

WIOA TITLE I-B Adult/Dislocated Worker/Youth Programs

DATA VALIDATION CHECKLIST

CRITERIA	<p align="center">ACCEPTABLE VERIFICATION AND DOCUMENTATION <u>Only one document from this column per data validation criterion is required, unless otherwise stated.</u> Source Documentation is from <u>TEGL 23-19</u></p>	ADULT	DW	YOUTH
<p>★ <i>Do Not upload documents into the system of record if the full Social Security Number (SSN) is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p>★ <i>Any Personal Identifiable Information (PII) must be stored properly and handled with extreme care!</i></p> <p>★ <i>If self-attestation is listed as one of the acceptable methods of verification, case managers should not be using it as the main resort but use it when it is most appropriate for the participant under the current circumstances.</i></p>				
<p>DATE OF BIRTH (Element 200)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Baptismal record (if date of birth is shown)</p> <p><input type="checkbox"/> Birth certificate</p> <p><input type="checkbox"/> DD-214</p> <p><input type="checkbox"/> Report of transfer or discharge paper</p> <p><input type="checkbox"/> Federal, State or local identification card (i.e., driver license, identification, tribal records that shows birthdate)</p> <p><input type="checkbox"/> Passport (showing date of birth)</p> <p><input type="checkbox"/> Hospital record of birth</p> <p><input type="checkbox"/> Public assistance/Social service records (if name and DOB is shown)</p> <p><input type="checkbox"/> School records or school ID cards (if name and DOB is shown)</p> <p><input type="checkbox"/> Work permit that shows birthdate</p> <p><input type="checkbox"/> Family bible that shows birthdate</p>	X	X	X
<p>INDIVIDUAL WITH A DISABILITY (Element 202)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> School 504 records provided by student</p> <p><input type="checkbox"/> Assessment test results</p>	X	X	X

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<p>ELIGIBLE VETERAN STATUS (Element 301)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><i>Require only if participant received Individualized Career Services or Training Services</i></p> <p><input type="checkbox"/> DD-214</p> <p><input type="checkbox"/> Results from a cross-match with Department of Defense records</p> <p><input type="checkbox"/> Results from a cross-match with Veterans Service database</p> <p><input type="checkbox"/> A letter from the Veterans' Administration</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>UI ELIGIBLE STATUS (Element 401)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match with State UI records database</p> <p><input type="checkbox"/> Results from a cross-match to State MIS database</p> <p><input type="checkbox"/> Referral transmittal by Re-Employment Services and Eligibility Assessment (RESEA) or Worker Profiling and Reemployment Services (WPRS)</p> <p><input type="checkbox"/> Self-attestation for code values 3 and 4 only (3 = claimant not referred by RESEA or WPRS 4 = exhaustee)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>LONG-TERM UNEMPLOYMENT AT PROGRAM ENTRY (Element 402)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Public assistance records</p> <p><input type="checkbox"/> Refugee assistance records</p> <p><input type="checkbox"/> Results from a cross-match with public assistance database</p> <p><input type="checkbox"/> Results from a cross-match with State UI records database</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>SCHOOL STATUS AT PROGRAM ENTRY (Element 409)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match with postsecondary education database</p> <p><input type="checkbox"/> Copy of educational institution enrollment record</p> <p><input type="checkbox"/> Applicable records from the education institution (GED certificate, diploma, attendance record, transcripts, report card, or school documentation)</p> <p><input type="checkbox"/> Signed intake application or enrollment form</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Self-attestation</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>DATE OF ACTUAL DISLOCATION (Element 410)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Verification from employer</p> <p><input type="checkbox"/> Rapid Response list</p> <p><input type="checkbox"/> Notice of layoff</p> <p><input type="checkbox"/> Public announcement with follow-up cross-match with UI database</p> <p><input type="checkbox"/> Self-attestation</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>TEMPORARY ASSISTANCE TO NEEDY FAMILIES (TANF) (Element 600)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><i>Required only if participant has received Individualized Career or Training Services</i></p> <p><input type="checkbox"/> TANF eligibility verification</p> <p><input type="checkbox"/> TANF period of benefit receipt verification</p> <p><input type="checkbox"/> Referral transmittal from TANF</p> <p><input type="checkbox"/> Results from a cross-match with TANF public assistance records</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>EXHAUSTING TANF WITHIN 2 YEARS (Part A Title IV of the Social Security Act) at Program Entry (Element 601)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><i>Required only if participant has received Individualized Career or Training Services</i></p> <p><input type="checkbox"/> TANF eligibility verification</p> <p><input type="checkbox"/> TANF period of benefit receipt verification</p> <p><input type="checkbox"/> Referral transmittal from TANF</p> <p><input type="checkbox"/> Results from a cross-match with TANF public assistance records</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>SUPPLEMENTAL SECURITY INCOME (SSI)/SOCIAL SECURITY DISABILITY INSURANCE (SSDI) (Element 602)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of</p>	<p><i>Required only if participant has received Individualized Career or Training Services</i></p> <p>★ <i>Do Not upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents</i></p>	<p>X</p>	<p>X</p>	<p>n/a</p>

