set. However, it may be later if the registrant has a gap in service where he/she was placed in a hold status during which services were not received, but the registrant planned to return to the program. |

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**(9) Signature of Local
Area Representative** Local area representative's signature .

(10) Date Date the form was completed.

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EXIT FORM

General overview: The Exit form has been designed to collect all data needed at time of exiting WIA.

The last date on which WIA Title IB or partner services were received by the individual, excluding follow-up services. There are two ways to determine exit:

1. A participant who has a date of case closure, completion or known exit from WIA funded or non-WIA funded partner services (hard exit) or
2. A participant who does not received any WIA funded or non-WIA funded partner services for 90 days and is not scheduled for future services except follow-up services (soft exit)

Participants who have a planned gap in service of greater than 90 days should not be considered as exited if the gap in service is due to a delay before the beginning of training or a health/medical condition that prevents an individual from participating in services. Service providers should document any gap in services that occurs with a reason for such a gap in service.

Note: Accuracy and timeliness of paperwork is very important. Please follow individual WDC policy time frames. White out for corrections is unacceptable. When corrections must be made, simply cross out the wrong information and enter correct information and initial.

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EXIT FORM

- | | | |
|-----------------------|-------------------------------------|---|
| 1 | Social Security Number | Record the nine-digit identification number assigned to the participant by the Social Security Administration under the Social Security Act. |
| 2 | Name | Enter the participant's legal last name, first name, and middle initial. |
| 3 | Sub Code | Record the five digit subcode. |
| 4 | Address Change | Mark if there is an address change for the participant. |
| 5 | Address | Enter any changes to the participant's address or phone number. |
| LEAVE ACTIVITY | | |
| 6 | Fund Source Activity | Record the fund source and activity code for the activity the participant is leaving: |
| 7 | Start Date | Record the start date of the activity the participant is leaving. |
| 8 | Activity Status | Record one of the following activity status codes:

C – Completed (Note: an activity is completed if the participant achieves the activity goal. The plan should be reviewed to determine if the activity goal has been achieved in accordance with the service plan in effect for the individual.)

N – Did not complete |
| 9 | End Date | Record the date the participant leaves the activity. If the participant is entering another activity this date should be the same date that he/she started the new activity. If the participant is exiting, this date should be the same as the exit date. |
| 10 | Received Supportive Services | Mark "yes" if the participant received Supportive services. Otherwise mark "no". |

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NOTE: For adults and dislocated worker, supportive services include services such as transportation, childcare, dependent care, and housing, that are necessary to enable an individual to participate in activities authorized under Title I of WIA consistent with the provisions of Title I.

For youth, as defined in WIA section 101 (46) may include linkage to community services; assistance with transportation, assistance with child care and dependent care; assistance with housing; referrals to medical services; and assistance with uniforms or other appropriate work attire and work related tools, including such items as eye glasses and protective eye gear.

- | | | |
|----|--|---|
| 11 | Received Needs-Related Payment | Mark "yes" if the participant received Needs Related Payments. Otherwise mark "no". |
| 12 | Received PELL Grant | Mark "yes" if the participant is or has been notified they will be receiving a PELL Grant. Otherwise mark "no".
Note: This item may be updated at anytime while the individual is receiving WIA services. |
| 13 | Received High School Diploma or GED | Mark "yes" if the participant received a High School Diploma or GED while in WIA. Otherwise mark "no".
Record the date the participant received the High School Diploma or GED. |
| 14 | Attained Recognized Credential | Mark one of the following types of recognized education/occupational certificate, credential, and diploma/degree attained. <ol style="list-style-type: none"> 1. High School Diploma/Equivalency/GED 2. AA or AS Diploma/Degree 3. BA or BS Diploma/ Degree 4. Occupational Skills License 5. Occupational Skills Certificate or Credential 6. Other (record other) 7. N/A |

**WAGE
PROGRESSION
UPDATE**

- | | | |
|----|------------------|---|
| 15 | Wage Date | Enter the date the hourly wage or hours per week changed for the unsubsidized job or date the participant |
|----|------------------|---|

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begins receiving health care in an unsubsidized job.

