



## **Policy Letter #15**

**TO:** All Mid-Carolina Service Providers  
**FROM:** Mid-Carolina Workforce Development Staff  
**SUBJECT:** Self-Attestation Policy

### **PURPOSE**

This policy provides guidance on the use of self-attestation to document eligibility for Workforce Innovation and Opportunity Act (WIOA) enrollment. The Mid-Carolina Workforce Development Board requires that contractors for all WIOA programs acquire appropriate documentation for eligibility for all applicable areas of criteria that participants meet.

### **POLICY**

WIOA program services shall only be provided to eligible young adults, adults, and dislocated workers that have met certain federal eligibility requirements prior to enrollment into WIOA programs. Each eligibility criteria indicated as applicable to the applicant needs to have corresponding **verification** documentation in the participant file.

Self-attestation (also referred to as a participant or applicant statement) occurs when a participant (or applicant) states his or her status for a particular data element, such as a pregnant or parenting young adult, and then signs and dates a form acknowledging this status. The key elements for self-attestation are:

- a. A participant (applicant) identifying his or her status for a permitted data element and
- b. Signing and dating a form attesting to this self-identification (with a disclaimer concerning the self-identification)

Specific to WIOA **Youth's** eligibility, self-attestation is allowed to verify eligibility items that, in some cases, may not be easily verified, such as homelessness, or may cause undue hardship for individuals to obtain. Self-attestation is allowed for all of the barriers for WIOA young adult eligibility (e.g., homeless individual and/or runaway youth, offender, pregnant or parenting youth, youth who needs additional assistance, and drop-out) **except** for the basic skills deficient barrier and factors that impact family size for calculation of low income, such as whether a youth is dependent or not.

In the best interest of participants who could potentially be at risk of a forced exit from WIOA if supporting documentation cannot be provided, applicants for WIOA must exhaust all options available to them in providing supporting documentation for the eligibility of programs. Although self-attestation is acceptable, service providers should ensure that they only use self-attestation for allowable data elements and that the statement is accompanied by a timely sampling of participants' actual supporting documentation to ensure the accuracy of their statements. In those instances where obtaining documentation is too burdensome to applicants seeking enrollment into WIOA programs, a self-attestation form may be accepted at the discretion of the service provider (Attachments C and D). Case notes must include an explanation of why self-attestation was accepted in lieu of third-party verification.

Periodic monitoring will incorporate a random sampling methodology to validate the accuracy of the self-attestation process.

### **REFERENCES**

TEGL 23-19, Change 2: Guidance for Validating Required Performance Data Submitted by Grant  
Recipients of USDOL Workforce Programs  
OG 16-2021, Change 3: Defining Data Validation Process and Procedures

**ATTACHMENT**

Attachment A: Data Validation Process and Procedures  
Attachment B: Participant Individual Record Layout (PIRL) Elements  
Attachment C: Mid-Carolina Workforce Development Board AD & DW Self-Attestation Form  
Attachment D: Mid-Carolina Workforce Development Board NEXTGEN Self-Attestation Form

**CREATION DATE**

July 2022

**REVISION DATE**

January 2024  
December 2024  
June 2025

<b>EMPLOYMENT AND TRAINING ADMINISTRATION</b> <b>ADVISORY SYSTEM</b> <b>U.S. DEPARTMENT OF LABOR</b> <b>Washington, D.C. 20210</b>	<b>CLASSIFICATION</b> WIOA
	<b>CORRESPONDENCE SYMBOL</b> OPDR
	<b>DATE</b> June 18, 2020

**ADVISORY: TRAINING AND EMPLOYMENT GUIDANCE LETTER NO. 23-19**

**TO:** STATE AND LOCAL STAKEHOLDERS IN THE WORKFORCE  
INNOVATION AND OPPORTUNITY ACT  
STATE WORKFORCE AGENCIES  
STATE WORKFORCE ADMINISTRATORS  
STATE WORKFORCE LIAISONS  
H-1B JOB TRAINING PROGRAM GRANT RECIPIENTS  
INDIAN AND NATIVE AMERICAN PROGRAM (INAP) GRANT RECIPIENTS  
JOB CORPS CONTRACTORS  
JOBS FOR VETERANS STATE GRANTS (JVSG) GRANT RECIPIENTS  
STATE MONITOR ADVOCATES  
NATIONAL FARMWORKER JOBS PROGRAM (NFJP) GRANT RECIPIENTS  
NATIONAL DISLOCATED WORKER GRANT RECIPIENTS (DWG)  
REGISTERED APPRENTICESHIP PROGRAMS  
REENTRY EMPLOYMENT OPPORTUNITIES (REO) GRANT RECIPIENTS  
SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP) GRANT RECIPIENTS  
TRADE ADJUSTMENT ASSISTANCE (TAA) LEADS  
YOUTHBUILD GRANT RECIPIENTS



**FROM:** JOHN PALLASCH   
Assistant Secretary

**SUBJECT:** Guidance for Validating Required Performance Data Submitted by Grant Recipients of U.S. Department of Labor (DOL) Workforce Programs

- Purpose.** This guidance provides information to grant recipients of the U.S. Department of Labor workforce programs, including states, and provides guidelines for grant recipients to use in developing procedures for ensuring the data submitted for performance reporting are valid and reliable.
- Action Requested.** Grant recipients should distribute this information to the appropriate staff.

<b>RESCISSIONS</b> TEGL 22-15	<b>EXPIRATION DATE</b> Continuing
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	<b>NORTH CAROLINA DEPARTMENT OF COMMERCE DIVISION OF WORKFORCE SOLUTIONS</b>
	<b>DWS Operational Guidance Number: OG 16-2021, Change 3</b>
	<b>Date: January 08, 2024</b>
	<b>Subject: Defining Data Validation Process and Procedures</b>
	<b>From:</b>  Chet Mottershead Assistant Secretary for Workforce

**Purpose:** To define the data validation guidance and procedures to be used for Workforce Innovation and Opportunity Act (WIOA) Title I Adult, WIOA Title I Dislocated Worker (DW), WIOA Title I Youth, WIOA Title III Wagner-Peyser (WP), and Trade Adjustment Assistance (TAA) programs.

This Operational Guidance incorporates the inclusion of several new Wagner-Peyser data validation elements and highlights minor changes to some existing elements of Attachment 2 (Participant Individual Record Layout (PIRL) Elements), such as changes in the wording of the allowed documentation to remain consistent with TEGL 23-19, Change 2.

This Operational Guidance rescinds OG 16-2021, Change 2 and the procedures herein supersede all previous policies, procedures, and guidelines regarding Defining Data Validation Process and Procedures.

**Background:** Under WIOA Section 116(d)(5) and the further guidance of Training and Employment Guidance Letter (TEGL) 23-19, Change 2 and TEGL 07-18, states are required to develop a data validation strategy that helps ensure the accuracy of the annual statewide performance reports, safeguards data integrity, and promotes the timely resolution of data anomalies and inaccuracies.

Data Validation is a series of internal controls or quality assurance techniques established to verify the accuracy, validity, and reliability of data. The establishment of a shared data validation framework that requires a consistent approach across programs ensures that all program data consistently and accurately reflect the performance of each grant recipient. To that end, the purposes of validation procedures for performance data are to:

- verify that the performance data reported by grant recipients to the Department of Labor (DOL) are valid, accurate, reliable, and comparable across programs;
- identify anomalies in the data and resolve issues that may cause inaccurate reporting;
- outline source documentation required for common data elements; and
- improve program performance accountability through the results of data validation efforts.

**Action:** Local Area Workforce Development Boards (WDBs) should be aware that data validation will be undertaken by Division of Workforce Solutions (DWS) staff as described in this Operational Guidance. In addition, all Local Area WDBs are required to annually conduct their data validation for all Title I and Title III programs. Attachment 1 outlines the Data Validation Process and Procedures and Attachment 2 provides a complete list of all Participant Individual Record Layout (PIRL) Elements to be validated.

**Effective Date:** Immediately

**Expiration:** Indefinite

**Contact:** DWS Director of Performance

**Attachments:**

1. Data Validation Process and Procedures
2. Participant Individual Record Layout (PIRL) Elements

## Data Validation Process and Procedures

### Conducting Data Validation Reviews

Data Validation will be conducted by four Units within the Division of Workforce Solutions (DWS): the Performance Unit, the Regional Analysts, the Trade Adjustment Assistance (TAA) team, and Information Technology (IT) staff:

- **Performance Unit:** The Performance unit will oversee all Title I and Title III validation. This will include all Participant Individual Record Layout (PIRL) elements noted in TEGLS 07-18 and 23-19, Change 2.
- **Regional Analysts:** The Regional Analysts will assist in the annual data validation process by being included in the pool of validators and by offering their expertise in case management practices for policy and training revisions.
- **TAA:** TAA will complete validation for its cases using the required validation elements noted in TEGL 23-19, Change 2.
- **IT Staff:** For all programs, IT staff will cover the required wage matching PIRL elements.
- Please see Attachment 2 for the exact breakdown of PIRL elements covered by each Unit.

### Sample Creation

Each Workforce Development Board (WDB) will have a sample of 6 cases covering each program: Title I – Adult, Title I – Dislocated Worker, Title I – Youth, and Title III – Wagner-Peyser. This will yield a typical case count of 24 cases per WDB per program year. However, in the rare instance that the total number of cases for a program being validated is less than 6, all cases for that program will be reviewed and the total case count for a particular WDB may fall below 24 for that program year.

Sample Size for Each Workforce Development Board		
WIOA Program		Sample Size
Title I	Adult	6
Title I	Dislocated Worker	6
Title I	Youth	6
Title III	Wagner-Peyser	6
Total Cases per Workforce Development Board		24

Management overseeing the Trade Adjustment Assistance (TAA) program will determine a sample size based on their program's total case count and provide this figure to the Performance Unit by December 1<sup>st</sup> each program year for a case sample to be generated.

### Timeframe

- **Performance Unit and Regional Analysts**
  - Data Validation by Performance staff and the Regional Analysts will be completed from the third quarter to the fourth quarter of each program year with all validation reviews to be concluded no later than May 31 of each program year to ensure sufficient time for corrective actions to be issued and completed. On December 1 (or the first business day thereafter) of each program year, the Director of Performance will randomly assign all Local Area WDBs (or portions thereof based on case count) to a data validation assessor. As a result of the random assignment, Local Area WDBs are likely to be validated in a different order and by a different data validation assessor each program year.
- **TAA and IT Staff**

- Data Validation will be conducted within each program year from January 2 through May 31.

### **Validation Process and Worksheet Creation**

NCWorks Online (NCWorks), DWS' Case Management System, will be used to sample the pool of available active and exited cases for WIOA Title I – Adult, WIOA Title I – Dislocated Worker, WIOA Title I – Youth, WIOA Title III – Wagner-Peyser, and TAA. NCWorks will generate the necessary number of worksheets and will cover only the PIRL elements being validated by the respective Units of DWS as noted above (see Attachment 2 for the breakdown of elements covered by DWS Units).

Each worksheet will detail one case, with the corresponding PIRL element values, and included columns for the Reported Value, the Audit Outcome, the Document used for validation, and any Comments. Staff will evaluate each PIRL element value against the participant's file to see if case file documentation supports it and mark the reported value as either Pass, Fail, or Unable to Validate by choosing the corresponding value in the drop-down within the Audit Outcome column. Each PIRL element listed in Attachment 2 has a list of the supported documentation acceptable for that element. Only the documents listed as approved documentation for that PIRL element may be used in support. Any elements marked Fail or Unable to Validate must be accompanied by a supportive explanation in the Comments column, detailing why the value failed or was not able to be validated and suggesting possible corrective action.

At the conclusion of the validation process, an electronic copy of the Pass or Fail record sheets must be returned to the head of each respective Unit (noted below) responsible for completing the validation, to ensure proper records retention:

- Performance: Director of Performance
- TAA: Trade Unit Manager and Trade Adjustment Assistance Coordinator
- IT: Information Technology Director

### **Monitoring**

The Accountability Unit will integrate Data Validation into the Unit's annual oversight Guide and participant reviews. The Unit will document the results in the Local Area WDB Oversight Summary Report. Any documented deficiencies will be recorded with a date required for rectification consistent with the current monitoring correction timelines.

### **Data Integrity**

On a quarterly basis, the Department of Labor (DOL) will provide DWS with feedback on its submitted performance reports to aid in data integrity efforts and support data accuracy. The analysis will include, but is not limited to, a review of the data submitted, anomalies and outliers, and other potential data quality issues, which may indicate reporting inaccuracies. The DWS will make use of these feedback reports to conduct quarterly data integrity reviews to identify data errors, missing data, out-of-range variances in values reported, and other anomalies.

### **Correcting Missing or Erroneous Data**

Each Unit will provide a summary to the Local Area WDBs outlining areas that Failed or were marked Unable to Validate during the data validation process. All Data Validation related reports, desk reviews, or annual reviews will provide required corrective actions with an indicated due date based on the process needed for correction. Local Area WDBs must take appropriate actions to correct missing or erroneous data found during Data Validation. Such actions may include:

- working with the Local Area WDB's superuser and potentially the Local Area WDB's assigned Regional Analyst to make data corrections;
- providing additional training or technical assistance to staff to address data errors; and
- collecting missing documentation to provide necessary verification.

Failure to comply with identified corrective actions by the identified completion date may cause:



- One year after the initial identification:
  - Mandatory on-site facilitated training by DWS staff on the required reporting for data elements.
- Two years of high or repeated error rates:
  - Issue of a monitoring "Finding"; and
  - Formal notification to the Local Area WDB Chair and Chief Local Elected Officer (CLEO) of failure to comply.