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<p>record</p> <p><input type="checkbox"/> N/A</p>	<p><i>containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> SSI/SSDI receipt of benefits verification</p> <p><input type="checkbox"/> Referral transmittal from SSA</p> <p><input type="checkbox"/> SSI/SSDI eligibility verification</p> <p><input type="checkbox"/> Results from a cross-match with SSA database</p>			
<p>SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (Element 603)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><i>Required only if participant has received Individualized Career or Training Services</i></p> <p><input type="checkbox"/> SNAP eligibility verification</p> <p><input type="checkbox"/> Copy of authorization to receive food stamps (also known as SNAP)</p> <p><input type="checkbox"/> Documentation of food stamp benefit receipt (also known as SNAP)</p> <p><input type="checkbox"/> Referral transmittal from SNAP</p> <p><input type="checkbox"/> Results from a cross-match with SNAP public assistance records</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>OTHER PUBLIC ASSISTANCE RECIPIENT (Element 604)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Copy of authorization to receive cash public assistance</p> <p><input type="checkbox"/> Copy of public assistance check</p> <p><input type="checkbox"/> Medical card showing cash grant status</p> <p><input type="checkbox"/> Public assistance eligibility verification</p> <p><input type="checkbox"/> Results from a cross-match with refugee assistance records</p> <p><input type="checkbox"/> Results from a cross-match with public assistance records</p> <p><input type="checkbox"/> Results from a cross-match with State MIS database</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>PREGNANT OR PARENTING YOUTH (Element 701)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Needs assessment</p> <p><input type="checkbox"/> Women Infants and Children (WIC) eligibility verification</p> <p><input type="checkbox"/> TANF single parent eligibility verification</p> <p><input type="checkbox"/> Signed intake application or enrollment form</p> <p><input type="checkbox"/> Signed Individual Service Strategy</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>YOUTH WHO NEEDS ADDITIONAL ASSISTANCE (Element 702)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Signed intake application or enrollment form</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Needs assessment</p> <p><input type="checkbox"/> Signed ISS</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>FOSTER CARE YOUTH STATUS AT PROGRAM ENTRY (Element 704)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Written confirmation from social services agency</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Foster care agency referral transmittal</p> <p><input type="checkbox"/> Signed intake application or enrollment form</p> <p><input type="checkbox"/> Needs assessment</p> <p><input type="checkbox"/> Signed ISS</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>HOMELESS PARTICIPANT, HOMELESS CHILDREN AND YOUTHS, OR RUNAWAY YOUTH AT PROGRAM ENTRY (Element 800)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Signed intake application or enrollment form</p> <p><input type="checkbox"/> Written statement or referral transmittal from a shelter or social service agency</p> <p><input type="checkbox"/> Needs assessment</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Signed ISS</p> <p><input type="checkbox"/> A letter from caseworker or support provider</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>EX-OFFENDER STATUS AT PROGRAM ENTRY (Element 801)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Documentation from the juvenile or adult criminal justice system <input type="checkbox"/> Written statement or referral document from a court or probation officer <input type="checkbox"/> Referral transmittal from a reintegration agency <input type="checkbox"/> Signed intake application or enrollment form <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> Needs assessment <input type="checkbox"/> Self-attestation <input type="checkbox"/> Signed ISS, and/or Individual Employment Plan (IEP) <input type="checkbox"/> Federal bonding program application 	X	X	X
<p>LOW INCOME STATUS AT PROGRAM ENTRY (Element 802)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Award letter from Veterans Administration <input type="checkbox"/> Bank statements <input type="checkbox"/> Pay stubs <input type="checkbox"/> Compensation award letter <input type="checkbox"/> Court award letter <input type="checkbox"/> Pension statement <input type="checkbox"/> Employer statement/contact <input type="checkbox"/> Family or business financial records <input type="checkbox"/> Housing authority verification <input type="checkbox"/> Quarterly estimated tax for self-employed persons <input type="checkbox"/> Social security benefits <input type="checkbox"/> UI claim documents <input type="checkbox"/> Copy of authorization to receive cash public assistance <input type="checkbox"/> Copy of public assistance check <input type="checkbox"/> Public assistance eligibility verification <input type="checkbox"/> Results from a cross-match with refugee assistance records <input type="checkbox"/> Results from a cross-match with public assistance records <input type="checkbox"/> Results from a cross-match with UI wage records <input type="checkbox"/> Self-attestation 	X	X	X

DATA VALIDATION CHECKLIST

<p>ENGLISH LANGUAGE LEARNER AT PROGRAM ENTRY (Element 803)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> Assessment test results <input type="checkbox"/> Applicable records from education institution (transcripts, or other school documentation) <input type="checkbox"/> Self-attestation <input type="checkbox"/> Signed Intake application or enrollment form <input type="checkbox"/> Signed ISS 	X	X	X
<p>BASIC SKILLS DEFICIENT/LOW LEVELS OF LITERACY AT PROGRAM ENTRY (Element 804)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p style="text-align: center;"><i>Required only if participant has received Individualized Career or Training Services</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record indicating BSD/Low English skills) <input type="checkbox"/> Assessment test results <input type="checkbox"/> Applicable records from education institution (transcripts, or other school documentation) 	X	X	X
<p>SINGLE PARENT AT PROGRAM ENTRY (Element 806)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Self-attestation <input type="checkbox"/> TANF single parent eligibility verification <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> Needs assessment <input type="checkbox"/> Signed intake application or enrollment form <input type="checkbox"/> Signed ISS or Employment Plan 	X	X	X
<p>DISPLACED HOMEMAKER AT PROGRAM ENTRY (Element 807)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Self-attestation <input type="checkbox"/> Signed intake application or enrollment form <input type="checkbox"/> Results from a cross-match with public assistance records <input type="checkbox"/> Copy of spouse's layoff notice <input type="checkbox"/> Copy of spouse's death record <input type="checkbox"/> Copy of Spouse's Permanent Change of Station (PCS) Orders (for a military move or 	X	X	n/a