16	Hourly Wage	Enter the new wage the participant is receiving for the unsubsidized job.
17	Health Care (WtW)	Mark "yes" if the participant is working in unsubsidized employment and starts receiving health care in that position. Otherwise mark "no".
18	Hours per week	Enter the new hours per week worked for the participant that is in unsubsidized job.
EXIT DATA		
19	Exit Code	Record Exit Code. See Appendix G for Exit Codes.
20	Exit Date	<p>Record the date the participant exited WIA Title I. There are two ways to determine exit:</p> <ol style="list-style-type: none"> 1. A participant who has a date of case closure, completion or know exit from WIA funded or non-WIA funded partner services (hard exit) or 2. A participant who does not receive only WIA funded or non-WIA funded partner services for 90 days and is not scheduled for further services (soft exit)
21	Subcode	Record the five digit subcode.
23	ID	Enter the ID number
23	Receiving TANF	<p><u>Yes</u>. Mark "1" if the individual is receiving income or money payments under the TANF Act and is <u>not</u> going to exhaust payments within the next 12 months.</p> <p><u>No</u>. Mark "2" if the individual is <u>not</u> receiving income or money payments under the TANF Act.</p>
	Monthly Grant Amount or Non-Custodial Payment	Record the amount of the TANF grant if the individual is receiving TANF, or if the individual is a WtW non-custodial parent, the amount of the child support payment the individual is paying must be recorded.

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- | | | |
|-----------|---|---|
| 24 | Entered Postsecondary Education or Advanced Training | <p>Mark “1” if the individual entered an occupational skills employment/training program, not funded under Title I of the WIA, which does not duplicate training received under Title I. Includes only training outside of the one-stop, WIA and partner system. Includes training provided by a partner program following exit. An example of advanced training is a community college program that does not lead to an advanced degree. [Include entry into postsecondary educational programs that lead to an academic degree (e.g. AA, AS, FA, BS) in the postsecondary education category]</p> <p>Mark “2” if postsecondary education is a program at an accredited degree-granting institution that leads to an academic degree (e.g. AA, AS, BA, BS). Do not include programs offered by degree-granting institutions that do not lead to an academic degree as postsecondary education.</p> <p>Mark “3” if individual did not enter any other training.</p> |
| 25 | Attending Secondary School | Mark “yes” if individual is attending Secondary School. Otherwise mark “no”. |
| 26 | Labor Status | <p>Mark “1” if individual is employed</p> <p>Mark “2” if individual is unemployed.</p> |
| | Employment Data | <p>Note: If the individual is employed at the time of exiting the Employment Data section must be filled out.</p> <p>If the individual is attending training at the time of exiting the Employment Data may be used to record where attending training.</p> |
| 27 | Name of Employer | Record employer’s name. |
| 28 | SIC Code | Record Standard Industry Code |
| 29 | Employer’s Address | Note: Record individual employer’s address. |

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- 30** **Type** Record the code for the type of the employer (i.e. Pri = Private, Pub = Public)
Not Required
- 31** **Start Date** Record the start date of the job.
- 32** **Job Title** Record job title.
- 33** **DOT/OES Code** Record the code for the job title recorded in 31.
- 34** **Hourly Wage** Record the hourly wage for the job title recorded in 31.
- 35** **Hours per Week** Record hours worked per week for the job title.
- 36** **Entered Military Service** Mark “yes” if the individual entered into the active U.S. military, naval, or air service. Otherwise mark “no”.
- 37** **Entered Qualified Apprenticeship** Record “yes” if the individual entered into a program approved and recorded by the ETA/Bureau of Apprenticeship and Training or by a recognized State Apprenticeship Agency. Otherwise record “no”.
- 38** **Non-Traditional Employment** Record “yes” if the individual entered non-traditional employment in an occupation or field of work for which individuals of the participant’s gender comprise less than 25% of the individuals employed in such occupation or field of work. Otherwise record “no”.
- 39** **UI Covered** Record “yes” if the individual entered employment that is UI covered otherwise mark “no”.
- 40** **Training Related** Record “yes” if the individual entered employment that is training related. Otherwise record “no”. Training-related employment is employment in which the individual uses a substantial portion of the skills taught in the training received by the individual.
- 41** **Signature of Local Area Representative** The local area representative filling out the form must sign and date the form.