### **Records Retention**

All Data Validation records and documentation will be maintained in accordance with Federal records retention requirements, as given in 2 CFR 200.333:

*Financial records, supporting documents, statistical records, and all other non-Federal entity records pertinent to a Federal award must be retained for a period of three years from the date of submission of the final expenditure report or, for Federal awards that are renewed quarterly or annually, from the date of the submission of the quarterly or annual financial report, respectively, as reported to the Federal awarding agency or pass-through entity in the case of a subrecipient.*

This would include:

- copies of worksheets on data elements or records reviewed;
- frozen quarterly wage records for wage record matching used for reporting outcomes;
- trends in common data accuracy issues and error rates; and
- corrective action efforts made after data validation reviews.

Each respective Unit will retain the records associated with its portion of the Data Validation process with retention overseen by the Unit leaders noted below:

- Performance: Director of Performance
- TAA: Trade Unit Manager and Trade Adjustment Assistance Coordinator
- IT: Information Technology Director

### **Process Assessment**

The Director of Performance and the Accountability Manager will meet during the first quarter of each program year to assess the effectiveness of current Data Validation procedures and determine whether revisions to the policy and process are necessary. Any updates or changes will be released as a formal update to this Operational Guidance (OG).

### **Training**

During the second quarter of each program year, Data Validation staff will review, and receive training on the Data Validation process to ensure uniform application of all policies and procedures. In addition, DWS will provide annual Data Validation training for local office staff. Beyond the annual training provided by DWS, Local Area WDBs are expected to provide additional staff training, on at least an annual basis, on the importance of accurate data entry and allowable source documentation as given in WIOA and Wagner-Peyser Employment Act Participant Eligibility.

### **Local Area WDB/Local Area**

Each Local Area WDB is required to conduct Data Validation at least once annually for the Title I – Adult, Title I – Dislocated Worker, Title I – Youth, and Title III – Wagner-Peyser programs as a part of its ongoing monitoring efforts. Attachment 2 to this OG, is a modified version of Attachment II of TEGL 23-19 Change 2, which is the complete list of PIRL elements that need to be validated. (Note that the WIOA and Wagner-Peyser Employment Act Participant Eligibility Reference Guide provided as Operational Guidance by the DWS has been updated to be in agreement with TEGL 23- 19 Change 2, Attachment II.) Local Area WDBs should be aware that the Youth and Wagner-Peyser programs may have different elements required

compared to the Adult and Dislocated Worker programs and attention should be paid to ensure each program is validated according to its respective list of required elements.

For the most up-to-date guidance on PIRL elements and their definitions, please refer to USDOL's website: <https://www.dol.gov/agencies/eta/performance/reporting>. All records must be retained as outlined in the Records Retention section of this policy. This would include retention of a list of validated records, Pass or Fail worksheets, and documentation associated with any corrective actions taken.

### **Self-Attestation in WIOA Title I Programs**

In the three WIOA Title I Programs (Adult, Dislocated Worker, and Youth) there are a number of PIRL elements for which self-attestation is an allowable form of data validation documentation. Please refer to Attachment 2 for the complete list of PIRL elements for which self-attestation can be used. When using self-attestation for WIOA Title I documentation, there are three key considerations:

1. Self-Attestation should be used when an item is unverifiable, or it is unreasonably difficult to obtain other acceptable documentation. All other acceptable forms of documentation for a given PIRL element should be utilized first since self-attestation is not the primary method of gathering documentation to verify data elements. The lack of source documentation beyond self-attestation should not delay or prevent enrollment and the receipt of services.
2. Self-Attestation always refers to signed documentation. If the participant has not signed the supporting documentation, the documentation is not sufficient and will fail data validation.
3. If self-attestation is used, the scanned supporting documentation must directly relate to the PIRL element the scanned document is being used to support. For example, if self-attestation is being used as documentation for PIRL 802 – Low Income Status at Program Entry, then the uploaded supporting document must include an entry specifying the participant's income. In this example, if the scanned document did not indicate the participant's income, the documentation would not be sufficient and would fail data validation.

In addition to the considerations above, please be aware of the specific self-attestation usage limitations for PIRL Elements 200 – Date of Birth and 301 – Eligible Veteran Status for WIOA Title I programs. For both elements, self-attestation may only be used for Homeless Individuals or Runway Youth. Please refer to Attachment 2 for a full listing of the PIRL elements for which self-attestation can be used and any limitations on usage.

### **Self-Attestation in WIOA Title III – Wagner-Peyser**

In the WIOA Title III – Wagner-Peyser, there are a number of PIRL elements for which self-attestation is an allowable form of data validation documentation. Please refer to Attachment 2 for the complete list of PIRL elements for which self-attestation can be used. When using self-attestation for WIOA Title III documentation, there are two key considerations:

1. Self-Attestation always refers to signed documentation. If the participant has not signed the supporting documentation, the documentation is not sufficient and will fail data validation. For WIOA Title III, signed documentation often takes the form of a signed application. Please note, detailed in the section below, the requirement for every participant's WIOA Title III application to now be signed beginning on July 1, 2023.
2. If self-attestation is used, the scanned supporting documentation must directly relate to the PIRL element the scanned document is being used to support. For example, if self-attestation is being used as documentation for PIRL 802 – Low Income Status at Program Entry, then the uploaded supporting document must include an entry specifying the participant's income. In this example, if the scanned document did not indicate the participant's income, the documentation would not be sufficient and would fail data validation.

### **Veterans Status and DD-214s**

A special note regarding veterans receiving services. A DD-214 is not necessary for a veteran to be registered or begin receiving services under either the WIOA Title I (Adult, Dislocated Worker) or WIOA Title III (Wagner-Peyser) programs. A DD-214 (or alternative documentation as indicated in Attachment 2) only becomes necessary for WIOA Title I participants when services rise above basic career services.

**Signed Applications and Disability Status**

Beginning July 1, 2023 (start of PY 2023), there are two new requirements for how WDBs must handle WIOA Title I/Title III applications:

1. Each WDB must ensure that every Title I/Title III application is signed, either electronically or physically, and retained as a saved document within the participant's electronic case files in NCWorks. WDBs are encouraged to use electronic signature capabilities as it makes for an easier process regardless of whether the participant is physically in the local office or not.
2. Each application must include the Disability Information section as a standard component of a signed Title I/Title III application. Including the Disability Information section of both applications facilitates validators' ability to track the necessary disability PIRL elements for WIOA Title I/Title III programs.

A separate Operational Guidance, OG 03-2023, has been published that specifically addresses the signed application requirements for WIOA Title I and Title III programs.





### AD & DW Self-Attestation Form

Applicant's Name: \_\_\_\_\_ State ID Number: \_\_\_\_\_

#### EMPLOYMENT INFORMATION

***Employment Status***

☐ I am employed.

☐ I am employed but received notice of termination of employment or military separation is pending.

☐ I am not employed.

***Applicant - Check any of the following that apply:***

☐ I have had no income in the last six months.

☐ I have received financial support from family members and friends.

☐ I have worked odd jobs during the past 6 months and earned \$ \_\_\_\_\_.

☐ I was self-employed during the past 6 months and earned \$ \_\_\_\_\_.

☐ I have received cash gifts.

☐ I am unemployed, but I have had employment during the last 6 months.

***Other Adult Family Member(s) or Spouse - Check any of the following that apply:***

☐ I have had no income in the last six months.

☐ I have received financial support from family members and friends.

☐ I have worked odd jobs during the past 6 months and earned \$ \_\_\_\_\_.

☐ I was self-employed during the past 6 months and earned \$ \_\_\_\_\_.

Signature of Adult Family Member or Spouse \_\_\_\_\_ Date \_\_\_\_\_

#### EDUCATION INFORMATION

***School Status***

☐ I am not attending school.

***Highest education level completed:***

☐ High School Diploma

☐ High School Equivalency (GED)

☐ High School Certificate of Attendance/Completion (Individual with disability)

☐ Completed 1 or more years of post-secondary.

☐ Attained a post-secondary technical or vocational certificate (non-degree).

☐ Attained an Associate Degree.

☐ Attained a bachelor's degree.

☐ Attained a degree beyond a bachelor's degree.

☐ No Education Level Completed

#### FAMILY SIZE AND INCOME INFORMATION

My family size is \_\_\_\_\_ (number of individuals living in a single residence related by blood, marriage, or decree of court).

Name	Age	Relationship to Applicant
		<b>Applicant</b>



Applicant's Name: \_\_\_\_\_ State ID Number: \_\_\_\_\_

**BARRIERS**

<b><i>Ex-Offender</i></b>	<b><i>Homeless</i></b>	<b><i>Displaced Homemaker</i></b> (Defined Under Cat 6 of Dislocated Worker)
<input type="checkbox"/> I am an offender.	<input type="checkbox"/> I am homeless.	<input type="checkbox"/> I am a Displaced Homemaker.

I certify that the information recorded on this form is true and accurate. I understand that the above information, if misrepresented, may be grounds for immediate termination from the WIOA program.

Participant enrollment information must be dated within 30 days of the WIOA program application date.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Career Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_





Applicant's Name: \_\_\_\_\_ State ID Number: \_\_\_\_\_

### DISLOCATED WORK INFORMATION

Dislocated Worker Status (Does not apply to those who voluntarily quit, were terminated or fired for cause)

The following applies to my situation:

- ☐ **Category 1:** Terminated or laid off, or has received notice of termination or layoff, **and is eligible for or exhausted entitlement to UC, and** is unlikely to return to previous industry or occupation.
- ☐ **Category 2:** Terminated or laid off, or has received notice of termination or layoff, **and** has been employed for sufficient duration (based on state policy) to demonstrate attachment, but **is not eligible for UC due to insufficient earnings**, or the **employer is not covered under a State UC law**, and is unlikely to return to previous industry or occupation.
- ☐ **Category 3:** Individual is terminated or laid off, or has received notice of termination or layoff, from employment as a result of **permanent closure** of or **substantial layoff** at a plant, facility or business.
- ☐ **Category 4:** Individual is **employed** at a facility at which the employer has made a **general announcement that such facility will close**. Enter the date the facility will close (if known) in the Projected Layoff Date.
- ☐ **Category 5:** Individual was **previously self-employed** (including farmers, ranchers and fishermen) but is unemployed as a result of general economic conditions in the community of residence or because of natural disaster. Record the last date of self-employment in the Actual Layoff Date.
- ☐ **Category 6:** Displaced Homemaker: An individual who has been providing **unpaid services to family members** in the home **and** has been dependent on the income of another family member but is **no longer supported by that income**; or is the spouse of a member of the Armed Forces on active duty and whose **family income is significantly reduced** due to a deployment, or a call to active duty, or a permanent change of station, or the service-connected death or disability of the member; **and** is **unemployed** or **underemployed** and is experiencing difficulty in obtaining or upgrading employment.
- ☐ **Category 7:** The **spouse of a member of the Armed Forces** on active duty **and** who has experienced a **loss of employment as a direct result of relocation to accommodate a permanent change in duty station** of such member.
- ☐ **Category 8:** The **spouse of a member of the Armed Forces** on active duty and who is **unemployed** or **underemployed** and is experiencing difficulty in obtaining or upgrading employment.
- ☐ **Category 12: Dislocated Worker Grant (DWG) eligibility:** Individual does not meet criteria outlined for Dislocated Workers in categories 1 – 8 above, but is an individual that meets **DWG** eligibility outlined under WIOA Title ID National programs, Sec. 170 National Dislocated Worker grants, relating to Sec. 170 (b) (1) (A) workers affected by major economic dislocations OR Sec. 170 (b) (1) (B) workers affected by an emergency or major disaster.
- ☐ **Category 13:** State-Defined Dislocated Worker Eligibility

I certify, under penalty of perjury, that the information stated above is true and accurate. I understand that the above information, if misrepresented or incomplete, may be grounds for immediate termination from this program and/or penalties as specified by law.

Participant enrollment information must be dated within 30 days of WIOA program application date.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Career Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_





### NextGen Self-Attestation Form

Applicant's Name: \_\_\_\_\_ State ID Number: \_\_\_\_\_

#### EMPLOYMENT INFORMATION

##### ***Employment Status***

- ☐ I am employed.  
Place of Employment: \_\_\_\_\_  
Position: \_\_\_\_\_  
Rate of Pay: \_\_\_\_\_
- ☐ I am employed but received notice of termination of employment or military separation is pending.
- ☐ I am not employed.

##### ***Applicant - Check any of the following that apply:***

- ☐ I have had no income in the last six months.
- ☐ I have received financial support from family members and friends.
- ☐ I have worked odd jobs during the past 6 months and earned \$ \_\_\_\_\_.
- ☐ I was self-employed during the past 6 months and earned \$ \_\_\_\_\_.
- ☐ I have received cash gifts.
- ☐ I am unemployed, but I have had employment during the last 6 months.

##### ***Other Adult Family Member(s) or Spouse - Check any of the following that apply:***

- ☐ I have had no income in the last six months.
- ☐ I have received financial support from family members and friends.
- ☐ I have worked odd jobs during the past 6 months and earned \$ \_\_\_\_\_.
- ☐ I was self-employed during the past 6 months and earned \$ \_\_\_\_\_.

Signature of Adult Family Member or Spouse \_\_\_\_\_ Date \_\_\_\_\_

#### EDUCATION INFORMATION

##### ***School Status***

- ☐ I am not attending school.

