A. Information Required for Registration

	Element	Definition	Source Documentation
1.		An individual's date of birth.	Self-attestation
2.	Eligible to Work	An individual's status as eligible to work in the U.S.	Self-attestation
3.	English Language Learner	An individual whose native language is a language other than English, or who lives in an environment where a language other than English is the dominant language, and who has limited ability in speaking, reading, writing, or understanding the English language.	Self-attestation
4.	Disability	An individual with a disability, defined as a physical or mental impairment that substantially limits one or more of a person's major life activities.	Self-attestation
5.	School Status	An individual's status as either not attending school or attending secondary school, alternative school, or post-secondary school.	Self-attestation
6.	Selective Service Registration	An individual's status as being registered, or exempt from registering, with the U.S. Selective Service system. Not applicable to females or males born prior to 1960.	Documentation for proof of registration: Selective Service acknowledgement letter Screen printout of the Selective Service Verification site Selective Service registration card Selective Service verification form Stamped post office receipt of registration Documentation for exemption: Form DD-214 "Report of Separation" Date of entry stamp on passport I-94 with date of entry stamp Letter from USCIS indicating date entered US Any acceptable document combination identified on the Selective Service Who Needs to Register page Documentation due to failure to register: Exception letter approved by SWC
7.	Veteran Status	 An individual who served in the active U.S. military, naval, or air service, including as a member of the U.S. national guard or reserves under an order to active duty, who was not dishonorably discharged, or The spouse of: An individual who died on active duty or of a service-connected disability; An individual on active duty classified as missing in action, captured in the line of duty by a hostile force, or forcibly detained or interned in the line of duty by a foreign government or power; or An individual who has a permanent, total disability resulting from a service-connected disability or the spouse of a veteran who died while a disability so evaluated was in existence. 	Self-attestation
8.	Long Term Unemployed	An individual currently unemployed who has been unemployed, consecutively, for 6 months (180 days) or more.	Self-attestation
9.	Date of Actual Dislocation	The last day of employment at an individual's job of dislocation, if applicable.	Self-attestation
10	. Migrant and Seasonal Farmworker Designation	An individual who is employed, or was employed in the past 12 months, in farmwork of a seasonal or other temporary nature who travels to the job site and cannot reasonably return to their permanent residence within the same day.	Self-attestation
11	. Migrant and Seasonal Farmworker Status	 An individual who: Is a low-income individual who has been employed for 12 consecutive months within 24 months prior to application to the program, in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment and faces multiple barriers to economic self-sufficiency. Is employed, or was employed in the past 12 months, in farmwork of a seasonal or other temporary nature and is not required to be absent overnight from your permanent place of residence. Is a migrant or seasonal farmworker aged 14 – 24. Is an adult or youth program participant and is a dependent of an individual described in #1 - #3. 	Self-attestation

12. TANF	An individual listed on a welfare grant or that has received cash assistance or other support services from a TANF agency in the last six months prior to participation in the program.	TANF eligibility verification TANF period of benefit receipt verification Referral transmittal from TANF Cross-match with TANF public assistance records
13. Other Public Assistance Recipient	An individual 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.	Authorization to receive cash public assistance Public assistance check Medical card showing cash grant status Public assistance eligibility verification Cross-match with public assistance records
14. SNAP	An individual who is receiving or has received in the last six months assistance through the Supplemental Nutrition Assistance Program (SNAP)	SNAP eligibility verification Documentation of SNAP benefit receipt Referral transmittal from SNAP Cross-match with SNAP public assistance records
15. SSI and/or SSDI	An individual who is receiving or has received SSI and/or SSDI in the last six months.	SSI/SSDI receipt of benefits verification Referral transmittal from SSA SSI/SSDI eligibility verification Cross-match with SSA database
16. Exhausting TANF Within 2 Years	An individual within 2 years of exhausting lifetime TANF eligibility, regardless of whether receiving these benefits at program entry.	TANF eligibility verification TANF period of benefit receipt verification Referral transmittal from TANF Cross-match with TANF public assistance records
17. Low-income	 An individual who: Is a member of a family that is receiving, or in the past 6 months has received, assistance through SNAP, TANF, supplemental security income, or State or local income-based public assistance. Has received an income or is a member of a family that received a total family income, for the 6-month period prior to application for the program that, in relation to family size, does not exceed the corresponding income standard established in SWC Policy WS816 R4, Attachment B – WIOA Income Guidelines. Is an individual with a disability whose own income, for the 6-month period prior to application for the program, does not exceed the does not exceed the corresponding income standard established in SWC Policy WS816 R4, Attachment B – WIOA Income Guidelines. Is a homeless individual or runaway youth. 	Self-attestation (except for element #1, see elements #12 - #15 for document requirements)
18. Homeless Individual or Runaway Youth	An individual who lacks a fixed, regular, and adequate nighttime residence or who has a primary nighttime residence that is in a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings.	Self-attestation
19. Ex-offender	An individual who has been subject to any stage of the criminal justice process or requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction.	Self-attestation
20. Basic Skills Deficient (BSD)	An individual 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.	Assessment test results Applicable records from education institution (transcripts, academic assessments, or other school documentation) Case notes
21. Single Parent	A single, separated, divorced, or widowed individual who has primary responsibility for one or more dependent children under age 18 (including a single pregnant woman).	Self-attestation