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APPENDIX A

WASHINGTON COUNTY CODE AND NAME

<u>CODE</u>	<u>NAME</u>
AD	ADAMS
AS	ASOTIN
BE	BENTON
CA	COLUMBIA
CH	CHELAN
CK	CLARK
CL	CLALLAM
CO	COWLITZ
DO	DOUGLAS
FE	FERRY
FR	FRANKLIN
GA	GARFIELD
GH	GRAYS HARBOR
GR	GRANT
IS	ISLAND
JE	JEFFERSON
KG	KING
KS	KING (Within Seattle City Limits)
KT	KITSAP
KI	KITTITAS
KL	KLICKITAT
LE	LEWIS
LI	LINCOLN
MA	MASON
OK	OKANOGAN
PA	PACIFIC
PI	PIERCE
PT	PIERCE (Within Tacoma City Limits)
PO	PEND OREILLE
SJ	SAN JUAN
SK	SKAGIT
SM	SKAMANIA
SN	SNOHOMISH
SP	SPOKANE
SS	SPOKANE (Within Spokane City Limits)
ST	STEVENS
TH	THURSTON
WA	WAHKIAKUM
WH	WHATCOM
WT	WHITMAN
WW	WALLA WALLA
YL	YAKIMA LOWER VALLEY
YM	YAKIMA MIDDLE VALLEY
YU	YAKIMA UPPER VALLEY

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Appendix B

STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES

<u>CODES</u>	<u>DESCRIPTION</u>
01.	Agricultural Production – Crops
02.	Agricultural Production – Livestock
07.	Agricultural Services
08.	Forestry
09.	Fishing, hunting and trapping
10.	Metal Mining
11.	Anthracite Mining
12.	Bituminous coal and lignite mining
13.	Oil and Gas Extraction
14.	Nonmetallic Minerals
15.	General Building Contractors
16.	Heavy Construction
17.	Special Trade Contractors
20.	Food and Kindred Products
21.	Tobacco Products
22.	Textile Mill Products
23.	Apparel and Other Textile Products
24.	Lumber and Wood Products
25.	Furniture and Fixtures
26.	Paper and Allied Products
27.	Printing and Publishing
28.	Chemicals and Allied Products
29.	Petroleum and Coal Products
30.	Rubber and Misc. Plastic Products
31.	Leather and Leather Products
32.	Stone
33.	Primary Metal Industries
34.	Fabricated Metal Products
35.	Industrial Machinery and Equipment
36.	Electronic & Other Electronic Equip
37.	Transportation Equipment
38.	Instruments and Related Products
39.	Miscellaneous Mfg. Industries
40.	Railroad Transportation
41.	Local and Interurban Passenger Tran
42.	Trucking and Warehousing
43.	U.S. Postal Service
44.	Water Transportation
45.	Transportation by Air
46.	Pipelines

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- 47. Transportation Services
- 48. Communications
- 49. Electric
- 50. Wholesale Trade-Durable Goods
- 51. Wholesale Trade-Nondurable Goods
- 52. Building Materials & Garden Supplies
- 53. General Merchandise Stores
- 54. Food Stores
- 55. Automotive Dealers & Service Station
- 56. Apparel and Accessory Stores
- 57. Furniture and Home Furnishing Stores
- 58. Eating and Drinking Places
- 59. Miscellaneous Retail
- 60. Depository Institutions
- 61. Nondepository Institutions
- 62. Security and Commodity Brokers
- 63. Insurance Carriers
- 64. Insurance Agents
- 65. Real Estate
- 67. Holding and Other Investment Office
- 70. Hotels and Other Lodging Place
- 72. Personal Services
- 73. Business Services
- 75. Auto Repair
- 76. Miscellaneous Repair Services
- 78. Motion Picture
- 79. Amusement & Recreation Services
- 80. Health Services
- 81. Legal Services
- 82. Educational Services
- 83. Social Services
- 84. Museums
- 86. Membership Organizations
- 87. Engineering & Management Services
- 88. Private Households
- 89. Services
- 91. Executive
- 92. Justice
- 93. Finance
- 94. Administration of Human Resources
- 95. Environmental Quality and Housing
- 96. Administration of Human Resources
- 97. National Security and Intl. Affairs
- 99. Nonclassifiable Establishments