##### ***Highest education level completed:***

- ☐ High School Diploma
- ☐ High School Equivalency (GED)
- ☐ High School Certificate of Attendance/Completion (Individual with disability)
- ☐ Completed 1 or more years of post-secondary.
- ☐ Attained a post-secondary technical or vocational certificate (non-degree).
- ☐ Attained an Associate Degree.
- ☐ Attained a bachelor's degree.
- ☐ Attained a degree beyond a bachelor's degree.
- ☐ No Education Level Completed



Applicant's Name: \_\_\_\_\_ State ID Number: \_\_\_\_\_

### FAMILY SIZE AND INCOME INFORMATION

My family size is \_\_\_\_\_ (number of individuals living in a single residence related by blood, marriage, or decree of court).

<i>Name</i>	<i>Age</i>	<i>Relationship to Applicant</i>
		<b>Applicant</b>

### BARRIERS

<b><i>Ex-Offender</i></b>	<b><i>Homeless</i></b>	<b><i>Runaway</i></b>
<input type="checkbox"/> I am an offender.	<input type="checkbox"/> I am homeless.	<input type="checkbox"/> I am a runaway youth under the age of 18.

### NEXTGEN PROGRAM PARTICIPANTS

Additional Assistance for NextGen Eligibility – Board Approval Required

I require additional assistance to complete an educational program or to secure employment because:

***Employment:***

☐ I have a poor work history, to include no work history, or have been fired from a job in the past 6 months.

***Homeless:***

- ☐ I share the housing of other person due to loss of housing, economic hardship, or similar.
- ☐ I am living in a motel, hotel, or trailer park or campground due to the lack of alternative adequate living accommodations.
- ☐ I am living in an emergency or transitional shelter.
- ☐ I am awaiting foster care placement.

***Attending or Not Attending School:***

- ☐ I have poor attendance patterns in an educational program during the last 12 calendar months.
- ☐ I have been expelled from school within the last 12 calendar months.
- ☐ I have been suspended from school within the last 12 calendar months.
- ☐ I have below average grades of less than a “C” grade point average.
- ☐ I am within compulsory school age and did not attend the most recent school year calendar quarter.
- ☐ I have dropped out of a post-secondary education program during the past 12 months.
- ☐ I have dropped out of a post-secondary educational program during the past 12 calendar months.

***Receive Assistance:***

- ☐ I or anyone in my family is receiving any public assistance such as Food Stamps, Medicaid, SSI, etc.
- ☐ I am age 16 and over and receiving services/payments through Section 477 of the Social Security Act.
- ☐ I am receiving free/reduced lunch.
- ☐ I am the custodial parent of a child who is eligible for free/reduced lunch.
- ☐ Specify other financial assistance that you receive \_\_\_\_\_.

***Foster Care:***

- ☐ I am in foster care.
- ☐ I am aged out of foster care.



Applicant's Name: \_\_\_\_\_ State ID Number: \_\_\_\_\_

<p><input type="checkbox"/> I am in an out-of-home placement.</p> <p><input type="checkbox"/> I have previously been placed in out-of-home care (foster care, group home, or kinship care) for more than 6 months between the ages of 16 -21.</p> <p><input type="checkbox"/> I was formerly in foster care but returned to my family before turning 18.</p> <p><b>Offender:</b></p> <p><input type="checkbox"/> I am currently incarcerated.</p> <p><input type="checkbox"/> I have one of more parents currently incarcerated.</p> <p><b>Pregnant/Parent:</b></p> <p><input type="checkbox"/> I am pregnant or parenting for one or more dependents under age 18.</p> <p><b>Disability:</b></p> <p><input type="checkbox"/> I have a disability.</p> <p><input type="checkbox"/> I require additional assistance.</p> <p>Please specify the needed assistance _____.</p>
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I certify that the information recorded on this form is true and accurate. I understand that the above information, if misrepresented, may be grounds for immediate termination from the WIOA program.

Participant enrollment information must be dated within 30 days of the WIOA program application date.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Career Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_





Participant Individual Record Layout (PIRL) Elements

DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability (TAA)	200	Date of Birth (WIOA)	<b>Record</b> the participant's date of birth.	R	R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Driver's License</li><li>- Birth Certificate</li><li>- DD-214</li><li>- Report of Transfer or Discharge Paper</li><li>- Federal, State, Local, or Tribal Identification Card</li><li>- Passport</li><li>- Hospital Record of Birth</li><li>- Public Assistance/Social Service Records</li><li>- School Records or ID Cards</li><li>- Work Permit</li><li>- Cross-Match with State Agency Records</li><li>- Justice System Records</li><li>- Selective Service Registration</li><li>- <b>Self-Attestation for WIOA Title I</b> - can <b>only</b> be used as documentation for Homeless Individuals or Runaway Youth</li><li>- <b>Self-Attestation for WIOA Title III</b> - can be used for all Title III participants</li></ul>
Performance/ Accountability	202	Individual with a Disability (WIOA)	<b>Record 1</b> if the participant indicates that he or she has any "disability", as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. <b>Record 9</b> if the participant did not self-identify. <b>Record 0</b> if the participant indicates that he or she does not have a disability that meets the definition.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- School 504 Records Provided by Student</li><li>- Assessment Test Results</li><li>- School Individualized Education Program (IEP) record</li></ul>
Performance/ Accountability (TAA)	301	Eligible Veteran Status	<b>Record 1</b> if the participant is a person who served in the active U.S. military, naval, or air service for a period of less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable. <b>Record 2</b> if the participant served on active duty for a period of more than 180 days and was discharged or released with other than a dishonorable discharge; or was discharged or released because of a service connected disability; or as a member of a reserve component under an order to active duty pursuant to section 167(a), (d), or (g), 673 (a) of Title 10, U.S.C., served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized and was discharged or released from such duty with other than a dishonorable discharge. <b>Record 3</b> if the participant is: (a) the spouse of any person who died on active duty or of a service connected disability, (b) the spouse of any member of the Armed Forces serving on active duty who at the time of application for assistance under this part, is listed, pursuant to 38 U.S.C 101 and the regulations issued there under, by the Secretary concerned, in one or more of the following categories and has been so listed for more than 90 days: (i) missing in action; (ii) captured in the line of duty by a hostile force; or (iii) forcibly detained or interned in the line of duty by a foreign government or power; or (c) the spouse of any person who has a total disability permanent in nature resulting from a service connected disability or the spouse of a veteran who died while a disability so evaluated was in existence. <b>Record 0</b> if the participant does not meet any one of the conditions described above. Leave "blank" if the data is not available.	R	R	R		R	One of the following: <ul style="list-style-type: none"><li>- DD-214</li><li>- A Letter from the Veterans Administration</li><li>- Cross-Match with Department of Defense Records</li><li>- Cross-Match with Veterans Service Database</li><li>- NGB- 22 documenting Title 10 federal active-duty service</li><li>- <b>Self-Attestation for WIOA Title I</b> - can <b>only</b> be used as documentation for Homeless Individuals or Runaway Youth</li><li>- <b>Self-Attestation for WIOA Title III</b> - can be used for all Title III participants</li></ul>
Performance/ Accountability	401	UC Eligible Status	<b>Record 1</b> if the participant is a person who (a) filed a claim and has been determined eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights, and (b) was referred based on participation in the Reemployment Services and Eligibility Assessment (RESEA) program. <b>Record 2</b> if the participant is a person who (a) filed a claim and has been determined eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights, and (b) was referred to service through the state's Worker Profiling and Reemployment Services (WPRS) system. <b>Record 3</b> if the participant is a person who meets condition 2 (a) described above, but was not referred to service through the state's WPRS system or the RESEA program. <b>Record 4</b> if the participant meets condition 2(a), but has exhausted all UC benefit rights for which he or she has been determined eligible, including extended supplemental benefit rights. <b>Record 5</b> if the participant is claimant who is exempt from normal work search requirements according state law, and does not have to perform work search activities. <b>Record 0</b> if the participant was neither a UC Claimant nor an Exhaustee. Leave blank if this data element does not apply to the participant.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- Cross-Match to State UI Database</li><li>- Cross-Match to State MIS Database</li><li>- Referral Transmittal by RESEA or WPRS</li><li>- Self-Attestation for Code Values 3 and 4 only</li></ul>
Performance/ Accountability	402	Long-Term Unemployed at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, has been unemployed for 27 or more consecutive weeks. <b>Record 0</b> if the participant does not meet the condition described above.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- Public Assistance Records</li><li>- Refugee Assistance Records</li><li>- Cross-Match with Public Assistance Database</li><li>- Cross-Match to State UI Database</li></ul>
Performance/ Accountability	409	School Status at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, has not received a secondary school diploma or its recognized equivalent and is attending any primary or secondary school (including elementary, intermediate, junior high school, whether full- or part-time), or is between school terms and intends to return to school. <b>Record 2</b> if the participant, at program entry, has not received a secondary school diploma or its recognized equivalent and is attending an alternative high school or an alternative course of study approved by the local educational agency whether full- or part-time, or is between school terms and is enrolled to return to school. <b>Record 3</b> if the participant, at program entry, has received a secondary school diploma or its recognized equivalent and is attending a postsecondary school or program (whether full or part-time), or is between school terms and is enrolled to return to school. <b>Record 4</b> if the participant, at program entry, is not within the age of compulsory school attendance; and is no longer attending any school and has not received a secondary school diploma or its recognized equivalent. <b>Record 5</b> if the participant, at program entry, is not attending any school and has either graduated from secondary school or has attained a secondary school equivalency. <b>Record 6</b> if the participant, at program entry, is within the age of compulsory school attendance, but is not attending school and has not received a secondary school diploma or its recognized equivalent.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Applicable Records from Education Institution (GED certificate, diploma, attendance record, transcripts, report card, or school documentation)</li><li>- Self-Attestation</li><li>- Signed Intake Application or Enrollment Form</li><li>- Electronic Records</li><li>- Case Notes</li></ul>

DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability	410	Date of Actual Dislocation	<b>Record</b> the participant's date of actual dislocation from employment. This date is the last day of employment at the dislocation job.  Leave blank if there is no dislocation job (e.g., displaced homemaker) or this data element does not apply to the participant.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- Verification from Employer</li><li>- Rapid Response List</li><li>- Notice of Layoff</li><li>- Public Announcement with Follow-Up Cross-Match with UI Database</li><li>- Self- Attestation</li></ul>
TAA	411	Most Recent Date of Qualifying Separation	<b>Record</b> the participant's most recent date of separation from trade-impacted employment that qualifies the participant to receive benefits and/or services under the Trade Act.  Leave blank if there is no qualifying separation date or the separation date is the same as the Date of Actual Dislocation or this data element does not apply to the participant.					R	One of the following: <ul style="list-style-type: none"><li>- Verification from Employer</li><li>- Rapid Response List</li><li>- Notice of Layoff</li><li>- Public Announcement with Follow-Up Cross-Match with UI Database</li><li>- Self- Attestation</li></ul>
TAA	412	Tenure with Employer at Separation	<b>Record</b> the total number of months that the participant was employed with the employer of record as of the participant's most recent qualifying date of separation. Employment of at least one day but less than one month should be recorded as "1".  Leave blank if this data element does not apply to the participant.					R	One of the following: <ul style="list-style-type: none"><li>- Verification from Employer</li><li>- Worker List from Firm</li><li>- Self-Attestation</li><li>- Cross-Match</li><li>- Signed Intake Application or Enrollment Form</li><li>- Case Notes</li><li>- (Note: Self-Attestation only in cases when other allowable source documentation is not available due to records retention timelines expiring.)</li></ul>
Performance/ Accountability	413	Migrant and Seasonal Farmworker Designation as defined at 20 CFR 651.10	<b>Record 1</b> if the participant is a seasonal farmworker, meaning an individual who is employed, or was employed in the past 12 months, in farmwork (as described at 20 CFR 651.10) of a seasonal or other temporary nature and is not required to be absent overnight from his or her permanent place of residence. Non- migrant individuals who are full-time students are excluded. Labor is performed on a seasonal basis where, ordinarily, the employment pertains to, or is of the kind exclusively performed at certain seasons, or periods of the year and which, from its nature, may not be continuous or carried on throughout the year. A worker, who moves from one seasonal activity to another, while employed in farm work, is employed on a seasonal basis even though he or she may continue to be employed during a major portion of the year. A worker is employed on other temporary basis where he or she is employed for a limited time only or his or her performance is contemplated for a particular piece of work, usually of short duration. Generally, employment which is contemplated to continue indefinitely is not temporary. <b>Record 2</b> if the participant is a migrant farmworker, meaning a seasonal farmworker (as defined above) who travels to the job site so that the farmworker is not reasonably able to return to his or her permanent residence within the same day. Full-time students traveling in organized groups rather than with their families are excluded. <b>Record 0</b> if the participant does not meet the condition described above. Leave blank if this data element does not apply to the individual.	R					One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- Cross-Match with Public Assistance Records</li><li>- Case Notes</li><li>- Cross-Match with State MIS Database</li><li>- Employment Records</li></ul>
Performance/ Accountability	600	Temporary Assistance to Needy Families (TANF)	<b>Record 1</b> if the participant is listed on the welfare grant or has received cash assistance or other support services from the TANF agency in the last six months prior to participation in the program. <b>Record 0</b> if the participant does not meet the condition described above. Leave blank if this data element does not apply to the participant.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- TANF Eligibility Verification</li><li>- TANF Period of Benefit Receipt Verification</li><li>- Referral Transmittal from TANF</li><li>- Cross-Match with TANF Public Assistance Records</li></ul>
Performance/ Accountability	601	Exhausting TANF Within 2 Years (Part A Title IV of the Social Security Act) at Program Entry (WIOA)	<b>Record 9</b> if the data element does not apply to the participant (i.e., the participant has never received TANF, or if the participant has already exhausted lifetime TANF eligibility). <b>Record 1</b> if the participant, at program entry, is within 2 years of exhausting lifetime eligibility under part A of Title IV of the Social Security Act (42 U.S.C. 601 et seq.), regardless of whether receiving these benefits at program entry. <b>Record 0</b> if the participant does not meet the condition described above.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- TANF Eligibility Verification</li><li>- TANF Period of Benefit Receipt Verification</li><li>- Referral Transmittal from TANF</li><li>- Cross-Match with TANF Public Assistance Records</li></ul>
Performance/ Accountability	602	Supplemental Security Income (SSI) / Social Security Disability Insurance (SSDI)	<b>Record 1</b> if the participant is receiving or has received SSI under Title XVI of the Social Security Act in the last six months prior to participation in the program. <b>Record 2</b> if the participant is receiving or has received SSDI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the program. <b>Record 3</b> if the participant is receiving or has received both SSI and SSDI in the last six months prior to participation in the program. <b>Record 4</b> if the participant is receiving or has received SSI under Title XVI of the Social Security Act in the last six months prior to participation in the program and is a Ticket to Work Program Ticket Holder issued by the Social Security Administration. <b>Record 5</b> if the participant is receiving or has received SSDI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. <b>Record 6</b> if the participant is receiving or has received both SSI and SSDI in the last six months prior to participation in the program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. <b>Record 0</b> if the participant does not meet any of the conditions described above.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- SSI/SSDI Receipt of Benefits Verification</li><li>- Referral Transmittal from SSA</li><li>- SSI/SSDI Eligibility Verification</li><li>- Cross-Match with SSA Database</li></ul>
Performance/ Accountability	603	Supplemental Nutrition Assistance Program (SNAP)	<b>Record 1</b> if the participant is receiving assistance through the Supplemental Nutrition Assistance Program (SNAP) under the Food and Nutrition Act of 2008 (7 USC 2011 et seq.) <b>Record 0</b> if the participant does not meet the above criteria.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- SNAP Eligibility Verification</li><li>- Documentation of SNAP Benefit Receipt</li><li>- Referral Transmittal from SNAP</li><li>- Cross-Match with SNAP Public Assistance Records</li></ul>
Performance/ Accountability	604	Other Public Assistance Recipient	<b>Record 1</b> if the participant is a person who is receiving or has received cash assistance or other support services from one of the following sources in the last six months prior to participation in the program: General Assistance (GA) (state/local government), or Refugee Cash Assistance (RCA). Does not include foster child payments. <b>Record 0</b> if the participant does not meet the above criteria. Leave blank if this data element does not apply to the participant.		R	R			One of the following: <ul style="list-style-type: none"><li>- Copy of Authorization to Receive Cash Public Assistance</li><li>- Copy of Public Assistance Check</li><li>- Medical Card Showing Cash Grant Status</li><li>- Public Assistance Eligibility Verification</li><li>- Cross-Match</li></ul>