B. Priority for Services under the Adult Program (choose only one priority)

Priority	Priority Group	Source Documentation
1 st Priority	Is a veteran or eligible spouse and 1. Is a low-income individual, or 2. Is basic skills deficient.	
2 nd Priority	Is not a veteran or eligible spouse and 1. Is a low-income individual, or 2. Is basic skills deficient.	See documentation requirements for veteran status, low-income, and BSD above.
3 rd Priority	Is a veteran or eligible spouse but is not low-income and is not basic skills deficient.	
4 th Priority	Is not a veteran or eligible spouse, is not low-income, and is not basic skills deficient but who has a barrier to employment, defined as being from a Black; Asian; Native Hawaiian, Compact of Free Association (COFA) nations, and Pacific Islander; Latino; Lesbian, Gay, Bisexual, Transgender, and Queer or Questioning (LGBTQ) community; or is an expectant person.	Case notes
5 th Priority	Is not a veteran or eligible spouse, is not low-income, and is not basic skills deficient, but who is determined to need individualized career, supportive, and/or training services to obtain or retain employment.	Case notes

C. <u>Dislocated Worker Eligibility (choose only one category)</u>

Category	Criteria	Source Documentation
	An individual who has been terminated or laid off, who has received a notice of termination or layoff, or who is the spouse of a member of the Armed Forces and who has lost employment as a result of the spouse's discharge from the military; AND	Self-attestation UI good cause voluntary quits only Separation determination letter UI correspondence from ESD
1. General Dislocation	1.2 Is determined unlikely to return to previous industry or occupation as defined in SWC Policy WS816 R4, Attachment A – WorkSource Services & Program Eligibility Handbook; AND	Self-attestation
Dislocation	1.3.1 Is eligible for or has exhausted entitlement to unemployment compensation; OR	
	1.3.2 Has performed labor in any occupation working two full pay periods or one month but is not eligible for unemployment compensation due to insufficient earnings or having performed services for an employer that were not covered under a State unemployment compensation law.	Self-attestation
2. Dislocation from Facility Closure / Substantial	2.1 An individual who has been terminated or laid off, or has received a notice of termination or layoff, from employment as a result of any permanent closure of, or any substantial layoff at, a plant, facility, or enterprise as defined in SWC Policy WS816 R4, Attachment A – WorkSource Services & Program Eligibility Handbook; OR	Self-attestation Note: documentation of substantial layoff must include percentage or number of employees laid off within 30 days of dislocation.
Layoff	An individual who is employed at a facility at which the employer has made a general announcement that such facility will close within 180 days.	
3. Self-employed Dislocation	An individual who was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters as defined in SWC Policy WS816 R4, Attachment A – WorkSource Services & Program Eligibility Handbook.	Self-attestation
4. Displaced	4.1 An individual who has been dependent on the income of another family member and is no longer supported by the income of that family member and is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment; OR	Self-attestation
Homemaker	4.2 Is the dependent spouse of a member of the Armed Forces on active duty and whose family income is significantly reduced because of a deployment, a call or order to active duty, or a service-connected death or disability of the member and is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.	Self-attestation

5. Dislocated Military Service Member	A non-retiree military service member who was discharged or released from service under other than dishonorable or has received a notice of military separation as defined in SWC Policy WS816 R4, Attachment A – WorkSource Services & Program Eligibility Handbook.	Self-attestation
6. Spouse of Military Service Member	6.1 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; OR	Self-attestation
Wellber	6.2 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.	Self-attestation
National Dislocated Worker Grant Only	Social Security Number assigned to the applicant.	SSN Card Other Federal or State ID with SSN

D. Other Required Registration Documents

Requirement	Source Documentation
Nondiscrimination – Notice of Rights & Complaint Process - Equal Opportunity is the law Form	Documentation that participant has been notified of rights and process
2. Summary of Rights and Complaint and Grievance Procedures Form	Documentation that participant has been notified of rights and process
Registration Signatures from Applicant and WorkSource Staff Completing Registration	Signature and signature date (electronic or physical)

F. Service Need Assessment (choose one or more service types)

	Service Type	Criteria	Source Documentation
1.	Individualized Career Services	An individual who is in need of individualized career services to obtain or retain employment.	Case notes
2.	Training Services	An individual who: a. Is unlikely or unable to obtain or retain employment that leads to economic self-sufficiency or wages comparable to or higher than wages from previous employment through career services alone; b. Is in need of training services to obtain or retain employment that leads to economic self-sufficiency or wages comparable to or higher than wages from previous employment; c. Has the skills and qualifications necessary to successfully participate in the selected program of training services (including work-based learning such as OJT); and d. Is unable to obtain grant assistance from other sources to pay for the cost of training.	Case notes
3.	Supportive Services	An individual who: a. Needs supportive services to participate in career or training activities or to gain or retain employment, and b. Is unable to obtain supportive services through other programs providing such services.	Case notes