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APPENDIX C

FUNDING SOURCE CODES

- LA** **WIA LOCAL ADULT:** The activity is funded by the local WDC Title I-B adult funds.
- LI** **WIA LOCAL IN SCHOOL YOUTH:** The activity is funded by the local WDC Title I-B in school youth funds.
- LO** **WIA LOCAL OUT OF SCHOOL YOUTH:** The activity is funded by the local WDC Title I-B out of school youth funds.
- LD** **WIA LOCAL DISLOCATED WORKER:** The activity is funded by the local WDC Title I-B dislocated worker funds.
- PA** **PARTNER FUNDED ADULT:** The activity is funding an adult using partner funds.
- PY** **PARTNER FUNDED YOUTH:** The activity is funding a youth using partner funds.
- PD** **PARTNER FUNDED DISLOCATED WORKER:** The activity is funding a dislocated worker using partner funds.
- NG** **NATIONAL EMERGENCY GRANT DISLOCATED WORKER:** The activity is funded by a National Emergency Grant.
- SY** **YOUTH (15% STATEWIDE):** This activity is funding a youth using 15% statewide funds.
- SH** **DISPLACED HOMEMAKER (15% STATEWIDE):** This activity is funding displaced homemakers using 15% statewide funds.
- SI** **INCUMBENT WORKER (15% STATEWIDE):** This activity is funding an incumbent worker using 15% statewide funds.
- SO** **OTHER (15% STATEWIDE):** This activity is funded by the other 15% statewide funds.
- RR** **RAPID RESPONSE:** This activity is funded by rapid response funds.
- W3** **30% WELFARE TO WORK:** This activity is funded by the 30% Welfare to Work funds.
- W7** **70% WELFARE TO WORK:** This activity is funded by the 70% Welfare to Work funds.

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Appendix D

ACTIVITY GROUPS

ADULTS AND DISLOCATED WORKERS

- CC** **Core Services**: may include staff-assisted job search, placement assistance, and career counseling; follow-up services, including counseling regarding the workplace; staff-assisted job referrals (such as testing and background checks); staff-assisted Job development (working with employer and jobseeker); staff-assisted workshops and job clubs.
- IS** **Intensive Services**: are for unemployed adults and dislocated workers who, “are unable to obtain employment through cores services and retain employment, and employed workers who need services to obtain or retain employment that leads to self-sufficiency. Intensive services may include: comprehensive and specialized assessment of skill levels and service needs by utilizing diagnostic testing and use of other assessment tools; in-depth interviewing and evaluation to identify barriers to employment and appropriate employment goals; development of individual employment plans to identify the employment goals, appropriate achievement objectives, and appropriate combinations of services for the registrants to achieve employment goals; group counseling; individual counseling and career planning; case management for registrants seeking training services; short-term prevocational services, including development of learning skills, communication skills, interviewing skills, punctuality, personal maintenance skills, and professional conduct, to prepare individuals for unsubsidized employment or training; out-of-area job search expenses; relocation expenses; internships; and work experience.
- JR** **Job Readiness Services**: teaches the skills necessary to obtain or maintain employment.
- BS** **Basic Skills Training**: instruction normally conducted in an institutional setting and designed to upgrade basic skills in order to prepare the individual for further training, future employment, or retention in present employment. Includes remedial reading, writing, mathematics, literacy training, study skills, English for non-English speakers, bilingual training, and GED preparation (including computer assisted competency training, and school to post-secondary education transition). **This service must be offered in combination with other allowable training services (not including customized training). If not in combination with training activities group “IS” must be used.**
- OT** **Occupational Skills Training**: instruction conducted in an institutional or work site setting designed to provide or upgrade the technical skills and information individuals require to perform a specific job or groups of jobs such as auto mechanics, health services, or clerical training.
- OJ** **On-The-Job Training**: training provided by an employer to a paid registrant while engaged in productive work in a job that improves knowledge or skills essential to the full and adequate performance of the job; provides

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reimbursement to the employer of up to 50% of the wage rate of the registrant, for the extraordinary costs of providing the training and additional supervision related to the training; limited in duration as is appropriate to the occupation for which the registrant is being trained, taking into account the content of the training, the prior work experience of the registrant, and the service strategy of the registrants, as appropriate.

- CT** **Customized Training:** training that is designed to meet the special requirements of an employer (including a group of employers); conducted with the employer's commitment to employ an individual upon successful completion of the training; employer pays for not less than 50% of the cost of the training.
- IT** **Incumbent Training:**
- ET** **Entrepreneurial Training:**
- SR** **Skills Upgrading and Retaining:**
- JP** **Job Placement Services:** unsubsidized employment in the Public Sector or Private Sector.
- NB** **Basic Skills Training Funded by Other Sources:**
- NT** **Occupational Skills Training Funded by Other Sources:**
- NJ** **On-the-Job Training Funded by Other Sources:**
- HD** **Hold:** registrants can be placed in hold status for reasons, including but not limited to jury duty and hospitalization. A registrant who completes a training activity but is identified as needing further training should be put into hold status until the beginning of the next training.
- SE** **Finished Services and is not scheduled for future services:** all planned services are finished and no other future services (except follow-up services) are scheduled. This activity can be no longer than 90 days. The registrant must exit WIA on or before the 90th day.