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Performance/Accountability	701	Pregnant or Parenting Youth	<b>Record 1</b> if the participant is a youth who is pregnant, or an individual (male or female) who is providing custodial care for one or more dependents under age 18. <b>Record 0</b> if the participant does not meet the conditions described above. Leave blank if the data is not available.				R		One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- Case Notes</li><li>- Needs Assessment</li><li>- WIC Eligibility Verification</li><li>- TANF Single Parent Eligibility Verification</li><li>- Signed Intake Application or Enrollment Form</li><li>- Signed Individual Service Strategy</li></ul>
Performance/Accountability	702	Youth Who Needs Additional Assistance	<b>Record 1</b> if the participant is an out-of-school youth who requires additional assistance to enter or complete an educational program, or to secure and hold employment or an in-school youth who requires additional assistance to complete an educational program or to secure or hold employment as defined by State or local policy. If the State Board defines a policy, the policy must be included in the State Plan. <b>Record 0</b> if the participant does not meet the conditions described above. Leave blank if this data element does not apply to the participant.				R		One of the following (see state policy on definition): <ul style="list-style-type: none"><li>- Signed Individual Service Strategy</li><li>- Self-Attestation</li><li>- Signed Intake Application or Enrollment Form</li><li>- Case Notes</li><li>- Needs Assessment</li></ul>
Performance/Accountability	704	Foster Care Youth Status at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, is a person aged 24 or under who is currently in foster care or has aged out of the foster care system. <b>Record 0</b> if the participant does not meet the conditions described above.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Written Confirmation from Social Services Agency</li><li>- Case Notes</li><li>- Self-Attestation</li><li>- Foster Care Agency Referral Transmittal</li><li>- Signed Intake Application or Enrollment Form</li><li>- Needs Assessment</li><li>- Signed Individual Service Strategy</li></ul>
Performance/Accountability	800	Homeless participant, Homeless Children and Youths, or Runaway Youth at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry: (a) lacks a fixed, regular, and adequate nighttime residence; this includes a participant who: is sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; is living in a motel, hotel, trailer park, or campground due to a lack of alternative adequate accommodations; is living in an emergency or transitional shelter; is abandoned in a hospital; or is awaiting foster care placement; has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, such as a car, park, abandoned building, bus or train station, airport, or camping ground; is a migratory child who in the preceding 36 months was required to move from one school district to another due to changes in the parent’s or parent’s spouse’s seasonal employment in agriculture, dairy, or fishing work; or is under 18 years of age and absents himself or herself from home or place of legal residence without the permission of his or her family (i.e., runaway youth). This definition does not include a participant imprisoned or detained under an Act of Congress or State law. A participant who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be recorded as homeless. <b>Record 0</b> if the participant does not meet the conditions described above. <b>Note:</b> WIOA youth who meet the definition of homeless as defined in WIOA section 681.210(c)(5) and 681.220(d)(4) are reported in this data element.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- Signed Intake Application or Enrollment Form</li><li>- Written Statement or Referral Transmittal from a Shelter or Social Service Agency</li><li>- Needs Assessment</li><li>- Case Notes</li><li>- Signed Individual Service Strategy</li><li>- A letter from caseworker or support provider</li></ul>
Performance/Accountability	801	Ex-Offender Status at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, is a person who either (a) has been subject to any stage of the criminal justice process for committing a status offense or delinquent act, or (b) requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction. <b>Record 9</b> if the participant did not disclose. <b>Record 0</b> if the participant does not meet any one of the conditions described above.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Documentation from the Juvenile or Adult Criminal Justice System</li><li>- Written Statement or Referral Document from a Court or Probation Officer</li><li>- Referral Transmittal from a Reintegration Agency</li><li>- Signed Intake Application or Enrollment Form</li><li>- Case Notes</li><li>- Needs Assessment</li><li>- Self-Attestation</li><li>- Signed Individual Service Strategy</li><li>- Federal Bonding Program Application</li></ul>
Performance/Accountability	802	Low Income Status at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, is a person who:(a) receives, or in the 6 months prior to application to the program has received, or is a member of a family that is receiving or in the past 6 months prior to application to the program has received: Assistance through the supplemental nutrition assistance program (SNAP) under the Food and Nutrition Act of 2008 (7 USC 2011 et seq.); assistance through the temporary assistance for needy families program under part A of Title IV of the Social Security Act (42 USC 601 et seq.); assistance through the supplemental security income program under Title XVI of the Social Security Act (42 USC 1381); or State or local income-based public assistance. Is in a family with total family income that does not exceed the higher of the poverty line or 70% of the lower living standard income level; is an individual who receives, or is eligible to receive a free or reduced price lunch under the Richard B. Russell National School Lunch Act (42 USC 1751 et seq.); is a foster child on behalf of whom State or local government payments are made; is a participant with a disability whose own income is at the poverty line but who is a member of a family whose income does not meet this requirement; is a homeless participant or a homeless child or youth or runaway youth (see Data Element #800); or is a youth living in a high-poverty area. <b>Record 0</b> if the participant does not meet the criteria presented above.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Award Letter From Veteran’s Administration</li><li>- Bank Statements</li><li>- Pay Stubs</li><li>- Compensation Award Letter</li><li>- Court Award Letter</li><li>- Pension Statement</li><li>- Employer Statement/Contact</li><li>- Family or Business Financial Records</li><li>- Housing Authority Verification</li><li>- Quarterly Estimated Tax for Self-Employed Persons</li><li>- Social Security Benefits</li><li>- UI Claim Documents</li><li>- Copy of Authorization to Receive Cash Public Assistance</li><li>- Copy of Public Assistance Check</li><li>- Public Assistance Eligibility Verification</li><li>- Cross-Match with Refugee Assistance Records</li><li>- Cross-Match with Public Assistance Records</li><li>- Cross-Match with UI Wage Records</li><li>- Self-Attestation</li><li>- For Youth Living in a High Poverty Area: Case notes documenting High Poverty Area status</li></ul>



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Performance/ Accountability	803	English Language Learner at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, is a person who has limited ability in speaking, reading, writing or understanding the English language and also meets at least one of the following two conditions (a) his or her native language is a language other than English, or (b) he or she lives in a family or community environment where a language other than English is the dominant language. <b>Record 0</b> if the participant does not meet the conditions described above.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Case notes</li><li>- Assessment Test Results</li><li>- Applicable Records from Education Institution (transcripts, or other school documentation)</li><li>- Self-Attestation</li><li>- Signed Intake Application or Enrollment Form</li><li>- Signed Individual Service Strategy</li></ul>
Performance/ Accountability	804	Basic Skills Deficient/Low Levels of Literacy at Program Entry	<b>Record 1</b> if the participant is, at program entry: a youth, who has English reading, writing, or computing skills at or below the 8th grade level on a generally accepted standardized test; or a youth or adult, who is unable to compute and solve problems, or read, write, or speak English at a level necessary to function on the job, in the participant's family, or in society. <b>Record 0</b> if the participant does not meet the conditions described above.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Case notes</li><li>- Assessment Test Results</li><li>- Applicable Records from Education Institution (transcripts, academic assessments, or other school documentation)</li></ul>
Performance/ Accountability	806	Single Parent at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, is single, separated, divorced or a widowed individual who has primary responsibility for one or more dependent children under age 18 (including single pregnant women). Record <b>9</b> if the participant did not self-identify. <b>Record 0</b> if the participant does not meet the condition described above.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- TANF Single Parent Eligibility Verification</li><li>- Case Notes</li><li>- Needs Assessment</li><li>- Signed Intake Application or Enrollment Form</li><li>- Signed Individual Service Strategy or Employment Plan</li></ul>
Performance/ Accountability	807	Displaced Homemaker at Program Entry (WIOA)	<b>Record 1</b> if the participant, at program entry, has been providing unpaid services to family members in the home and who:(A)(i) has been dependent on the income of another family member but is no longer supported by that income; or (ii) is the dependent spouse of a member of the Armed Forces on active duty (as defined in section 101(d)(1) of title 10, United States Code) and whose family income is significantly reduced because of a deployment (as defined in section 991(b) of title 10, United States Code, or pursuant to paragraph (4) of such section), a call or order to active duty pursuant to a provision of law referred to in section 101(a)(13)(B) of title 10, United States Code, a permanent change of station, or the service-connected (as defined in section 101(16) of title 38, United States Code) death or disability of the member; and(B) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment. <b>Record 0</b> if the participant does not meet the conditions described above.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- Signed Intake Application or Enrollment Form</li><li>- Cross-Match with Public Assistance Records</li><li>- Copy of Spouse's Layoff Notice</li><li>- Copy of Spouse's Death Record</li><li>- Copy of Spouse's Permanent Change of Station (PCS) Orders (for a military move or assignment)</li><li>- Copy of Divorce Records</li><li>- Copy of Applicable Court Records</li><li>- Copy of Bank Records (showing financial dependence on spouse, no separate individual income support, or no employment income earned)</li><li>- Needs Assessment</li><li>- Signed Individual Employment Plan</li></ul>
Performance/ Accountability	808	Migrant and Seasonal Farmworker Status	<b>Record 1</b> if the participant, at program entry, is a low-income individual (i) who for the 12 consecutive months out of the 24 months prior to application for the program involved, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment; and (ii) faces multiple barriers to economic self-sufficiency. <b>Record 2</b> if the participant, at program entry, is a seasonal farmworker and whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day. <b>Record 3</b> if the participant is a migrant farmworker or seasonal farmworker (as defined above) aged 14-24. <b>Record 4</b> if the participant is an adult program participant and a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above. <b>Record 5</b> if the participant is a youth program participant and a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- Self-Attestation</li><li>- Case Notes</li><li>- Cross-Match with Public Assistance Records</li><li>- NFJP Eligibility Documents used to determine low-income status</li><li>- Cross-Match with State MIS Database</li><li>- Cross-Match with H-1B Records</li><li>- Employer Contract/Letter</li><li>- Program Application</li></ul>
Performance/ Accountability	900	Date of Program Entry (WIOA)	<b>Record</b> the date on which an individual became a participant as referenced in 20 CFR 677.150 satisfying applicable programmatic requirements for the provision of services.  Leave blank if this data element does not apply.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Individual Plan for Employment</li><li>- Electronic Records</li><li>- Program intake documents, such as eligibility determination documentation or program enrollment forms</li></ul>
Performance/ Accountability (TAA)	901	Date of Program Exit (WIOA)	<b>Record</b> the last date the participant received services that are not self-service, information-only, or follow up services. Record this last date of receipt of services only if there are no future services, that are not self-service, information-only, or follow up services, planned from the program. For Titles I, II and III, record the last date of funded service(s). For Vocational Rehabilitation programs, record the date when the participant's record of service is closed pursuant to 34 CFR 361.43 or 361.56.  Leave blank if this data element does not apply to the participant	R	R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- A copy of the letter sent to the individual indicating that the case was closed</li><li>- WIOA status/exit forms</li><li>- Electronic Records</li><li>- Attendance records</li><li>- Review of service records identifying the last qualifying service (and lack of a planned gap)</li></ul>
TAA	902	Date of First Case Management and Employment Service	<b>Record</b> the date on which the participant begins receiving his or her first case management and employment service funded by a program following a determination of eligibility to participate in the program.					R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Case notes</li></ul>
Performance/ Accountability	906	Date of First WIOA Youth Service	<b>Record</b> the date on which the participant began receiving his or her first WIOA youth service (i.e., 1 of the 14 youth program elements in WIOA §129(c)(2)).  Leave blank if the participant did not receive services funded by the WIOA Youth program.				R		One of the following: <ul style="list-style-type: none"><li>- Electronic Records</li><li>- Case Notes</li><li>- Signed Individual Service Strategy</li><li>- Vendor Contract</li><li>- Attendance Record</li><li>- Sign-in Sheets</li><li>- Activity Sheets</li><li>- Cross-Match</li></ul>

DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability	907	Recipient of Incumbent Worker Training	<b>Record 1</b> if the participant received Incumbent Worker training services under WIOA section 134(a)(3)(A)(i) and/or 134(a)(2)(A)(i). <b>Record 2</b> if the participant received Incumbent Worker training services by Local Formula funds under WIOA section 134(d)(4). <b>Record 3</b> if the participant received Incumbent Worker training services under both Statewide funds (Governor’s Reserve and/or Rapid Response) WIOA section 134(a)(3)(A)(i) and/or 134(a)(2)(A)(i) and Local Formula funds under WIOA section 134(d)(4). <b>Record 4</b> if the participant received Incumbent Worker training services under H1B. <b>Record 5</b> if the participant received incumbent Worker training services under a National Dislocated Worker Grant (DWG) (WIOA section 170). <b>Record 6</b> if the participant received Incumbent Worker training services under a National Farmworker Job Program (NFJP) (WIOA section 167). <b>Record 0</b> if the participant did not receive services under the condition described above, or received services by a local area with statewide funds passed down from the state to the local area.	R	R	R			One of the following: - Signed IWT Contract - Cross-Match - Case Notes
Performance/ Accountability (TAA)	908	Rapid Response	<b>Record 1</b> if the participant participated in rapid response activities authorized at WIOA section 134(a)(2)(A)(i)(l). <b>Record 9</b> if grantee is unable to track enrollment in the program. <b>Record 0</b> if the participant did not receive services under the condition described above. Leave blank if this data element does not apply to the participant.	R		R		R	One of the following: - Cross-Match - Case Notes - Self-Attestation - Rapid Response List
TAA	915	TAA Petition Number	<b>Record</b> the petition number (and full alphabetical suffix, if applicable) of the certification which applies to the participant's group. If there is more than one petition number, create multiple records in the PIRL for each occurrence.  Leave blank if this data element does not apply to the participant.					R	One of the following: - Employer Worker List - Designation of Eligibility Form - Case Notes
Performance/ Accountability (TAA)	923	Other Reasons for Exit (WIOA)	<b>Record 1</b> if the participant exits the program because he or she has become incarcerated in a correctional institution or has become a resident of an institution or facility providing 24-hour support such as a hospital or treatment center during the course of receiving services as a participant. <b>Record 2</b> if the participant exits the program because of medical treatment and that treatment is expected to last longer than 90 days and precludes entry into unsubsidized employment or continued participation in the program. <b>Record 3</b> if the participant is deceased. <b>Record 4</b> if the participant exits the program because the participant is a member of the National Guard or other reserve military unit of the armed forces and is called to active duty for at least 90 days. <b>Record 5</b> if the participant is in the foster care system as defined in 45 CFR 1355.20(a), and exits the program because the participant has moved from the area as part of such a program or system (Youth participants only). <b>Record 6</b> if the participant, who was determined to be eligible, is later determined not to have met eligibility criteria. <b>NOTE:</b> This circumstance applies only to the VR program, in which participant eligibility is routinely revisited during the participation period. For titles I, II, and III program eligibility is determined at the time an individual becomes a participant. <b>Record 7</b> if the participant is a criminal offender in a correctional institution under section 225 of WIOA. <b>Record 0</b> if the participant meets none of the above conditions.	R	R	R	R	R	One of the following: - Information from partner services - WIOA or program status/exit forms - Electronic Records - Withdrawal form with explanation - Information from institution or facility - Case Notes
TAA	924	TAA Application Date	<b>Record</b> the date on which the individual first applied for Trade Act services or benefits under the applicable certification.					R	One of the following: - Electronic Records - Designation on Eligibility form - TAA Application Form - Cross-Match
TAA	925	Date of First TAA Benefit or Service	<b>Record</b> the date of the first Trade funded benefit or service received after the participant was determined eligible to participate.					R	One of the following: - Case Notes - Electronic Records - Cross-Match
Performance/ Accountability	1001	Date of First Basic Career Service (Staff-Assisted)	<b>Record</b> the first date the participant received any staff-assisted basic services (includes any career service under WIOA section 134(c)(2)(A)(i)-(xi) that is not provided via self-service or information-only services and activities)".  Leave blank if the participant did not receive a staff-assisted basic career service.	R	R	R			One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1002	Most Recent Date Received Basic Career Services (Self-Service/ Information-Only)	<b>Record</b> the most recent date a job seeker accessed self-services or information-only services or activities during the reporting period, either a physical location or remotely via the use of electronic technologies. Self-service does not uniformly apply to all virtually accessed services; i.e., virtual accessed services that provide a level of support above independent job or information seeking on the part of a reportable individual or participant would not qualify as self-service. Information-only activities or services may be either self-service or staff assisted.  Leave blank if the reportable individual or participant did not access a self- service or information-only basic career service.	R	R	R			One of the following: - Case Notes - Electronic Records - Cross-Match
Performance/ Accountability	1003	Most Recent Date Received Basic Career Services (Staff-Assisted)	<b>Record</b> the most recent date on which the participant received any basic career service (includes any career service under WIOA Section 134(c)(2)(A)(i)-(xi) that is not provided via self-service or information services and activities).  Leave blank if the participant did not receive a basic career service with significant staff involvement.	R	R	R			One of the following: - Case Notes - Electronic Records - Cross-Match
Performance/ Accountability	1004	Date of Most Recent Career Service (WIOA)	<b>Record</b> the date on which career services (both basic and individualized) were last received (excluding self-services, information services or activities, or follow- up services).  Leave blank if the participant did not receive career services.	R	R	R			One of the following: - Case Notes - Electronic Records - Cross-Match
Performance/ Accountability	1005	Most Recent Date Received Staff-Assisted Services (DVOP specialist)	<b>Record</b> the most recent date on which the participant received any career service provided by a DVOP specialist.  Leave blank if the participant did not receive a service with significant staff involvement or this data element does not apply to the participant.	R	R	R			One of the following: - Case Notes - Electronic Records - Cross-Match

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Performance/ Accountability	1006	Date Referred to Department of Veterans Affairs Vocational Rehabilitation and Employment Program	<b>Record</b> the most recent date on which the participant was referred to the Department of Veterans Affairs Vocational Rehabilitation and Employment Program.	R	R	R			One of the following: - Case Notes - Electronic Records - Cross-Match
Performance/ Accountability	1007	Date of Most Recent Reportable Individual Contact	<b>Record</b> the most recent date on which the job seeker had reportable individual level contact, including provision of identifying information or enrollment, with one or more applicable programs.	R	R	R			One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1102	Most Recent Date Received Staff-Assisted Career Guidance Services	<b>Record</b> the most recent date on which the participant received career guidance services with significant staff involvement. Career guidance services include the provision of information (Including information on local performance and eligible training providers), materials, suggestions, or advice intended to assist the job seeker in making occupation or career decisions.  Leave blank if the participant did not receive a career guidance service.	R					One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1104	Most Recent Date Received Staff-Assisted Job Search Activities	<b>Record</b> the most recent date that the participant was provided job search activities with significant staff involvement, and which are designed to help the participant plan and carry out a successful job-hunting strategy. The services include resume preparation assistance, job search workshops, job finding clubs, and development of a job search plan. "Resume Assistance" - Providing instructions on the content and format of resumes and cover letters and providing assistance in the development and production of the same. "Job Search Workshops" - An organized activity that provides instructions on resume writing, application preparation, interviewing skills, and/or job lead development. "Job Finding Clubs" - Have all the elements of a Job Search Workshop, plus a period of structured application where participants attempt to obtain jobs. "Job Search Planning" - Development of a plan (not necessarily a written plan) that includes the necessary steps and timetables to achieve employment in specific occupational, industry, or geographic area.  Leave blank if the participant did not receive a job search activity with significant staff involvement.  Additional Note: This definition excludes participants who receive workforce information services or attend a TAP employment workshop. Those services will be collected and reported separately.	R					One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1105	Most Recent Date Referred to Employment	<b>Indicate</b> the most recent date that the participant received a referral to employment which included significant staff involvement. A referral to employment is (a) the act of bringing to the attention of an employer a job seeker or group of registered job seekers who are available for a job and (b) the record of such a referral.  Leave blank if the participant did not receive a referral to employment.	R					One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1106	Most Recent Date Referred to Federal Training	<b>Record</b> the most recent date that the participant was referred to a training program supported by the Federal Government, such as WIOA-funded projects, TAA, Adult Education, Vocational Rehabilitation and Job Corps.  Leave blank if the participant did not receive a referral to federal training.	R					One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1112	Most Recent Date Received Unemployment Insurance (UI) Claim Assistance	<b>Indicate</b> the most recent date a job seeker was provided meaningful assistance in filing a UI claim.  Leave blank if the participant did not receive unemployment insurance claim assistance.	R					One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1113	Most Recent Date Referred to Other Federal/State Assistance	<b>Record</b> the most recent date a job seeker was referred to Other Federal/State Assistance. This may include Supplemental Nutrition Assistance Program (SNAP) benefits, Temporary Assistance for Needy Families (TANF), health insurance assistance, child support assistance, tax preparation support, and any other Federal or State assistance programs.  Leave blank if the participant was not referred to Other Federal/State assistance.	R					One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1200	Date of First Individualized Career Service	<b>Record</b> the first date the participant received any individualized career service on or after the date of participation. Individualized Career Services include development of an Individual Employment Plan, Pre-Vocational Services, provision of comprehensive skills and career assessments, internships or work experiences, financial literacy services, English as Second Language Services, or any other service that comprises a significant amount of staff time with an individual participant as described in WIOA sec. 134(c)(2)(xii).  Leave blank if the participant did not receive any individualized career service or this data element does not apply to the individual.	R	R	R			One of the following: - Case Notes - Cross-Match - Electronic Records
Performance/ Accountability	1201	Most Recent Date Received Individualized Career Service	<b>Record</b> the most recent date on which the participant received individualized career services as described in WIOA sec. 134(c)(2)(xii).	R	R	R			One of the following: - Case Notes - Electronic Records - Cross-Match
Performance/ Accountability (TAA)	1202	Date Individual Employment Plan Created	<b>Record</b> the date on which the participant's Individual Employment Plan (IEP) was created or otherwise established to identify the participant's employment goals, their appropriate achievement objectives, and the appropriate combination of services for the participant to achieve the employment goals.  Leave blank if an employment plan was not created for the participant, or if the individual is not a participant.	R	R	R		R	One of the following: - Cross-Match - Case Notes - Signed Individual Employment Plan or Individual Service Strategy - Electronic Records