DATA VALIDATION CHECKLIST

<p>record</p> <p><input type="checkbox"/> N/A</p>	<p>assignment)</p> <p><input type="checkbox"/> Copy of divorce records</p> <p><input type="checkbox"/> Copy of applicable court records</p> <p><input type="checkbox"/> Copy of bank records (showing financial dependence on spouse, no separate individual income support, or no employment income earned)</p> <p><input type="checkbox"/> Needs assessment</p> <p><input type="checkbox"/> Signed IEP</p>			
<p>ELIGIBLE MIGRANT AND SEASONAL FARMWORKER STATUS (WIOA sec. 167) (Element 808)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Results from a cross-match with public assistance records</p> <p><input type="checkbox"/> National Farmworker Jobs Program eligibility documents</p> <p><input type="checkbox"/> Results from a cross-match with State MIS</p> <p><input type="checkbox"/> Results from a cross-match with H-1B records</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>DATE OF PROGRAM ENTRY (Element 900)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> IEP or ISS</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Program intake documents, such as eligibility determination documentation or program enrollment forms</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE OF PROGRAM EXIT (Element 901)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> A copy of the letter sent to the individual indicating that the case was closed</p> <p><input type="checkbox"/> WIOA status/exit forms</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Attendance records</p> <p><input type="checkbox"/> Review of service records identifying the last qualifying service (and lack of planned gap)</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>DATE OF FIRST WIOA YOUTH SERVICE (Element 906)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Signed intake application or enrollment form with follow-up cross-match to case notes (in the program or enrollment notes within the system of record) identifying the first qualifying service</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with results from cross-match with State MIS database</p> <p><input type="checkbox"/> Signed ISS with follow-up cross-match to case notes (in the program or enrollment notes within the system of record) identifying the first qualifying service</p> <p><input type="checkbox"/> Eligibility determination documentation or program enrollment forms with follow-up cross-match to case notes (in the program or enrollment notes within the system of record) identifying the first qualifying service</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>RECIPIENT OF INCUMBENT WORKER TRAINING (Element 907)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Signed IWT contract</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>RAPID RESPONSE (Element 908)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match with State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Self-attestation</p> <p><input type="checkbox"/> Rapid Response list</p> <p><input type="checkbox"/> Results from a cross-match with Rapid Response records</p>	<p>n/a</p>	<p>X</p>	<p>n/a</p>
<p>OTHER REASONS FOR EXIT (Element 923)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> Information from partner services</p> <p><input type="checkbox"/> WIOA status/exit forms</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Withdrawal form with explanation</p> <p><input type="checkbox"/> Information from institution or facility</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>DATE OF FIRST BASIC CAREER SERVICE (Staff-Assisted) (Element 1001)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Results from a cross-match with State MIS database</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>MOST RECENT DATE RECEIVED BASIC CAREER SERVICES (Self-Service/Information Only) (Element 1002)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>MOST RECENT DATE RECEIVED BASIC CAREER SERVICES (Staff-Assisted) (Element 1003)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>DATE OF MOST RECENT CAREER SERVICE (WIOA) (Element 1004)</p> <p><input type="checkbox"/> Documentation MUST be in</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

Exhibit 1500b WIOA TITLE I-B Adult/Dislocated Worker/Youth Programs
DATA VALIDATION CHECKLIST

<p>be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>				
<p>MOST RECENT DATE RECEIVED Staff-Assisted Services (DVOP Specialist) (Element 1005)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>DATE REFERRED TO DEPARTMENT OF VETERANS AFFAIRS VOCATIONAL REHABILITATION AND EMPLOYMENT PROGRAM (Element 1006)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>DATE OF MOST RECENT REPORTABLE INDIVIDUAL CONTACT (Element 1007)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Results from a cross-match with State MIS database</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

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<input type="checkbox"/> N/A				
<p>DATE OF FIRST INDIVIDUALIZED CAREER SERVICE (Element 1200)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Results from a cross-match with State MIS database</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>MOST RECENT DATE RECEIVED INDIVIDUALIZED CAREER SERVICE (Element 1201)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>DATE INDIVIDUAL EMPLOYMENT PLAN CREATED (Element 1202)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match with State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Signed IEP</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>TYPE OF WORK EXPERIENCE (Element 1205)</p> <p><input type="checkbox"/> Documentation MUST be</p>	<p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Signed Work Experience Agreement</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>				
<p>DATE RECEIVED FINANCIAL LITERACY SERVICES (Element 1206)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets</p> <p><input type="checkbox"/> Sign-in sheets</p> <p><input type="checkbox"/> Attendance record</p> <p><input type="checkbox"/> Vendor contract</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>TRANSITIONAL JOBS (Element 1211)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Signed transitional job agreement</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>RECEIVED TRAINING (Element 1300)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match between dates of service and vendor training information</p> <p><input type="checkbox"/> Vendor training records</p> <p><input type="checkbox"/> Results from a cross-match with State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Signed training contract</p> <p><input type="checkbox"/> Individual Training Account (ITA)</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE ENTERED TRAINING #1 (Element 1302)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of</p>	<p><input type="checkbox"/> Results from a cross-match between State MIS database and attendance sheets or records</p> <p><input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> ITA</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