YOUTH

- EA** **Educational Achievement Service:** including but not limited to: tutoring, study skills training, and instruction leading to completion of secondary school, including dropout prevention strategies; also alternative secondary school service.
- ES** **Employment Service:** including but not limited to: paid and unpaid work experiences, including internships, and job shadowing, and occupational skill training.
- SO** **Summer Youth Employment Opportunities:** this group must be directly linked to academic and occupational learning.

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- AS** **Additional Support for Youth Services:** including but not limited to: providing mentoring; comprehensive guidance and counseling, which may include drug and alcohol abuse counseling and referral, primarily provided to assist a youth in achieving employment-related success.
- OT** **Occupational Skills Training:** instruction conducted in an institutional or work site setting designed to provide or upgrade the technical skills and information individuals require to perform a specific job or groups of jobs such as auto mechanics, health services, or clerical training.
- CL** **Citizen and Leadership Services:** intended to develop the potential of youth as citizens and leaders; these services include but are not limited to: leadership development opportunities, which may involve community service and peer-centered activities encouraging responsibility and other positive social behaviors during non-school hours.
- JP** **Job Placement Services:** unsubsidized employment in the Public Sector or Private Sector.
- NE** **Service Funded by Another Source**
- HD** **Hold:** registrants can be placed in hold status for reasons including but not limited to jury duty and hospitalization. A registrant who completes a training activity but is identified as needing further training should be put into hold status until the beginning of the next training.
- SE** **Finished Services and is not scheduled for future services:** all planned services are finished and no other future services (except follow-up services) are scheduled. This activity can be no longer than 90 days. The registrant must exit WIA on or before the 90th day.

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- JR** **Job Readiness Services:** teaches the skills necessary to obtain or maintain employment.
- JP** **Job Placement Services:** unsubsidized employment in the Public Sector or Private Sector.
- CS** **Community Service (Employment Activity):** may be used as a pre work experience activity which places registrants in paid employment at public, not-for-profit or private worksite.
- WK** **Work Experience (Employment Activity):** places registrants in paid subsidized service at public or private sector worksite.
- JT** **On-the-Job Training (Employment Activity):** training provided by an employer to a paid registrant while engaged in productive work in a job that improves knowledge or skills essential to the full and adequate performance of the job; provides reimbursement to the employer of up to 50% of the wage rate of the registrant, for the extraordinary costs of providing the training and additional

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supervision related to the training; limited in duration as is appropriate to the occupation for which the registrant is being trained, taking into account the content of the training, the prior work experience of the registrant, and the service strategy of the registrants, as appropriate.

- PE** **Post-Employment services:** services provided to a registrant in an employment activity or in any other subsidized or unsubsidized job. Post-employment services include, but are not limited to, such services as: basic education skills training; occupational skills training; English as a second language training; and mentoring.
- SS** **Supportive services:** includes any support services necessary to allow a registrant to obtain or retain employment. These services can be provided with WtW funds only if they are not otherwise available to the registrant. Support Services include, but are not limited to, such services as: transportation assistance; substance abuse treatment (except that WtW funds may not be used for medical treatment); child care assistance; emergency or short term housing assistance.
- JC** **Job Creation Employment Wage Subsidies (Employment Activity):** payment made to an employer to create a job opportunity for a WtW registrant including, but not limited to: job restructuring; extraordinary training costs; or customizing training or wage support for a newly created position.
- JB** **Job Retention Services:** designed to encourage a person to remain in or advance in the labor market.
- ID** **Individual Development:** refers to money set-aside on behalf of the registrant to be used for business start-up and/or education. The amount to be set aside is tied directly to hours worked or hours of classroom training or education attended.
- HD** **HOLD:** registrant can be placed in hold status for reasons including but not limited to jury duty, hospitalization, or revisiting the ISS.
- NS** **Community Service (Employment Activity) Funded by Other Sources.**
- NK** **Work Experience (Employment Activity) Funded by Other Sources.**
- NW** **On-The-Job Training (Employment Activity) Funded by Other Sources.**
- NP** **Post Employment Services Funded by Other Sources.**
- NF** **Job Retention Services Funded by Other Sources.**
- XU** **Unstructured Community Services:** Approved activity that benefits the person, family or community. (Substance abuse treatment, DV counseling, family counseling, medical treatment, mental health treatment, parenting classes, etc.)