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Performance/ Accountability	1205	Type of Work Experience	If the participant received work experience, record the appropriate code to indicate the type of work experience provided to the participant. <b>Record 1</b> if the participant participated in summer employment or an internship during the summer months (WIOA Youth). <b>Record 2</b> if the participant participated in an internship or employment opportunity during the non-summer months or if it extends beyond the summer months. <b>Record 3</b> if the participant participated in a pre-apprenticeship program. <b>Record 4</b> if the participant participated in job shadowing. <b>Record 5</b> if the participant participated in on-the-job training (WIOA Youth). <b>Record 6</b> if the participant participated in a transitional job, as defined in WIOA Section 134(d)(5). <b>Record 7</b> if the participant participated in another type of work experience not covered in 1 through 5. <b>NOTE:</b> Code Value 6 should only be selected when other work experience opportunities are provided that are not captured elsewhere. This code value is also for use with Adult, Dislocated Worker, and Dislocated Worker Grants programs only. <b>NOTE:</b> If employment opportunities not limited to summer months are part of a pre-apprenticeship program, or if on-the-job training for WIOA Youth is part of a pre-apprenticeship program, choose Code 3 for pre-apprenticeship. <b>Record 0</b> if the participant did not participate in a work experience. Leave blank if this data element does not apply to the participant.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Case Notes</li><li>- Signed Work Experience Agreement</li><li>- Electronic Records</li></ul>
Performance/ Accountability	1206	Date Received Financial Literacy Services	<b>Record</b> the date, at any time during participation in the program, that the participant received any financial literacy services. He or she may include services that help with creating budgets, initiate checking and savings accounts at banks, applying for and managing loans and credit cards, learning about credit reports and credit scores, and identifies identity theft.  Leave blank if this data element does not apply to the participant.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Activity sheets</li><li>- Sign-in sheets</li><li>- Attendance record</li><li>- Vendor contract</li><li>- Case Notes</li><li>- Electronic Records</li></ul>
Performance/ Accountability	1211	Transitional Jobs	<b>Record 1</b> if the participant received work experience at a transitional job as described in WIOA Section 134(d)(5). <b>Record 0</b> if the participant did not receive transitional jobs training as described above.		R	R			One of the following: <ul style="list-style-type: none"><li>- Electronic Records</li><li>- Case Notes</li><li>- Signed Transitional Job Agreement</li></ul>
Performance/ Accountability	1300	Received Training (WIOA)	<b>Record 1</b> if the participant received training services. <b>Record 0</b> if the participant did not receive training services.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-match</li><li>- Vendor/Training Provider Records</li><li>- Signed Training Contract</li><li>- Individual Training Account (ITA)</li><li>- Electronic Records</li></ul>
Performance/ Accountability	1301	Eligible Training Provider - Name - Training Service #1 (WIOA)	<b>Enter</b> the name of the eligible training provider where the participant received training.  Leave blank if this data element does apply to the participant.		R	R			One of the following: <ul style="list-style-type: none"><li>- Vendor Training Records</li><li>- Receipts</li><li>- Cross-Match</li><li>- Attendance Sheets or Records</li><li>- Signed Training Contract</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability (TAA)	1302	Date Entered Training #1 (WIOA)	<b>Record</b> the date on which the participant's first training service actually began.  Leave blank if the participant did not receive a first training service or this data element does not apply to the participant.		R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Individual Training Account (ITA)</li><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li></ul>
Performance/ Accountability (TAA)	1303	Type of Training Service #1 (WIOA)	Use the appropriate code to indicate the type of approved training being provided to the participant. <b>NOTE:</b> If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09. <b>NOTE:</b> Code 06 should only be utilized when other codes are clearly not appropriate. <b>Record 0</b> if the participant did not receive a training service. Leave blank if this data element does not apply to the participant.		R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Copy of enrollment record</li><li>- Case Notes</li><li>- Cross-match between dates of service and vendor training information</li><li>- Vendor training documentation</li><li>- Electronic Records</li><li>- Individual Training Account (ITA)</li><li>- Attendance records</li></ul>
Performance/ Accountability (TAA)	1306	Occupational Skills Training Code #1	<b>Enter</b> the 8-digit O*Net 4.0 (or later versions) code that best describes the training occupation for which the participant received training services. Leave blank if occupational code is not available or not known. Additional <b>NOTES:</b> If all 8 digits of the occupational skills code are not collected, record as many digits as are available. If the participant receives multiple training services, use the occupational skills training code for the most recent training.		R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Case notes</li><li>- Signed Individual Employment Plan or Training Plan</li><li>- Signed Training Contract</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability (TAA)	1307	Training Completed #1	<b>Record 1</b> if the participant completed approved training. <b>Record 0</b> if the participant did not complete training (withdrew). Leave blank if the participant did not receive a first training service or this data element does not apply to the participant.		R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Cross-match</li><li>- Vendor Training Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Electronic Records</li><li>- Individual Training Account (ITA)</li></ul>

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				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability (TAA)	1308	Date Completed, or Withdrew from, Training #1	<b>Record</b> the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the participant completed training.  Leave blank if the participant did not receive a first training service or this data element does not apply to the participant.		R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Cross-match</li><li>- Vendor Training Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Electronic Records</li></ul>
Performance/ Accountability	1309	Date Entered Training #2	<b>Record</b> the date on which the participant's second training service actually began.  Leave blank if the participant did not receive a second training service or this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1310	Type of Training Service #2 (WIOA)	If the participant received a second type of training, record the appropriate code to indicate the type of approved training being provided to the participant. <b>NOTE:</b> If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09. <b>NOTE:</b> Code 06 should only be instances when other codes are clearly not appropriate. <b>Record 0</b> if the participant did not receive a second training service. Leave blank if this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Copy of enrollment record</li><li>- Case Notes</li><li>- Cross-match between dates of service and vendor training information</li><li>- Vendor training documentation</li><li>- Electronic Records</li><li>- Individual Training Account (ITA)</li><li>- Attendance records</li></ul>
Performance/ Accountability	1311	Occupational Skills Training Code #2	<b>Enter</b> the 8-digit O*Net 4.0 (or later versions) code that best describes the training occupation for which the participant received training services. Leave blank if occupational code is not available or not known. Additional <b>NOTES:</b> If all 8 digits of the occupational skills code are not collected, record as many digits as are available. If the participant receives multiple training services, use the occupational skills training code for the most recent training.		R	R			One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Case notes</li><li>- Signed Individual Employment Plan or Training Plan</li><li>- Signed Training Contract</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1312	Training Completed #2	<b>Record 1</b> if the participant completed approved training. <b>Record 0</b> if the participant did not complete training (withdrew). Leave blank if the participant did not receive a second training service or this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1313	Date Completed, or Withdrew from, Training #2	<b>Record</b> the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the participant completed training.  Leave blank if the participant did not receive a second training service or this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1314	Date Entered Training #3	<b>Record</b> the date on which the participant's third training service actually began. If the participant received more than three training services, record the date on which the participant actually began the last (or most recent) training service.  Leave blank if the participant did not receive a third training service or this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1315	Type of Training Service #3 (WIOA)	If the participant received a third type of training, record the appropriate code to indicate the type of approved training being provided to the participant. <b>NOTE:</b> If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09. <b>NOTE:</b> Code 06 should only be utilized when other codes are clearly not appropriate. <b>Record 0</b> if the participant did not receive a third service. Leave blank if this data element does not apply to the participant. Additional <b>NOTE:</b> If the participant receives more than three training services, record the last (or most recent) training services received by the participant in this field.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Copy of enrollment record</li><li>- Case Notes</li><li>- Cross-match between dates of service and vendor training information</li><li>- Vendor training documentation</li><li>- Electronic Records</li><li>- Individual Training Account (ITA)</li><li>- Attendance records</li></ul>
Performance/ Accountability	1316	Occupational Skills Training Code #3	<b>Enter</b> the 8-digit O*Net 4.0 (or later versions) code that best describes the training occupation for which the participant received training services. Leave blank if occupational code is not available or not known or if this data element does not apply to the participant. Additional <b>NOTES:</b> If all 8 digits of the occupational skills code are not collected, record as many digits as are available. If the participant receives multiple training services, use the occupational skills training code for the most recent training.		R	R			One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Case notes</li><li>- Signed Individual Employment Plan or Training Plan</li><li>- Signed Training Contract</li><li>- Individual Training Account (ITA)</li></ul>



DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability	1317	Training Completed #3	<b>Record 1</b> if the participant completed approved training. <b>Record 0</b> if the participant did not complete training (withdrew). Leave blank if the participant did not receive a third training service or this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1318	Date Completed, or Withdrew from, Training #3	<b>Record</b> the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the participant completed training.  Leave blank if the participant did not receive a third training service or this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Vendor Training Records</li><li>- Electronic Records</li><li>- Attendance Sheets or Records</li><li>- Case Notes</li><li>- Individual Training Account (ITA)</li></ul>
Performance/ Accountability	1319	Established Individual Training Account (ITA)	<b>Record 1</b> if any of the individual's services were purchased utilizing an Individual Training Account funded by WIOA Title I. This information can be updated anytime during participation. <b>Record 0</b> if the individual does not meet the condition described above. Leave blank if this data element does not apply to the participant.		R	R			One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Case notes</li><li>- Individual Training Account (ITA) Approval, Allocation or Activation Records</li></ul>
TAA	1321	Waiver from Training Requirement	Use the appropriate code to indicate the reason for which a waiver from the training requirements was issued to the participant. <b>Record 0</b> if the participant did not receive a training waiver. Leave blank if this data element does not apply to the participant.					R	One of the following: <ul style="list-style-type: none"><li>- Waiver Documentation in Case File (that includes initial approval and renewals at 30-day intervals)</li><li>- Cross-Match with State UI Records of TRA Checks</li><li>- Verification Form from UI or Employment Counselor</li></ul>
TAA	1322	Date of Most Recent Case Management and Reemployment Service	<b>Record</b> the date on which the participant received his or her most recent Case Management and Reemployment Service.  Leave blank if this does not apply to the participant.					R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Case notes</li></ul>
TAA	1323	Date Waiver From Training Requirement Issued	<b>Record</b> the date on which the participant received his or her most recent waiver from training.  Leave blank if this does not apply to the participant.					R	One of the following: <ul style="list-style-type: none"><li>- Waiver Documentation in Case File</li><li>- Cross-Match with State UI Database</li><li>- Verification Form from UI or Employment Counselor</li></ul>
Performance/ Accountability	1332	Participated in Postsecondary Education During Program Participation (WIOA)	<b>Record 1</b> if the participant was in a postsecondary education program that leads to a credential or degree from an accredited postsecondary education institution at any point during program participation <b>NOTE:</b> This data element relates to the credential indicator denominator and those who are recorded as <b>1</b> are included in the credential rate denominator. This element is a subset of PIRL 1811. Do not record <b>1</b> if the participant was first enrolled in postsecondary education after exiting the program. <b>Record 0</b> if the participant was not a postsecondary education program that leads to a credential or degree from an accredited postsecondary education institution during program participation. Leave blank if this does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Data match with postsecondary data system</li><li>- Copy of enrollment record</li><li>- Case Notes</li><li>- School records or verification of enrollment</li><li>- Transcript or report card</li></ul>
Performance/ Accountability	1401	Enrolled in Secondary Education Program (WIOA)	<b>Record 1</b> if the participant was enrolled in a Secondary Education Program at or above the 9th Grade level. A Secondary Education program includes both secondary school and enrollment in a program of study with instruction designed to lead to a high school equivalent credential. Examples may include adult high school credit programs and programs designed to prepare participants to pass recognized high school equivalency exams such as the GED, HiSET, or TASC. Programs of study designed to teach English proficiency skills or literacy skills below the 9th grade equivalent are not considered Secondary Education Programs. States may use this coding value if the participant was either already enrolled in education or training at the time of application to the program OR became enrolled in an education or training program at or above the 9th Grade level at any point while participating in the program. <b>Record 0</b> if the participant was not enrolled in a secondary education program at or above the 9th grade level.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Copy of enrollment record</li><li>- Case Notes</li><li>- School records or verification of enrollment</li><li>- Transcript or report card</li><li>- Data match to State K-12 data system</li></ul>
Performance/ Accountability	1402	Most Recent Date Received Educational Achievement Services	<b>Record</b> the most recent date on which the participant received an educational achievement service. Educational achievement services include, but are not limited to, tutoring, study skills training, instruction, and evidence-based dropout prevention and recovery strategies that lead to completion of the requirements for a secondary school diploma or its recognized equivalent (including a recognized certificate of attendance or similar document for individuals with disabilities) or for a recognized postsecondary credential.  Leave blank if the participant did not receive educational achievement services or this data element does not apply to the individual.				R		One of the following: <ul style="list-style-type: none"><li>- Activity Sheets</li><li>- Sign-in Sheets</li><li>- Attendance Records</li><li>- Vendor Contract</li><li>- Electronic Records</li><li>- Case Notes</li><li>- Cross-Match</li></ul>
Performance/ Accountability	1403	Most Recent Date Received Alternative Secondary School Services	<b>Record</b> the most recent date on which the participant received alternative secondary school services, or dropout recovery services, as appropriate.  Leave blank if the participant did not receive alternative secondary school services or dropout recovery services.				R		One of the following: <ul style="list-style-type: none"><li>- Activity Sheets</li><li>- Sign-in Sheets</li><li>- Attendance Records</li><li>- Vendor Contract</li><li>- Electronic Records</li><li>- Case Notes</li><li>- Cross-Match</li></ul>