record <input type="checkbox"/> N/A				
TYPE OF TRAINING SERVICE #1 (Element 1303) <input type="checkbox"/> Documentation MUST be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Copy of enrollment record <input type="checkbox"/> File documentation with notes from program staff <input type="checkbox"/> Results from a cross-match between dates of service and vendor training information <input type="checkbox"/> Vendor training documentation <input type="checkbox"/> Electronic records (in the system of record) <input type="checkbox"/> ITA <input type="checkbox"/> Attendance records	X	X	X
OCCUPATIONAL SKILLS TRAINING CODE #1 (Element 1306) <input type="checkbox"/> Documentation MUST be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Results from a cross-match with State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> Signed IEP or Training Plan <input type="checkbox"/> Signed training contract <input type="checkbox"/> ITA	X	X	X
TRAINING COMPLETED #1 (Element 1307) <input type="checkbox"/> Documentation MUST be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Results from a cross-match with State MIS database and attendance sheets or records <input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database	X	X	X
DATE COMPLETED OR WITHDREW FROM TRAINING #1 (Element 1308) <input type="checkbox"/> Documentation MUST be uploaded in the system of	<input type="checkbox"/> Results from a cross-match with State MIS database and attendance sheets or records <input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database	X	X	X

DATA VALIDATION CHECKLIST

record <input type="checkbox"/> N/A				
DATE ENTERED TRAINING #2 (Element 1309) <input type="checkbox"/> Documentation MUST be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Results from a cross-match to State MIS database and attendance sheets or records <input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to state MIS database <input type="checkbox"/> ITA	X	X	X
TYPE OF TRAINING SERVICE #2 (Element 1310) <input type="checkbox"/> Documentation MUST be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Copy of enrollment record <input type="checkbox"/> File documentation with notes from program staff <input type="checkbox"/> Results from a cross-match between dates of service and vendor training information <input type="checkbox"/> Vendor training documentation <input type="checkbox"/> Electronic records (in the system of records) <input type="checkbox"/> ITA <input type="checkbox"/> Attendance records	X	X	X
OCCUPATIONAL SKILLS TRAINING CODE #2 (Element 1311) <input type="checkbox"/> Documentation MUST be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Results from a cross-match with State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> Signed IEP or Training Plan <input type="checkbox"/> Signed training contract <input type="checkbox"/> ITA	X	X	n/a
TRAINING COMPLETED #2 (Element 1312) <input type="checkbox"/> Documentation MUST be uploaded in the system of	<input type="checkbox"/> Results from cross-match with State MIS database and attendance sheets or records <input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database	X	X	X

DATA VALIDATION CHECKLIST

<p>record</p> <p><input type="checkbox"/> N/A</p>				
<p>DATE COMPLETED, OR WITHDREW FROM TRAINING #2 (Element 1313)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match between State MIS database and attendance sheets or records</p> <p><input type="checkbox"/> Vendor Training Records with Follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE ENTERED TRAINING #3 (Element 1314)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match between State MIS database and attendance sheets or records</p> <p><input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> ITA</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>TYPE OF TRAINING SERVICE #3 (Element 1315)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Copy of enrollment record</p> <p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> Results from cross-match between dates of service and vendor training information</p> <p><input type="checkbox"/> Vendor training documentation</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> ITA</p> <p><input type="checkbox"/> Attendance records</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>OCCUPATIONAL SKILLS TRAINING CODE #3 (Element 1316)</p> <p><input type="checkbox"/> Documentation MUST be</p>	<p><input type="checkbox"/> Results from cross-match with State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Signed IEP or Training Plan</p> <p><input type="checkbox"/> Signed training contract</p> <p><input type="checkbox"/> ITA</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>				
<p>TRAINING COMPLETED #3 (Element 1317)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match between State MIS database and attendance sheets or records</p> <p><input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>DATE COMPLETED, OR WITHDREW FROM TRAINING #3 (Element 1318)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match between State MIS database and attendance sheets or records</p> <p><input type="checkbox"/> Vendor training records with follow-up cross-match to State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) with follow-up cross-match to State MIS database</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>ESTABLISHED INDIVIDUAL TRAINING ACCOUNT (ITA) (Element 1319)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match with State MIS database</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> ITA approval, allocation or activation records</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>PARTICIPATED IN POSTSECONDARY EDUCATION DURING PROGRAM PARTICIPATION (Element 1332)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Data match with postsecondary data system</p> <p><input type="checkbox"/> Copy of enrollment record</p> <p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> School records</p> <p><input type="checkbox"/> Transcript or report card</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>ENROLLED IN SECONDARY EDUCATION PROGRAM (Element 1401)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Copy of enrollment record</p> <p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> School records</p> <p><input type="checkbox"/> Transcript or report card</p> <p><input type="checkbox"/> Data match to State K-12 data system</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>MOST RECENT DATE RECEIVED EDUCATIONAL ACHIEVEMENT SERVICES (Element 1402)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets</p> <p><input type="checkbox"/> Sign-in sheets</p> <p><input type="checkbox"/> Attendance record</p> <p><input type="checkbox"/> Vendor contract</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>MOST RECENT DATE RECEIVED ALTERNATIVE SECONDARY SCHOOL SERVICES (Element 1403)</p>	<p><input type="checkbox"/> Activity sheets</p> <p><input type="checkbox"/> Sign-in sheets</p> <p><input type="checkbox"/> Attendance record</p> <p><input type="checkbox"/> Vendor contract</p> <p><input type="checkbox"/> Electronic records (in the system of record)</p> <p><input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A				
MOST RECENT DATE RECEIVED WORK EXPERIENCE OPPORTUNITIES (Element 1405) <input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Results from cross-match with State MIS database <input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> Logs or status forms noting receipt of service and combination of services received	n/a	n/a	X
DATE ENROLLED IN POST EXIT EDUCATION OR TRAINING PROGRAM LEADING TO A RECOGNIZED POSTSECONDARY CREDENTIAL (Element 1406) <input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Copy of enrollment record <input type="checkbox"/> File documentation with notes from program staff <input type="checkbox"/> School records <input type="checkbox"/> Transcript or report card <input type="checkbox"/> Data match with postsecondary data system	X	X	X
MOST RECENT DATE RECEIVED EDUCATION OFFERED CONCURRENTLY WITH WORKFORCE PREPARATION (Element 1407)	<input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received	n/a	n/a	X