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APPENDIX E

WIA Adult & Dislocated Worker Activity Codes

<u>CODE</u>	<u>DESCRIPTION</u>	<u>GROUP</u>
BRS	Basic Readjustment Service (Dislocated Worker) Includes service designed to provide basic readjustment assistance such as orientation, pre-layoff assistance, job development/referral assistance, and job search to eligible dislocated workers and case management during career planning and development of Individual Training Plan.	IS
BSI	Basic Skills Instruction Job Title line of the Add Activity will provide the description of what the participant is doing: Adult Basic Education Basic Skills Instruction Credit Retrieval English as Second Language (ESL) General Equivalency Diploma (GED) High School Completion	BS
BSO	Basic Skills Training Funded by Other Sources	NB
COR	Core B Services To track customer receiving staff-assisted services.	CC
CUT	Customized Training (Employer Services)	CT
EMJ	Employment – Unsubsidized Employment	JP
FIS	Finished Services and is not scheduled for future services All planned services are finished and no other future services (except follow-up services) are scheduled. This activity can be no longer than 90 days. The registrant must exit WIA on or before the 90 th day.	SE
HFT	Hold for Training When there is an approved individual training plan and registrant is waiting to begin training or when there is more than a regular break between quarters/semesters of training. In addition, registrants would be put into HFT if there is a significant amount of time between the completion of one training activity and the start of another.	HD

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WIA Adult & Dislocated Worker Activity Codes

Page 2

<u>CODE</u>	<u>DESCRIPTION</u>	<u>GROUP</u>
HPO	Hold - Personal Other Participant has a personal issue that necessitates a time out from training.	HD
ICM	Intensive Case Management To track customer not in training activity and enrolled in intensive services.	IS
JSA	Job Search Assistance A period not to exceed 60 days. This component would include one-on-one job search counseling and assistance. It must be regular and well documented in case notes. It may include but is not limited to individualized job development with the participant, composing resumes, practice interviews, labor market research and vocational exploration. Describe in the Individual Training Plan how you will use Job Search Assistance.	JR
JST	Job Search Training A period not to exceed 60 days for purposes of involvement in a formal job search class or club. Attendance is required and must be documented. The component could also be utilized in a one-on-one format but must use a structured curriculum of written benchmarks and document progress and competencies attained. Describe in the Contract Narrative how you will use Job Search Training.	JR
OJO	On-the-Job Training Funded by Other Sources	NJ
OJT	On-the-Job Training	OJ
OSI	Occupational Skills Instruction	OT
OST	Occupational Skills Training Funded by Other Sources	NT
SPS	Short Term Prevocational Services	IS

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK**

APPENDIX E-1

WIA Youth Activity Codes

<u>CODE</u>	<u>DESCRIPTION</u>	<u>GROUP</u>
ADS	Additional Support for Youth Services	AS
BSY	Basic Skills Instruction Job Title line of the Add Activity will provide the description of what the participant is doing: Basic Skills Instruction Credit Retrieval High School Completion	BS
CLS	Citizenship & Leadership Services (Youth)	CL
EAS	Educational Achievement Services (Youth)	EA
EDA	Educational Activities	SO
EMJ	Employment – Unsubsidized Employment	JP
ESY	English-As-A-Second Language	EA
FIS	Finished Services and is not scheduled for future services All planned services are finished and no other future services (except follow-up services) are scheduled. This activity can be no longer than 90 days. The registrant must exit WIA on or before the 90 th day.	SE
GED	High School Equivalency Certificate (GED)	EA
HFT	Hold for Training When there is an approved individual training plan and registrant is waiting to begin training or when there is more than a regular break between quarters/semesters of training. In addition, registrants would be put into HFT if there is a significant amount of time between the completion of one training activity and the start of another.	HD
HPO	Hold - Personal Other Participant has a personal issue that necessitates a time out from training.	HD

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
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WIA Youth Activity Codes

Page 2

INT	Limited Internships Private Sector (Youth)	ES
JSY	Job Search Assistance A period not to exceed 60 days. This component would include one-on-one job search counseling and assistance. It must be regular and well documented in case notes. It may include but is not limited to individualized job development with the participant, composing resumes, practice interviews, labor market research and vocational exploration. Describe in the Individual Training Plan how you will use Job Search Assistance.	AS
OSI	Occupational Skills Instruction	OT
PCM	Practicum/Unsubsidized Internship	ES
SFO	Service Funded by Other Source	NE
WEX	Employment Services	ES