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Performance/ Accountability	1405	Most Recent Date Received Work Experience Opportunities	<b>Record</b> the most recent date on which the youth participant received work experience opportunities that have as a component academic and occupational education. Work experiences are a planned, structured learning experience that takes place in a workplace for a limited period of time. Work experiences include: summer employment opportunities and other employment opportunities available throughout the school year; pre-apprenticeship programs; internships and job shadowing; and on-the-job training opportunities.  Leave blank if the participant did not receive work experience opportunities or this data element does not apply to the participant.				R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match
Performance/ Accountability	1406	Date Enrolled in Post Exit Education or Training Program Leading to a Recognized Postsecondary Credential (WIOA)	<b>Record</b> the date the participant is enrolled in an education or training program that leads to a recognized postsecondary credential after program exit.  Leave blank if this data element does not apply to the participant.  <b>NOTE:</b> This element only applies to participants who exited secondary education and obtained a secondary school diploma or its equivalency per Sec 116(b)(2)(A)(iii). This data element applies to the Credential Rate indicator.		R	R	R		One of the following: - Case Notes - School records or verification of enrollment - Transcript or report card. - Cross-Match - Follow-up survey from program participants
Performance/ Accountability	1407	Most Recent Date Received Education Offered Concurrently with Workforce Preparation	<b>Record</b> the most recent date on which the participant received education offered concurrently with and in the same context as workforce preparation activities and training for a specific occupation or occupational cluster.  Leave blank if the participant did not receive education offered concurrently with workforce preparation.				R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match
Performance/ Accountability	1408	Most Recent Date Received Leadership Development Opportunities	<b>Record</b> the most recent date on which the participant received services that include, but are not limited to, opportunities that may include community service and peer-centered activities encouraging responsibility and other positive social and civic behaviors, as appropriate.  Leave blank if the participant did not receive a leadership development service or this data element does not apply to the participant.				R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match
Performance/ Accountability	1409	Most Recent Date Received Supportive Services	<b>Record</b> the most recent date on which the participant received a supportive service (WIOA section 134(d)(2)) which include, but are not limited to, assistance with transportation, child care, dependent care, and housing that are necessary to enable the participant to participate in programs which provide career and training services as defined in WIOA sec. 134(c)(2) and 134(c)(3). Support services for youth participants include; (a) linkages to community services; (b) assistance with transportation; (c) assistance with child care and dependent care; (d) assistance with housing; (e) needs-related payments; (f) assistance with educational testing; (g) reasonable accommodations for youth with disabilities; (h) referrals to healthcare; (i) assistance with uniforms or other appropriate work attire and work-related tools, including such items as eye glasses and protective eye gear; (j) assistance with books, fees, school supplies, and other necessary items for students enrolled in postsecondary education classes; and (k) payments and fees for employment and training-related applications, tests, and certifications.  Leave blank if the participant did not receive supportive services or this data element does not apply to the participant.		R	R	R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match
Performance/ Accountability	1410	Most Recent Date Received Adult Mentoring Services	<b>Record</b> the most recent date on which the participant received adult mentoring services. Adult mentoring services may last for at least 12 (twelve) months and may occur both during and after program participation.  Leave blank if the participant did not receive adult mentoring services or this data element does not apply to the participant.				R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match
Performance/ Accountability	1411	Most Recent Date Received Comprehensive Guidance/ Counseling Services	<b>Record</b> the most recent date on which the participant received comprehensive guidance and counseling services, which may include drug and alcohol abuse counseling.  Leave blank if the participant did not receive comprehensive guidance and counseling services or this data element does not apply to the participant.				R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match
Performance/ Accountability	1412	Most Recent Date Received Youth Follow-up Services	<b>Record</b> the most recent date on which the youth participant received follow-up services after exiting the program. Follow-up services for youth participants are described as: <b>(a)</b> Follow-up services are critical services provided following a youth's exit from the program to help ensure the youth is successful in employment and/or postsecondary education and training. Follow-up services may include regular contact with a youth participant's employer, including assistance in addressing work-related problems that arise. <b>(b)</b> Follow-up services for youth may also include the following program elements: (1) Supportive services; (2) Adult mentoring; (3) Financial literacy education; (4) Services that provide labor market and employment information about in-demand industry sectors or occupations available in the local area, such as career awareness, career counseling, and career exploration services; and (5) Activities that help youth prepare for and transition to postsecondary education and training. <b>(c)</b> All youth participants must be offered the opportunity to receive follow-up services that align with their Individual Service Strategies. Furthermore, follow-up services must be provided to all participants for a minimum of 12 (twelve) months unless the participant declines to receive follow-up services or the participant cannot be located or contacted.  Leave blank if the participant did not receive follow-up services or if this data element does not apply to the participant.				R		One of the following: - Activity Sheets - Sign-in Sheets - Attendance Records - Vendor Contract - Electronic Records - Case Notes - Cross-Match

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Performance/ Accountability	1413	Most Recent Date Youth Received Entrepreneurial Skills Training	<b>Record</b> the most recent date on which the participant participated in entrepreneurial skills training. Leave blank if the participant did not participate in entrepreneurial skills training.				R		One of the following: <ul style="list-style-type: none"><li>- Activity Sheets</li><li>- Sign-in Sheets</li><li>- Attendance Records</li><li>- Vendor Contract</li><li>- Electronic Records</li><li>- Case Notes</li><li>- Cross-Match</li></ul>
Performance/ Accountability	1414	Most Recent Date Youth Received Services that provide Labor Market Information and Employment Information	<b>Record</b> the most recent date on which the participant participated in services that provide labor market and employment information about in-demand industry sectors or occupations available in the local area, such as career awareness, career counseling, and career exploration services. Leave blank if the participant did not participate in these services.				R		One of the following: <ul style="list-style-type: none"><li>- Activity Sheets</li><li>- Sign-in Sheets</li><li>- Attendance Records</li><li>- Vendor Contract</li><li>- Electronic Records</li><li>- Case Notes</li><li>- Cross-Match</li></ul>
Performance/ Accountability	1415	Most Recent Date Youth Received Postsecondary Transition and Preparatory Activities	<b>Record</b> the most recent date on which a youth participant received activities that helped them to prepare for and transition to postsecondary education and training. Leave blank if the participant did not participate in activities that helped them to prepare for and transition to postsecondary education and training.				R		One of the following: <ul style="list-style-type: none"><li>- Activity Sheets</li><li>- Sign-in Sheets</li><li>- Attendance Records</li><li>- Vendor Contract</li><li>- Electronic Records</li><li>- Case Notes</li><li>- Cross-Match</li></ul>
Performance/ Accountability	1500	Received Needs-Related Payments	<b>Record 1</b> if the participant received needs-related payments (WIOA section 134(d)(3)) for the purpose of enabling the participant to participate in approved training funded under WIOA Title IB. <b>Record 0</b> if the participant did not receive any needs-related payments as described above. Leave blank if this data element does not apply to the participant.		R	R			One of the following: <ul style="list-style-type: none"><li>- Activity Sheets</li><li>- Sign-in Sheets</li><li>- Attendance Records</li><li>- Vendor Contract</li><li>- Electronic Records</li><li>- Case Notes</li><li>- Cross-Match</li></ul>
TAA	1511	Date Received First Basic TRA Payment	<b>Record</b> the date on which the participant received their first Basic TRA payment. Leave blank if the participant did not receive a Basic TRA Payment, or if the individual is not a TAA participant.					R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Request for allowance</li><li>- Electronic Records</li></ul>
TAA	1526	Date Received First Completion TRA Payment	<b>Record</b> the date on which the participant received his/her first Completion TRA payment. Leave blank if the participant did not receive a Remedial/Prerequisite TRA Payment, or if the individual is not a TAA participant.					R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Request for allowance</li><li>- Electronic Records</li></ul>
TAA	1534	Date Received First A/RTAA Payment	<b>Record</b> the date on which the participant received his or her first Alternative/Reemployment Trade Adjustment Assistance (A/RTAA) payment. Leave blank if the individual is not a TAA participant.					R	One of the following: <ul style="list-style-type: none"><li>- Cross-match</li><li>- Request for Allowance</li><li>- Electronic Records</li></ul>
TAA	1535	Number of A/RTAA Payments Current Quarter	<b>Record</b> the number of A/RTAA payments paid to the participant in the current report quarter. "0" if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant.					R	One of the following: <ul style="list-style-type: none"><li>- Cross-match</li><li>- Request for Allowance</li><li>- Electronic Records</li></ul>
IT	1600	Employed in 1st Quarter After Exit Quarter (WIOA)	<b>Record 1</b> if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). <b>Record 2</b> if the participant is in a Registered Apprenticeship. <b>Record 3</b> if the participant is in the military. <b>Record 9</b> if the participant has exited but employment information is not yet available. <b>Record 0</b> if the participant was not employed in the first quarter after the quarter of exit.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- UI wage data match/administrative wage match, such as the National Directory of New Hires</li><li>- Follow-up survey from program participants</li><li>- Pay check stubs, tax records, W2 form</li><li>- Quarterly tax payment forms, such as an IRS form 941</li><li>- Document from employer on company letterhead attesting to an individual's employment status and earnings</li><li>- Self-employment worksheets signed and attested to by program participants</li><li>- Detailed case notes verified by employer and signed by the counselor</li></ul>



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				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
IT	1601	Type of Employment Match 1st Quarter After Exit Quarter (WIOA)	Use the appropriate code to identify the method used in determining the participant's employment status in the first quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the first quarter after the exit quarter. If the participant is not found in wage records, grant recipients may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. <b>Record 0</b> if the participant was not employed in the first quarter after the quarter of exit.	R	R	R	R		One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1602	Employed in 2nd Quarter After Exit Quarter (WIOA)	<b>Record 1</b> if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). <b>Record 2</b> if the participant is in a Registered Apprenticeship. <b>Record 3</b> if the participant is in the military. <b>Record 9</b> if the participant has exited but employment information is not yet available. <b>Record 0</b> if the participant was not employed in the second quarter after the quarter of exit.	R	R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- UI wage data match/administrative wage match, such as the National Directory of New Hires</li><li>- Follow-up survey from program participants</li><li>- Pay check stubs, tax records, W2 form</li><li>- Quarterly tax payment forms, such as an IRS form 941</li><li>- Document from employer on company letterhead attesting to an individual’s employment status and earnings</li><li>- Self-employment worksheets signed and attested to by program participants</li><li>- Detailed case notes verified by employer and signed by the counselor</li></ul>
IT	1603	Type of Employment Match 2nd Quarter After Exit Quarter (WIOA)	Use the appropriate code to identify the method used in determining the participant's employment status in the second quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the second quarter after the exit quarter. If the participant is not found in wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. <b>Record 0</b> if the participant was not employed in the second quarter after the quarter of exit.	R	R	R	R		One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1604	Employed in 3rd Quarter After Exit Quarter (WIOA)	<b>Record 1</b> if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). <b>Record 2</b> if the participant is in a Registered Apprenticeship. <b>Record 3</b> if the participant is in the military. <b>Record 9</b> if the participant has exited but employment information is not yet available. <b>Record 0</b> if the participant was not employed in the third quarter after the quarter of exit.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- UI wage data match/administrative wage match, such as the National Directory of New Hires</li><li>- Follow-up survey from program participants</li><li>- Pay check stubs, tax records, W2 form</li><li>- Quarterly tax payment forms, such as an IRS form 941</li><li>- Document from employer on company letterhead attesting to an individual’s employment status and earnings</li><li>- Self-employment worksheets signed and attested to by program participants</li><li>- Detailed case notes verified by employer and signed by the counselor</li></ul>
IT	1605	Type of Employment Match 3rd Quarter After Exit Quarter (WIOA)	Use the appropriate code to identify the method used in determining the participant's employment status in the third quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the third quarter after the exit quarter. If the participant is not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. <b>Record 0</b> if the participant was not employed in the third quarter after the quarter of exit.	R	R	R	R		One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1606	Employed in 4th Quarter After Exit Quarter (WIOA)	<b>Record 1</b> if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). <b>Record 2</b> if the participant is in a Registered Apprenticeship. <b>Record 3</b> if the participant is in the military. <b>Record 9</b> if the participant has exited but employment information is not yet available. <b>Record 0</b> if the participant was not employed in the fourth quarter after the quarter of exit.	R	R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- UI wage data match/administrative wage match, such as the National Directory of New Hires</li><li>- Follow-up survey from program participants</li><li>- Pay check stubs, tax records, W2 form</li><li>- Quarterly tax payment forms, such as an IRS form 941</li><li>- Document from employer on company letterhead attesting to an individual’s employment status and earnings</li><li>- Self-employment worksheets signed and attested to by program participants</li><li>- Detailed case notes verified by employer and signed by the counselor</li></ul>

DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
IT	1607	Type of Employment Match 4th Quarter After Exit Quarter (WIOA)	Use the appropriate code to identify the method used in determining the participant's employment status in the fourth quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the fourth quarter after the exit quarter. If the participant is not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. <b>Record 0</b> if the participant was not employed in the fourth quarter after the quarter of exit.	R	R	R	R		One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual's employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1608	Employment Related to Training (2nd Quarter After Exit) (WIOA)	<b>Record 1</b> if the participant received training services and obtained employment directed related to the training services received. <b>Record 0</b> if the participant received training services and did not obtain employment directly related to the training services received. Leave blank if the data is not available.	R	R	R	R		One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases,</li><li>- Other out of state federal wage record systems,</li><li>- Case notes</li></ul>
IT	1610	Occupational Code (if available)	<b>Record</b> the 8-digit occupational code that best describes the participant's employment using the O*Net Version 4.0 (or later versions) classification system. This information can be based on any job held after exit from the program. Leave blank if occupational code is not available or not known, or the data element does not apply. Additional <b>NOTES</b> : This information can be based on any job held after exit and only applies to adults, dislocated workers, and youth who entered employment in the quarter after the exit quarter. If all 8 digits of the occupational skills code are not collected, record as many digits as are available. If the individual had multiple jobs, use the occupational code for the most recent job held.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>
IT	1611	Entered Non-Traditional Employment	<b>Record 1</b> if the participant's employment is 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. Non-traditional employment can be based on either local or national data, and both males and females can be in non-traditional employment. This information can be based on any job held after exit and only applies to adults, dislocated workers, and youth who entered employment in the second quarter after the exit quarter. <b>Record 9</b> if not known. <b>Record 0</b> if the participant does not meet the condition described above.		R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>
IT	1612	Occupational Code of Employment 2nd Quarter After Exit Quarter (If available)	<b>Record</b> the 8-digit occupational code that best describes the participant's employment using the O*Net Version 4.0 (or later versions) classification system.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>
IT	1613	Occupational Code of Employment 4th Quarter After Exit Quarter (If available)	<b>Record</b> the 8-digit occupational code that best describes the participant's employment using the O*Net Version 4.0 (or later versions) classification system.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems,</li><li>- Case notes</li></ul>
IT	1614	Industry Code of Employment 1st Quarter After Exit Quarter	<b>Record</b> the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if wages 1st quarter after the exit quarter exist and NAICS Code is not known.  Leave blank if this data element does not apply to the person or wages are not yet available.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>
IT	1615	Industry Code of Employment 2nd Quarter After Exit Quarter	<b>Record</b> the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if wages 2nd quarter after the exit quarter exist and NAICS Code is not known.  Leave blank if this data element does not apply to the person or wages are not yet available.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>