DATA VALIDATION CHECKLIST

<input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A				
<p>MOST RECENT DATE RECEIVED LEADERSHIP DEVELOPMENT OPPORTUNITIES (Element 1408)</p> <input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received	n/a	n/a	X
<p>MOST RECENT DATE RECEIVED SUPPORTIVE SERVICES (Element 1409)</p> <input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records, case notes (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received	X	X	X
<p>MOST RECENT DATE RECEIVED ADULT MENTORING SERVICES (Element 1410)</p> <input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record <input type="checkbox"/> N/A	<input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received	n/a	n/a	X

DATA VALIDATION CHECKLIST

<p>MOST RECENT DATE RECEIVED COMPREHENSIVE GUIDANCE/COUNSELING SERVICES (Element 1411)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records, case notes (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>MOST RECENT DATE RECEIVED YOUTH FOLLOW-UP SERVICES (Element 1412)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records, case notes (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>MOST RECENT DATE YOUTH RECEIVED ENTREPRENEURIAL SKILLS TRAINING (Element 1413)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>

WIOA TITLE I-B Adult/Dislocated Worker/Youth Programs

DATA VALIDATION CHECKLIST

<p>MOST RECENT DATE YOUTH RECEIVED SERVICES THAT PROVIDE LABOR MARKET AND EMPLOYMENT INFORMATION (Element 1414)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> State MIS, case notes (in the program or enrollment notes within the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>MOST RECENT DATE YOUTH RECEIVED POSTSECONDARY TRANSITION AND PREPARATORY ACTIVITIES (Element 1415)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records, case notes (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>RECEIVED NEEDS-RELATED PAYMENTS (Element 1500)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Activity sheets <input type="checkbox"/> Sign-in sheets <input type="checkbox"/> Attendance record <input type="checkbox"/> Vendor contract <input type="checkbox"/> Electronic records, case notes (in the system of record) <input type="checkbox"/> WIOA status forms noting receipt of service and type of service received</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