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK**

APPENDIX F

WtW Activity Codes

<u>CODE</u>	<u>DESCRIPTION</u>	<u>GROUP</u>
ASW	Applying for SSI/L&I/VA or other benefits - Self	XU
BSW	Adult Basic Education (ABE) Includes all ABE and basic skills upgrading, including basic computer skills through CEC's. (Will not include HS completion.)	PE
CCW	Caring for a child with special needs - Family	XU
CFW	Counseling - Family	XU
CGW	Competitive Grant Co-Enrollment	XU
CJW	Community Jobs Work Experience	WK
CSW	Counseling - Self	XU
DSW	In a DVR/DDD plan - Self	XU
DWW	DSHS Work Experience	PE
EMW	Employment - Unsubsidized employment	JP
ESW	English as a Second Language	PE
ETW	Entrepreneurial Training	JR
FFW	Family/Domestic Violence Intervention - Family	XU
GEW	General Education Development (GED)	PE
HDW	Hold	HD
HFW	Resolution of Homelessness - Family	XU
HSW	High School (regular, alternative/or through Community College)	PE

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WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK**

**WtW Activity Codes
Page 2**

<u>CODE</u>	<u>DESCRIPTION</u>	<u>GROUP</u>
IDW	Individual Development Accounts	ID
	NOTE: NOT CURRENTLY AUTHORIZED BY WDC.	
	NOTE: NOT INCLUDED IN OPTIONS ON CURRENT FORM.	
JCW	Job Creation Employment Wage Subsidies (Employment Activity)	JC
	NOTE: NOT CURRENTLY ALLOWED. MAY BE AUTHORIZED AT A LATER TIME.	
	NOTE: NOT INCLUDED IN OPTIONS ON CURRENT FORM.	
JRW	Job Search - Job Readiness	JR
	Initially three (3) months	
JTW	Job Skills Training	PE
LFW	Life Skills Training - Family	XU
LSW	Life Skills Training - Self	XU
MFW	Medical Treatment - Family	XU
MSW	Medical Treatment - Self	XU
OTW	On-the-Job Training	JT
	All OJT activities whether paid by PIC funds or other.	
PCW	Work Experience (Practicums) (Employment Activity)	PE
	Practicums must be combined concurrently or sequentially with training.	
RSW	Retention Services	JB
	Used when helping employed clients in retaining employment.	

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**WELFARE TO WORK
ACTIVITY CODES
Page 3**

<u>CODE</u>	<u>DESCRIPTION</u>	<u>GROUP</u>
RTW	Returned to WorkFirst. This code places a client in a "hold Status" to show that the registrant has been referred back to WorkFirst and WtW is not currently working with the client, but may at a later date. If the client does not return from WorkFirst, then the SDA would use the TW code to terminate the client.	HD
SCW	Structured Community Service (Education Activity) Unpaid work with a non-profit organization.	CS
SFW	Substance Abuse Treatment - Family	XU
SSW	Substance Abuse Treatment - Self	XU
SUW	Support Services	SS
	NOTE: NOT CURRENTLY AUTHORIZED BY WDC.	
	NOTE: NOT INCLUDED IN OPTIONS ON CURRENT FORM.	
TNW	TANF	XU
VEW	Vocational Education Must be less than 12 months in duration	PE
WEW	Paid Work Experience (Employment Activity) Wage subsidized work experience. Can be provided at non-profits and public sites only. Must pay the prevailing entry wage for occupation.	WK
XFW	Other - Family	XU
XSW	Other - Self	XU

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
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APPENDIX G

WIA Exit Codes

- UE Unsubsidized Employment: This code is used when the participant entered full or part-time unsubsidized employment. (For WtW only participants who have been employed for at least nine months and have not received services during that period.)
- EE Employability Enhancement: This code is used when the participant exited the program and entering unsubsidized employment was not the goal.
- TS Transfer to another area or Transfer from W3 (30%) to W7 (70%): This code is used when a participant transfers from one WDA to another WDA or a WtW participant transfers from W3 (30%) to W7 (70%)
- TW Client Returned to WorkFirst: (WtW only) This code is used for WtW participants, when the WDA has determined that the client will not be returning for WtW services, after they have been returned to WorkFirst
- OI Eligible for SSI or Disability: (WtW only) This code is used for WtW participants, who have been determined, after being enrolled in WtW, eligible for SSI or Disability.
- OS Institutionalized: This code is used if the participant is residing in an institution or facility providing 24-hour support such as a prison or hospital.
- OH Health/Medical: This code is used if the participant cannot participate due to health or medical reason. (Unable to participate for 90 or more days)
- OD Deceased: This code is used if the participant is deceased.
- OP Lack of Transportation: This code is used when the participant is without his/her own means of transportation, or has no public transportation between home and the location or employment/training and/or other supportive services.
- OL Can not locate: This code is used when the participant cannot be located.
- OY Family Care: This code is used when the participant is responsible for the care of one or more family members, which precludes entry into, unsubsidized employment or continued participation.
- OM Other Miscellaneous: This code is used when the participant can no longer participate in the program and none of the above exit codes apply. (i.e. moved, refuses to participate)