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IT	1616	Industry Code of Employment 3rd Quarter After Exit Quarter	<b>Record</b> the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if wages 3rd quarter after the exit quarter exist and NAICS Code is not known.  Leave blank if this data element does not apply to the person or wages are not yet available	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>
IT	1617	Industry Code of Employment 4th Quarter After Exit Quarter	<b>Record</b> the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if wages 4th quarter after the exit quarter exist and NAICS Code is not known.  Leave blank if this data element does not apply to the person or wages are not yet available.	R	R	R			One of the following: <ul style="list-style-type: none"><li>- UI Wage Records</li><li>- Supplemental data sources defined by TEGL 26-16 follow up services</li><li>- Surveys</li><li>- Record sharing and/or automated record matching with other employment and administrative databases</li><li>- Other out of state federal wage record systems</li><li>- Case notes</li></ul>
IT	1618	Retention with the Same Employer in the 2nd Quarter and the 4th Quarter (WIOA)	<b>Record 1</b> if the participant’s employer in the second quarter also matches the employer in the fourth quarter. <b>Record 0</b> if the participant is not employed in the second or fourth quarters after exit, or the employer in the second quarter does not match the employer in the fourth quarter.	R	R	R	R		One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1700	Earnings 3rd Quarter Prior to Participation Quarter	<b>Record</b> total earnings from wage records for the third quarter prior to the quarter of participation.  Leave blank if data element does not apply to the participant.	R	R	R			One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1701	Earnings 2nd Quarter Prior to Participation Quarter	<b>Record</b> total earnings from wage records for the second quarter prior to the quarter of participation.  Leave blank if data element does not apply to the participant.	R	R	R			One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1702	Earnings 1st Quarter Prior to Participation Quarter	<b>Record</b> total earnings from wage records for the first quarter prior to the quarter of participation.  Leave blank if data element does not apply to the participant.	R	R	R		R	One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>



DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
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IT	1703	Earnings 1st Quarter After Exit Quarter (WIOA)	<b>Record</b> total earnings for the first quarter after the quarter of exit. <b>Record</b> 999999.99 if data is are not yet available for this item. Leave blank if data element does not apply to the participant.	R	R	R			One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1704	Earnings 2nd Quarter After Exit Quarter (WIOA)	<b>Record</b> total earnings for the second quarter after the quarter of exit. <b>Record</b> 999999.99 if data is not yet available for this item. Leave blank if data element does not apply to the participant.	R	R	R	R	R	One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1705	Earnings 3rd Quarter After Exit Quarter (WIOA)	<b>Record</b> total earnings for the third quarter after the quarter of exit. <b>Record</b> 999999.99 if data is not yet available for this item. Leave blank if data element does not apply to the participant	R	R	R			One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
IT	1706	Earnings 4th Quarter After Exit Quarter (WIOA)	<b>Record</b> total earnings for the fourth quarter after the quarter of exit. <b>Record</b> 999999.99 if data is not yet available for this item. Leave blank if data element does not apply to the participant.	R	R	R			One of the following (consistent with TEGL 26-16): <ul style="list-style-type: none"><li>- Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate)</li><li>- Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service)</li><li>- Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires)</li><li>- State New Hires Registry</li><li>- Signed Follow-up Survey Response from Program Participants</li><li>- Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)</li><li>- Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation</li><li>- Railroad Retirement System</li><li>- Quarterly Tax Payment Forms (such as IRS Form 941)</li><li>- A Signed Letter from an Employer on Company Letterhead (attesting to an individual’s employment status and earnings)</li><li>- Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants</li><li>- Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)</li></ul>
Performance/ Accountability (TAA)	1800	Type of Recognized Credential (WIOA)	Use the appropriate code to record the type of recognized diploma, degree, or a credential consisting of an industry-recognized certificate or certification, a certificate of completion of a Registered Apprenticeship, a license recognized by the State involved or Federal Government, or an associate or baccalaureate degree attained by the participant who received education or training services. <b>Record 0</b> if the participant received education or training services, but did not attain a recognized diploma, degree, license or certificate. Leave blank if data element does not apply to the participant. <b>NOTE:</b> Diplomas, degrees, licenses, or certificates must be attained either during participation or within one year of exit. This data element applies to both the Credential Rate indicator and the Measurable Skills Gain indicator for all programs.	R	R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of credential</li><li>- Copy of school record</li><li>- Signed Follow-up Survey Response from Program Participant</li><li>- Case notes documenting information obtained from education or training provider</li></ul>

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				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability (TAA)	1801	Date Attained Recognized Credential (WIOA)	<b>Record</b> the date on which the participant attained a recognized credential.  Leave blank if the participant did not attain a degree or certificate.	R	R	R	R	R	One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of credential</li><li>- Copy of school record</li><li>- Signed Follow-up Survey Response from Program Participant</li><li>- Case notes documenting information obtained from education or training provider</li></ul>
Performance/ Accountability	1802	Type of Recognized Credential #2 (WIOA)	Use the appropriate code to record the type of recognized diploma, degree, or a credential consisting of an industry-recognized certificate or certification, a certificate of completion of a Registered Apprenticeship, a license recognized by the State involved or Federal Government, or an associate or baccalaureate degree attained by the participant who received education or training services. <b>Record 0</b> if the participant received education or training services, but did not attain a recognized diploma, degree, license, or certificate. Leave blank if data element does not apply to the participant. <b>NOTE:</b> Diplomas, degrees, licenses, or certificates must be attained either during participation or within one year of exit. This data element applies to both the Credential Rate indicator and the Measurable Skills Gain indicator for all DOL programs.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of Credential</li><li>- Copy of School Records</li><li>- Signed Follow-up Survey Response from Program Participant</li><li>- Case Notes documenting information obtained from education or training provider</li></ul>
Performance/ Accountability	1803	Date Attained Recognized Credential #2 (WIOA)	<b>Record</b> the date on which the participant attained a second recognized credential.  Leave blank if the participant did not attain a second recognized credential, or if this data element does not apply.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of Credential</li><li>- Copy of School Records</li><li>- Signed Follow-up Survey Response from Program Participant</li><li>- Case Notes documenting information obtained from education or training provider</li></ul>
Performance/ Accountability	1804	Type of Recognized Credential #3 (WIOA)	Use the appropriate code to record the type of recognized diploma, degree, or a credential consisting of an industry-recognized certificate or certification, a certificate of completion of a Registered Apprenticeship, a license recognized by the State involved or Federal Government, or an associate or baccalaureate degree attained by the participant who received education or training services. <b>Record 0</b> if the participant received education or training services but did not attain a recognized diploma, degree, license, or certificate. Leave blank if data element does not apply to the participant. <b>NOTE:</b> Diplomas, degrees, licenses, or certificates must be attained either during participation or within one year of exit. This data element applies to both the Credential Rate indicator and the Measurable Skills Gain indicator for all DOL programs.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of Credential</li><li>- Copy of School Records</li><li>- Signed Follow-up Survey Response from Program Participant</li><li>- Case Notes documenting information obtained from education or training provider</li></ul>
Performance/ Accountability	1805	Date Attained Recognized Credential #3 (WIOA)	<b>Record</b> the date on which the participant attained a third recognized credential.  Leave blank if the participant did not attain a third recognized credential, or if this data element does not apply.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of Credential</li><li>- Copy of School Records</li><li>- Signed Follow-up Survey Response from Program Participant</li><li>- Case Notes documenting information obtained from education or training provider</li></ul>
Performance/ Accountability	1806	Date of Most Recent Measurable Skill Gains: Educational Functioning Level (EFL) (WIOA)	<b>Record</b> the most recent date the participant who received instruction below the postsecondary education level achieved at least one EFL. EFL gain may be documented in one of three ways: 1) by comparing a participant's initial EFL as measured by a pre-test with the participant's EFL as measured by a participant's post-test; or 2) for States that offer secondary school programs that lead to a secondary school diploma or its recognized equivalent, an EFL gain may be measured through the awarding of credits or Carnegie units; or 3) States may report an EFL gain for participants who exit the program and enroll in postsecondary education or training during the program year. Leave blank if this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Pre- and post-test results measuring EFL gain</li><li>- Adult High School transcript showing EFL gain through the awarding of credits or Carnegie units</li><li>- Postsecondary education or training enrollment determined through data match, survey documentation, or program notes</li></ul>
Performance/ Accountability	1807	Date of Most Recent Measurable Skill Gains: Postsecondary Transcript/Report Card (WIOA)	<b>Record</b> the most recent date of the participant's transcript or report card for postsecondary education who complete a minimum of 12 hours per semester, or for part-time students a total of at least 12 credit hours over the course of two completed semesters during the same 12-month period, that shows a participant is meeting the State unit's academic standards.  Leave blank if this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Transcript</li><li>- Report Card</li></ul>
Performance/ Accountability	1808	Date of Most Recent Measurable Skill Gains: Secondary Transcript/Report Card (WIOA)	<b>Record</b> the most recent date of the participant's transcript or report card for secondary education for one semester showing that the participant is meeting the State unit's academic standards.  Leave blank if this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Transcript</li><li>- Report Card</li></ul>
Performance/ Accountability	1809	Date of Most Recent Measurable Skill Gains: Training Milestone (WIOA)	<b>Record</b> the most recent date that the participant had a satisfactory or better progress report towards established milestones from an employer/training provider who is providing training (e.g., completion of on-the-job training (OJT), completion of one year of a registered apprenticeship program, etc.).  Leave blank if this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Documentation of a skill gained through OJT or Registered Apprenticeship</li><li>- Contract and/or evaluation from employer or training provider documenting a skill gain</li><li>- Progress report from employer documenting a skill gain</li></ul>
Performance/ Accountability	1810	Date of Most Recent Measurable Skill Gains: Skills Progression (WIOA)	<b>Record</b> the most recent date the participant successfully completed an exam that is required for a particular occupation or progress in attaining technical or occupational skills as evidenced by trade-related benchmarks such as knowledge-based exams.  Leave blank if this data element does not apply to the participant.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Results of knowledge-based exam or certification of completion</li><li>- Documentation demonstrating progress in attaining technical or occupational skills through an exam or benchmark attainment</li><li>- Documentation from training provider or employer</li><li>- Copy of a credential that is required for a particular occupation and only is earned after the passage of an exam</li></ul>



DWS Oversight Unit	Data Element Number	Data Element Name	Participant Individual Record Layout (PIRL) Elements	Required Elements by Program (R = Required)					WIOA Source Documentation
				Wagner-Peyser	WIOA Adult	WIOA DW	WIOA Youth	TAA	
Performance/ Accountability	1811	Date Enrolled During Program Participation in an Education or Training Program Leading to a Recognized Postsecondary Credential or Employment (WIOA)	<b>Record</b> the date the participant was enrolled during program participation in an education or training program that leads to a recognized postsecondary credential, including a secondary education program, or training program that leads to employment as defined by the core program in which the participant participates. States may use this coding value if the participant was either already enrolled in education or training at the time of program entry or became enrolled in education or training at any point while participating in the program. If the participant was enrolled in postsecondary education at program entry, the date in this field should be the date of Program Entry. This includes, but is not limited to, participation in Job Corps or YouthBuild or Adult Education or secondary education programs. Leave blank if the data element does not apply to the participant. <b>NOTE:</b> This data element applies to the Measurable Skill Gains Indicator, and specifically will be utilized to calculate the denominator. It encompasses all education and training program enrollment.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Case Notes</li><li>- School records or verification of enrollment</li><li>- Transcript or report card</li><li>- Cross-Match</li></ul>
Performance/ Accountability	1813	Date Completed, During Program Participation, an Education or Training Program Leading to a Recognized Postsecondary Credential, or Employment (WIOA)	<b>Record</b> the date the participant complete, during program participation, an education or training program that leads to a recognized postsecondary credential, including a secondary education program, or training program that leads to employment as defined by the core program in which the participant participates. States may use this coding value if the participant was either already enrolled in education or training at the time of program entry or became enrolled in education or training at any point while participating in the program. If the participant was enrolled in postsecondary education at program entry, the date in this field should be after the date of Program Entry. This includes, but is not limited to, participation in Job Corps, Youth build, a Registered Apprenticeship program, Adult Education or secondary education programs. Leave blank if the data element does not apply to the participant. <b>NOTE:</b> This data element applies to the Measurable Skill Gains Indicator, and specifically will be utilized to calculate the denominator. It encompasses all education and training program enrollment.		R	R	R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of Diploma, Credential or Degree Awarded by Education Institution</li><li>- Applicable Records from Education Institution (GED certificate, transcripts, report card, enrollment record, or other school documentation)</li><li>- Signed File Documentation with Information Obtained from Education or Training Provider</li><li>- Case Notes</li><li>- Self-Attestation</li></ul>
Performance/ Accountability	1900	Youth 2nd Quarter Placement (Title I) (WIOA)	<b>Record 1</b> if the participant is enrolled in occupational skills training (including advanced training). <b>Record 2</b> if the participant is enrolled in postsecondary education. <b>Record 3</b> if the participant is enrolled in secondary education. <b>Record 0</b> if the participant was not placed in any of the above conditions.				R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of registration record</li><li>- Case Notes</li><li>- School records or verification of enrollment</li><li>- Transcript or report card</li><li>- Vendor/training provider training documentation</li></ul>
Performance/ Accountability	1901	Youth 4th Quarter Placement (Title I) (WIOA)	<b>Record 1</b> if the participant is enrolled in occupational skills training (including advanced training). <b>Record 2</b> if the participant is enrolled in postsecondary education. <b>Record 3</b> if the participant is enrolled in secondary education. <b>Record 0</b> if the participant was not placed in any of the above conditions.				R		One of the following: <ul style="list-style-type: none"><li>- Cross-Match</li><li>- Copy of registration record</li><li>- Case Notes</li><li>- School records or verification of enrollment</li><li>- Transcript or report card</li><li>- Vendor/training provider training documentation</li></ul>