WIOA TITLE I-B Adult/Dislocated Worker/Youth Programs

DATA VALIDATION CHECKLIST

<p>EMPLOYED IN 1ST QUARTER AFTER EXIT QUARTER (Element 1600)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Follow-up survey from program participants</p> <p><input type="checkbox"/> Paycheck stubs, tax records, W2 form (detailed case notes in the program or enrollment notes within the system of record)</p> <p><input type="checkbox"/> Quarterly tax payment forms, such as a IRS form 941</p> <p><input type="checkbox"/> Document from employer on company letterhead attesting to an individual's employment status and earnings</p> <p><input type="checkbox"/> Self-employment worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Detailed case notes (in the program or enrollment notes within the system of record) verified by employer and signed by the counselor</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>TYPE OF EMPLOYMENT MATCH 1ST QUARTER AFTER EXIT QUARTER (Element 1601)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from cross-match with State UI records</p> <p><input type="checkbox"/> Signed follow-up survey response from program participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGl 26-16)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941)</p> <p><input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>EMPLOYED IN 2ND QUARTER AFTER EXIT QUARTER (Element 1602)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Follow-up survey from program participants</p> <p><input type="checkbox"/> Paycheck stubs, tax records, W2 form</p> <p><input type="checkbox"/> Quarterly tax payment forms, such as an IRS form 941</p> <p><input type="checkbox"/> Document from employer on company letterhead attesting to an individual's employment status and earnings</p> <p><input type="checkbox"/> Self-employment worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Detailed case notes (in the program or enrollment notes within the system of record) verified by employer and signed by the counselor</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>TYPE OF EMPLOYMENT MATCH 2ND QUARTER AFTER EXIT QUARTER (Element 1603)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from a cross-match with State UI records</p> <p><input type="checkbox"/> Signed follow-up survey response from program participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGl 26-16)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS Form 941)</p> <p><input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>EMPLOYED IN 3RD QUARTER AFTER EXIT QUARTER (Element 1604)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Follow-up survey from program participants</p> <p><input type="checkbox"/> Paycheck stubs, tax records, W2 form</p> <p><input type="checkbox"/> Quarterly tax payment forms, such as an IRS form 941</p> <p><input type="checkbox"/> Document from employer on company letterhead attesting to an individual's employment status and earnings</p> <p><input type="checkbox"/> Self-employment worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Detailed case notes (in the program or enrollment notes within the system of record) verified by employer and signed by the counselor</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>TYPE OF EMPLOYMENT MATCH 3RD QUARTER AFTER EXIT QUARTER (Element 1605)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from a cross-match with UI records</p> <p><input type="checkbox"/> Signed follow-up survey response from program participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGl 26-16)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941)</p> <p><input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>EMPLOYED IN 4TH QUARTER AFTER EXIT QUARTER (Element 1606)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Follow-up survey from program participants <input type="checkbox"/> Paycheck stubs, tax records, W2 form <input type="checkbox"/> Quarterly tax payment forms, such as an IRS form 941 <input type="checkbox"/> Document from employer on company letterhead attesting to an individual's employment status and earnings <input type="checkbox"/> Self-employment worksheets signed and attested to by program participants <input type="checkbox"/> Detailed case notes (in the program or enrollment notes within the system of record) verified by employer and signed by the counselor 	X	X	X
<p>TYPE OF EMPLOYMENT MATCH 4TH QUARTER AFTER EXIT QUARTER (Element 1607)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Results from a cross-match with State UI records <input type="checkbox"/> Signed follow-up survey response from program participants <input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL <u>26-16</u>) <input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation <input type="checkbox"/> Railroad retirement system <input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941) <input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings) <input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants <input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs) 	X	X	n/a

DATA VALIDATION CHECKLIST

<p>EMPLOYMENT RELATED TO TRAINING (2ND QUARTER AFTER EXIT) (Element 1608)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>OCCUPATIONAL CODE (if available) (Element 1610)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>ENTERED NON-TRADITIONAL EMPLOYMENT (Element 1611)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>OCCUPATIONAL CODE OF EMPLOYMENT 2ND QUARTER AFTER EXIT QUARTER (if available) (Element 1612)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>OCCUPATIONAL CODE OF EMPLOYMENT 4TH QUARTER AFTER EXIT QUARTER (if available) (Element 1613)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>INDUSTRY CODE OF EMPLOYMENT 1ST QUARTER AFTER EXIT QUARTER (Element 1614)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>INDUSTRY CODE OF EMPLOYMENT 2ND QUARTER AFTER EXIT QUARTER (Element 1615)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>INDUSTRY CODE OF EMPLOYMENT 3RD QUARTER AFTER EXIT QUARTER (Element 1616)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>INDUSTRY CODE OF EMPLOYMENT 4TH QUARTER AFTER EXIT QUARTER (Element 1617)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from UI wage records</p> <p><input type="checkbox"/> Supplemental data sources defined by TEGL <u>26-16</u> follow-up services</p> <p><input type="checkbox"/> Surveys</p> <p><input type="checkbox"/> Results from record sharing and/or automated record matching with other employment and administrative databases</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>RETENTION WITH THE SAME EMPLOYER IN THE 2ND QUARTER AND THE 4TH QUARTER (Element 1618)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from a cross-match with State UI records</p> <p><input type="checkbox"/> Signed Follow-up Survey Response from Program Participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per <u>TEGL 26-16</u>)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941)</p> <p><input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>X</p>
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DATA VALIDATION CHECKLIST

<p>WAGES 3RD QUARTER PRIOR TO PARTICIPATION QUARTER (Element 1700)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><i>One of the following (consistent with TEGL <u>26-16</u>):</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Results from a cross-match with State UI records <input type="checkbox"/> Signed follow-up survey response from program participants <input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL <u>26-16</u>) <input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation <input type="checkbox"/> Railroad retirement system <input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941) <input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings) <input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants <input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs) 	<p>X</p>	<p>X</p>	<p>n/a</p>
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DATA VALIDATION CHECKLIST

<p>WAGES 2ND QUARTER PRIOR TO PARTICIPATION QUARTER (Element 1701)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><i>One of the following (consistent with TEGL 26-16):</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Results from a cross-match with State UI records <input type="checkbox"/> Signed follow-up survey response from program participants <input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL 26-16) <input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation <input type="checkbox"/> Railroad retirement system <input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941) <input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings) <input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants <input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs) 	<p>X</p>	<p>X</p>	<p>n/a</p>
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WIOA TITLE I-B Adult/Dislocated Worker/Youth Programs