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK**

APPENDIX H

CASAS

Scores to Grade Level

For these CASAS Reading scaled Scores	Fill in the corresponding grade level at #56 Skills Level for Reading		For these CASAS Math Scaled Scores	Fill in the corresponding grade level at #56 Skills Level for Math
Below 200	1			1
201-205	2			2
206-210	3		Below 200	3
210-215	4		201-205	4
216-220	5		206-210	5
221-225	6		210-215	6
226-230	7		216-220	7
231-235	8		221-225	8
236-240	9		226-230	9
241-245	10		231-235	10
246-250	11		236-240	11
251-255	12		241-245	12
256+	13+		246+	13+

Record “13” for individuals assessed as Grade 13 and above.

Record “87” for individuals who were not tested and who are obviously below the 9th grade level.

Record “88” for individuals who refused testing or who otherwise could not be tested.

Record “99” for applicants with a four-year college degree or above (BA, MA, Ph.D., etc)—no testing required.

WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK

WIA INCOME GUIDELINES

Workforce Development Council of Seattle-King County
June 12, 2002

2002 Poverty Income Guidelines For All States Except Alaska and Hawaii

(EFFECTIVE FEBRUARY 14, 2002)

<u>Size of Family Unit</u>	<u>Poverty Guideline</u>
1	\$ 8,860

70% of Lower Living Standard Income Level (LLSIL)

(EFFECTIVE APRIL 8, 2002)

**Metropolitan
Statistical Areas (MSA)**

2	\$14,170
3	\$19,450
4	\$24,010
5	\$28,340
6	\$33,140

For family units with more than six members, add
\$4,800 for each additional member.

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
WORKFORCE INVESTMENT ACT and WELFARE-TO-WORK**

**Chart on 175% of the Federal Poverty Level
(To get an approximate hourly wage divide by 160 hours)**

Family Size	Gross Monthly Income no greater than:	Gross Income for Twelve Months no greater than:
2	\$1,613	\$19,356
3	\$2,024	\$24,288
4	\$2,438	\$29,256
5	\$2,847	\$34,164
6	\$3,258	\$39,096
7	\$3,669	\$44,028
8	\$4,080	\$48,960
9	\$4,492	\$53,904
10	\$4,903	\$58,836

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
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NATIONAL RESERVE GRANT IN WIA

The following are the NOO (grant number) to be used for NRG in WIA. This is entered on the service screen under Service Participation. National Emergency Grant will be marked and the 4 digit code will also be entered.

Boeing	(was 3L)	9806
Pac. Mt. Timber 7	(was 3I)	9707
Pederson	(was 3O)	9802
Olympic Timber 6	(was 3Y)	9803
Manf. Tech	(was 3Z)	9805
Seattle Manf Tech	(was 3B)	9906
Crown Cork & Seal	(was 3G)	9807
Moduline	(was 3M)	9904

**WORKFORCE DEVELOPMENT COUNCIL OF SEATTLE-KING COUNTY
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Selective Service Verification Online Example



This service allows you to look up a man's Selective Service number, as well as the date he registered. Enter a last name, Social Security Account number, and date of birth for the registered man, and click on "Submit."

Only registrations of men born on or after January 1, 1960, can be verified through this system. To obtain Selective Service information about men born earlier, [CLICK HERE](#) and follow the instructions on our "Records" page.

This service is operational 7 days a week. It is not available when system maintenance is scheduled from 2 a.m. to 4 a.m. U.S. Central Time Tuesday through Saturday and from 7 p.m. Wednesday to 2 a.m. Thursday.

Last Name:	<input type="text"/>
Social Security Number:	<input type="text"/>
Date of Birth:	<input type="text"/> (mmddyyyy)
<input type="button" value="Submit"/> <input type="button" value="Reset"/>	

Men who have registered remain eligible for Federal student aid, most Federal jobs, and Federal job training. Male non-citizens living in the U.S. who are 18 through 25 must register to remain eligible for citizenship.

[FAQs](#) | [Contact SSS](#) | [Related Links](#)

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[Publications](#) | [History/Records](#) | [What Happens in a Draft](#) | [Site Map](#)

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