



Policy Number 6 Attachment C
Issued: October 19, 2017
Revised:
By: Wyoming Workforce Development Council

Youth Participant File Monitoring Checklist

Workforce Center	Participant Name (First and Last Name)
Case Manager	Participant W@W ID Number
Type of Youth Program	Enrollment Date
Reviewed by (First and Last Name)	Date of Birth

Please indicate (yes, no or n/a) if meeting the criteria (below).

A. ELIGIBILITY

	Yes	No	N/A	Comments
1. All information contained on the WIOA application has been entered into Wyoming at Work (W@W) system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. WIOA application is signed and dated prior to participation by the case manager, the participant and the participant's parent or legal guardian, if under 18.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The latest EO/Nondiscrimination/Grievance Policy and EO is the Law Supplement is provided to the participant. Signed form is in the file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Approval Guide is completed in case notes, printed, signed and dated by the case manager on or before review committee signature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Approval Guide is completed, signed and dated by the review committee on or before participation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Date of Certification:
6. If changes are made in the application after participation, appropriate documentation is in the file and justification is in the case notes is in the file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The Release of Information Form has been signed by the participant and/or parent or guardian, and Photo Release if necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. The following Eligibility documents are in the file:				
A. Social Security Number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Right-to-Work (refer to updated I-9 form)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

D. Selective service registration or documentation for selective service exemption (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
E. Documentation in W@W and case notes on priority populations including priority of service for veterans or covered spouse (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. If the participant turns 18 while enrolled, is the participant registered in selective service within 30 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. All barriers noted have been recorded in W@W for WIOA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. At least one of the barriers has verifying documentation for WIOA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Low Income – Economically Disadvantaged Categories:				
A. Youth received, or is a member of a family which receives cash payments under a federal, state, or income-based public assistance program (POWER);	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. The youth receives an income, or is a member of a family that received a total family income for the six-month period prior to WIOA registration that (in relation to family size) does not exceed the WIOA Low Income Table; <ul style="list-style-type: none"> • Income verified • Family size verified 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. The youth is receiving SNAP or was determined eligible to receive food stamps in the six month period prior to program application;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. The youth qualifies as homeless;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
E. The youth is a publicly support foster child whose payments are made by state or local government;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
F. The youth is an individual with a disability whose own income for the last six months meets the WIOA low-income guidelines, regardless of the income level of his/her family; only if youth does meet any other low income criteria.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
G. A youth is low-income if he or she receives or is eligible to receive a free or reduced price lunch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. If the youth is under the 5% window (does not meet low income requirement), the 5% Eligibility Exception Request Waiver has been submitted and approved by DWS with a supporting case note in W@W.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Verification for School Classification:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

A. In-School Youth Verification with school records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Out-of-School Youth Verification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

B. ASSESSMENT

	Yes	No	N/A	Comments
1. Assessment has been conducted for the following areas.				
A. Literacy and numeracy skill level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Occupational skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Prior work experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Employability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
E. Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
F. Aptitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
G. Supportive service needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Literacy and numeracy test was conducted for all out of school youth prior to participation using TABE.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Pre- and post-tests of literacy and numeracy skills were conducted using the same testing instrument and results entered in W@W in the assessment tab with verification in case file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. An original copy of the pre and post-test answer sheet, that include specifics such as test level or form type used and test date are maintained in the case file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. All measureable skill gains (MSG) must be entered in W@W with a minimum one per program year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

C. INDIVIDUAL SERVICE STRATEGY (ISS)

	Yes	No	N/A	Comments
1. Objective Assessment has been developed, printed, and signed by participant and case manager on the date of participation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. W@W activity code 412 is entered on participation date.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Individual Service Strategy (ISS) has been developed on or after the date of participation (Paper ISS kept in File). Any major updates to the ISS requires reprinting and new signatures from the participant and case manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. W@W activity code 413 is entered on the date the ISS is created, printed and signed. Any major updates to the ISS are documented using activity code 413 in W@W with a case note explaining the update(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A. Background information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