DATA VALIDATION CHECKLIST

<p>WAGES 1ST QUARTER PRIOR TO PARTICIPATION QUARTER (Element 1702)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><i>One of the following (consistent with TEGL <u>26-16</u>):</i></p> <p><input type="checkbox"/> Results from a cross-match with State UI records</p> <p><input type="checkbox"/> Signed follow-up survey response from program participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL <u>26-16</u>)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941)</p> <p><input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
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**WIOA TITLE I-B Adult/Dislocated Worker/Youth Programs
DATA VALIDATION CHECKLIST**

<p>WAGES 1ST QUARTER AFTER EXIT QUARTER (Element 1703)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><i>One of the following (consistent with TEGL 26-16):</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Results from a cross-match with State UI records <input type="checkbox"/> Signed follow-up survey response from program participants <input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL 26-16) <input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation <input type="checkbox"/> Railroad retirement system <input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941) <input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings) <input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants <input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs) 	<p align="center">X</p>	<p align="center">X</p>	<p align="center">n/a</p>
<p>WAGES 2ND QUARTER AFTER EXIT QUARTER (Element 1704)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Results from a cross-match with state UI records <input type="checkbox"/> Follow-up survey from program participants <input type="checkbox"/> Paycheck stubs, tax records, W2 form <input type="checkbox"/> Quarterly tax payment forms, such as an IRS form 941 <input type="checkbox"/> Document from employer on company letterhead attesting to an individual's employment status and earnings <input type="checkbox"/> Self-employment worksheets signed and attested to by program participants <input type="checkbox"/> Detailed case notes (in the program or enrollment notes within the system of record) verified by the employer and signed by the counselor 	<p align="center">X</p>	<p align="center">X</p>	<p align="center">X</p>

DATA VALIDATION CHECKLIST

<p>WAGES 3RD QUARTER AFTER EXIT QUARTER (Element 1705)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from a cross-match with State UI records</p> <p><input type="checkbox"/> Signed follow-up survey response from program participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL <u>26-16</u>)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941)</p> <p><input type="checkbox"/> A signed Letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>
<p>WAGES 4TH QUARTER AFTER EXIT QUARTER (Element 1706)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from a cross-match with State UI records</p> <p><input type="checkbox"/> Signed follow-up survey response from program participants</p> <p><input type="checkbox"/> Copy of paycheck stubs, payroll slip, or leave and earnings statements (minimum of two per TEGL <u>26-16</u>)</p> <p><input type="checkbox"/> Income tax records, W-2 form, or other records from the State Department of Revenue or Taxation</p> <p><input type="checkbox"/> Railroad retirement system</p> <p><input type="checkbox"/> Quarterly tax payment forms (such as IRS form 941)</p> <p><input type="checkbox"/> A signed letter from an employer on company letterhead (attesting to an individual's employment status and earnings)</p> <p><input type="checkbox"/> Self-employment or sales commission worksheets signed and attested to by program participants</p> <p><input type="checkbox"/> Results from a cross-match with partner program administrative databases (such as TANF, SNAP or other public assistance programs)</p>	<p>X</p>	<p>X</p>	<p>n/a</p>

DATA VALIDATION CHECKLIST

<p>TYPE OF RECOGNIZED CREDENTIAL (Element 1800)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Data match</p> <p><input type="checkbox"/> Copy of credential</p> <p><input type="checkbox"/> Copy of school record</p> <p><input type="checkbox"/> Follow-up survey from program participants</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) documenting information obtained from education or training provider with the date it was obtained</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE ATTAINED RECOGNIZED CREDENTIAL (Element 1801)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Data match</p> <p><input type="checkbox"/> Copy of credential</p> <p><input type="checkbox"/> Copy of school record</p> <p><input type="checkbox"/> Follow-up survey from program participants</p> <p><input type="checkbox"/> Case notes (in the program or enrollment notes within the system of record) documenting information obtained from education or training provider with the date it was obtained</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>TYPE OF RECOGNIZED CREDENTIAL #2 (Element 1802)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match with postsecondary education database</p> <p><input type="checkbox"/> Copy of diploma, credential or degree awarded by an education institution</p> <p><input type="checkbox"/> Applicable records from the education institution (GED certificate, diploma, transcripts, report card, or school documentation)</p> <p><input type="checkbox"/> Signed follow-up survey response from program participant</p> <p><input type="checkbox"/> Signed file documentation with information obtained from education or training provider</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE ATTAINED RECOGNIZED CREDENTIAL #2 (Element 1803)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match with postsecondary education database</p> <p><input type="checkbox"/> Copy of diploma, credential or degree awarded by an education institution</p> <p><input type="checkbox"/> Applicable records from the education institution (GED certificate, diploma, transcripts, report card, or school documentation)</p> <p><input type="checkbox"/> Signed follow-up survey response from program participant</p> <p><input type="checkbox"/> Signed file documentation with information obtained from the education or training provider</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>TYPE OF RECOGNIZED CREDENTIAL #3 (Element 1804)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match with postsecondary education database</p> <p><input type="checkbox"/> Copy of diploma, credential or degree awarded by an education institution</p> <p><input type="checkbox"/> Applicable records from the education institution (GED certificate, diploma, transcripts, report card, or school documentation)</p> <p><input type="checkbox"/> Signed follow-up survey response from program participant</p> <p><input type="checkbox"/> Signed file documentation with information obtained from the education or training Provider</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>DATE ATTAINED RECOGNIZED CREDENTIAL #3 (Element 1805)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from cross-match with postsecondary education database</p> <p><input type="checkbox"/> Copy of diploma, credential or degree awarded by an education institution</p> <p><input type="checkbox"/> Applicable records from education institution (GED certificate, diploma, transcripts, report card, or school documentation)</p> <p><input type="checkbox"/> Signed follow-up survey response from program participant</p> <p><input type="checkbox"/> Signed file documentation with information obtained from the education or training provider</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE OF MOST RECENT MEASURABLE SKILL GAINS: EDUCATIONAL FUNCTIONAL LEVEL (EFL) (Element 1806)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Pre- and post-test results measuring EFL gain</p> <p><input type="checkbox"/> Adult high school transcript showing EFL gain through the awarding of credits or Carnegie units</p> <p><input type="checkbox"/> Postsecondary education or training enrollment determined through data match, survey documentation, or program notes</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE OF MOST RECENT MEASURABLE SKILL GAINS: POSTSECONDARY TRANSCRIPT/REPORT CARD (Element 1807)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Transcript</p> <p><input type="checkbox"/> Report card</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE OF MOST RECENT MEASURABLE SKILL GAINS: SECONDARY TRANSCRIPT/REPORT CARD</p>	<p><input type="checkbox"/> Transcript</p> <p><input type="checkbox"/> Report card</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>(Element 1808)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>				
<p>DATE OF MOST RECENT MEASURABLE SKILL GAINS: TRAINING MILESTONE (Element 1809)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Documentation of a skill gained through on-the-job training or registered apprenticeship</p> <p><input type="checkbox"/> Contract and/or evaluation from employer or training provider documenting a skill gain</p> <p><input type="checkbox"/> Progress report from employer documenting a skill gain</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE OF MOST RECENT MEASURABLE SKILL GAINS: SKILLS PROGRESSION (Element 1810)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results of a knowledge-based exam or certification of completion.</p> <p><input type="checkbox"/> Documentation demonstrating progress in attaining technical or occupational skills through an exam or benchmark attainment</p> <p><input type="checkbox"/> Documentation from training provider or employer</p> <p><input type="checkbox"/> Copy of a credential that is required for a particular occupation and only is earned after the passage of an exam</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>DATE ENROLLED DURING PROGRAM PARTICIPATION IN EDUCATION OR TRAINING PROGRAM LEADING TO A RECOGNIZED POSTSECONDARY CREDENTIAL OR EMPLOYMENT</p>	<p><input type="checkbox"/> Copy of enrollment record</p> <p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> School records</p> <p><input type="checkbox"/> Transcript or report card</p> <p><input type="checkbox"/> Data match with postsecondary data system</p>	<p>X</p>	<p>X</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>(Element 1811)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>				
<p>DATE COMPLETED, DURING PROGRAM PARTICIPATION, AN EDUCATION OR TRAINING PROGRAM LEADING TO A RECOGNIZED POSTSECONDARY CREDENTIAL OR EMPLOYMENT (Element 1813)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Results from a cross-match with secondary or postsecondary education database</p> <p><input type="checkbox"/> Copy of diploma, credential or degree awarded by an education institution</p> <p><input type="checkbox"/> Applicable records from the education institution (GED certificate, diploma, transcripts, report card, or school documentation)</p> <p><input type="checkbox"/> Signed follow-up survey response from program participant</p> <p><input type="checkbox"/> Signed file documentation with information obtained from the education or training provider</p>	<p>X</p>	<p>X</p>	<p>X</p>
<p>YOUTH 2ND QUARTER PLACEMENT (TITLE I) (Element 1900)</p> <p><input type="checkbox"/> Documentation <u>MUST</u> be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Results from a cross-match with other agencies</p> <p><input type="checkbox"/> Copy of registration record</p> <p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> School records</p> <p><input type="checkbox"/> Transcript or report card</p> <p><input type="checkbox"/> Vendor/training provider training documentation</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>

DATA VALIDATION CHECKLIST

<p>YOUTH 4TH QUARTER PLACEMENT (TITLE I) (Element 1901)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p>★ <i>Don't upload documents into the system of record if the full SSN is listed - Case manager, enter a note as visually verified. Case managers may upload documents containing a partial (last 4 digits) of the SSN.</i></p> <p><input type="checkbox"/> Cross-match with other agencies</p> <p><input type="checkbox"/> Copy of registration record</p> <p><input type="checkbox"/> File documentation with notes from program staff</p> <p><input type="checkbox"/> School records</p> <p><input type="checkbox"/> Transcript or report card</p> <p><input type="checkbox"/> Vendor/training provider training documentation</p>	<p>n/a</p>	<p>n/a</p>	<p>X</p>
<p>CATEGORY OF ASSESSMENT #1 (Element 1902)</p> <p><input type="checkbox"/> Documentation MUST be uploaded in the system of record</p> <p><input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> Copy of assessment test results</p> <p><input type="checkbox"/> Vendor receipt for testing</p>	<p>X</p>	<p>X</p>	<p>n/a</p>