B. Employment History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Barriers to employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Assessment results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
E. Training and supportive services plan/goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

D. CASE MANAGEMENT

	Yes	No	N/A	Comments
1. Every case management service has an attached activity code entered in W@W.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Every activity code has an attached case note in W@W.				
3. Case notes coincide with service recorded in W@W. No code should be used if there is no actual contact with the participant and no actual service was provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. If there is a 90-day gap in services, the participant is exited on the date of their last recorded activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

E. TRAINING SERVICES

	Yes	No	N/A	Comments
1. Participant is receiving, has received or should be receiving training services. If "No", skip this section.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Training service has been justified in W@W case notes, job research worksheet has been completed by participant, and training has been approved in W@W by center manager. Work Readiness Assessment/ISS supports training as an option.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Appropriate training code has been recorded in W@W.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Training agreements have been printed and signed by participant, case manager and center manager prior to the start of training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Contact is made and services are provided to participant every 30 days and documented in W@W using activity code with an attached case note.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. If the participant was or has been engaged in Work Based Learning the following documents are in the file.				
A. Work Experience Contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Timesheets approved by site supervisor and signed by participant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Ensure employer enrolled in Workers Compensation or similar insurance coverage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Ensure completion of Employer Worksite Evaluation form. An employer worksite evaluation must be completed by case manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

and maintained in the file for each work experience contract.				
E. Ensure completion of Trainee Worksite Evaluation form. A trainee worksite evaluation must be completed by case manager and maintained in the case file for each work experience contract.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Wages paid are in compliance with the Federal or Wyoming State minimum hourly wage, whichever is higher.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Any changes on timesheets are initialed by the supervisor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Activity code for the type of training is entered into W@W by appropriate activity code.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Measurable Skill Gains are documented in W@W and must be verified with the Pre and Post Work-Based Learning Plan and case notes for each program year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

F. INCENTIVES

	Yes	No	N/A	Comments
1. Justification for receiving an incentive should be linked to a goal on the ISS and participant should only receive an incentive after successfully completing a milestone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Incentive must be in check, gift card, etc. (no cash)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The Youth must acknowledge the receipt of incentive payment and formal acknowledgement must be maintained in the participant file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Verification of benchmark or achievement for incentive paid is maintained in the case file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

G. SUPPORTIVE SERVICES

	Yes	No	N/A	Comments
1. Has the participant received supportive services? If not, skip this section.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. If supportive services are provided, the IEP supports the type of supportive service given to address a barrier to employment. Justification for services is also in the case file.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Supportive Services provided do not exceed the thresholds and limits in the procedures manual unless there is an approved waiver in the case file with appropriate case note.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

H. OUTCOMES

	Yes	No	N/A	Comments
1. Closure information has been recorded in W@W				

A. Employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Post Secondary Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Advanced Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Outcome has been verified.				
A. Employment: W@W activity with case note.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Education: copy of high school diploma, GED or official transcript verifying completion that includes required information for data validation. Entered credential and MSG into W@W.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Advance training: copy of certificate of attainment verifying completion of occupational/technical skills, or pre-apprenticeship skills/trades training. Entered credential and MSG into W@W.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Neutral Exits. Documentation in file. W@W outcome form completed.				
A. Institutionalized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Health/medical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Deceased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Reservist called to active duty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
E. Family care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
F. Relocated to mandated program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

I. CLOSURE

	Yes	No	N/A	Comments
1. Closure has been completed in W@W.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Closure date is not before participant enters employment or post-secondary education.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

J. FOLLOW-UP (AFTER EXIT) (IF APPLICABLE)

	Yes	No	N/A	Comments
1. Follow-up services are provided and documented every quarter after entering WIOA case closure. F Code and corresponding case note must be entered on the date of service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Quarterly follow-up is completed in W@W for 12 months after exit when needed for supplemental employment or post-secondary education data.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

3. If participant could not be contacted, all attempts made have been documented in W@W case notes with corresponding activity codes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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