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Orange County Workforce Development Board
**WIOA Documentation Requirements Policy**

Effective:
August 26, 2026

SUBJECT:
Information Notice No. 26-OCWDB-10
Supersedes Information Notice No. 24-OCWDB-13

APPROVED:
Nancy Cook, Executive Director
Orange County Workforce Development Board
Initial: NC

## PURPOSE

This policy provides guidance regarding acceptable documentation for validating data elements and determining eligibility. It ensures that the data entered into CalJOBS is reliable and provides an accurate report on performance for the Workforce Innovation and Opportunity Act (WIOA) Adult, Dislocated Worker, and Youth programs.

## EFFECTIVE DATE

This policy is effective on the date of issuance.

## REFERENCES

- WIOA (Public Law 113-128)
- Training and Employment Guidance Letter (TEGL) No. 23-19: Change 3: Guidance for Validating Required Performance Data Submitted by Grant Recipients of U.S. Department of Labor Workforce Programs
- TEGL 10-23 Change 3: Work Authorization Verification in Grant Programs Administered by the Employment and Training Administration
- TEGL 10-09: Priority of Service for Veterans and Eligible Spouses
- 2 Code of Federal Regulations (CFR) 200.334 Record Retention Requirements
- Workforce Services Directive (WSD) 22-15 WIOA Data Validation Source Documentation
- WSD 24-04: WIOA Title I Eligibility Technical Assistance Guide
- WSD 24-06: Adult Program Priority of Service
- WSD 18-03: Pathways to Services, Referral, and Enrollment
- WSD 17-07: Youth Program Requirements
- WSD 16-18: Selective Service Requirements

## BACKGROUND

Service Providers are responsible for collecting and retaining adequate documentation to verify WIOA eligibility, track services, and ensure accurate performance reporting to the Department of Labor (DOL).

## DEFINITIONS

Registration – The process of collecting information to support a determination of eligibility for the WIOA Adult, Dislocated Worker, and Youth programs. This information may be collected through methods, including electronic data transfer, personal interview, or an individual's application.

Source Document – Physical or electronic document(s) or record(s) that supports the data captured in CalJOBS and reported to DOL.

Data Element – A standardized unit of information with a unique meaning that is captured in CalJOBS and reported to the DOL.

Data Element Validation (DEV) – The process of validating source documentation against data reported in CalJOBS, and ultimately, to the DOL.

Data Validation – Data validation is the series of internal controls or quality assurance techniques established to verify the accuracy, validity, and reliability of data.

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## POLICY

Service providers are required to determine eligibility by reviewing source documents and ensuring the appropriate source documentation is collected for all relevant data elements entered into CalJOBS, as stated within this policy.

**Allowable Data Source Documentation for Title I WIOA Programs**

Each program that undergoes data validation has specific data elements that must be verified against source documentation. For example, an individual's date of birth (data element) may be validated using a valid California driver's license (source document). The WIOA Title I – Source Documentation List outlines the appropriate source documentation for each data element and can be used to identify source documentation that is allowable to validate data. For additional guidance and definitions regarding the data elements, refer to WSD 22-15.

While the collection of source documentation for data validation often takes place at the same time as the determination of an individual's program eligibility, these actions serve different purposes. Eligibility determination confirms that an individual meets the requirements of a program before becoming a participant in the program, whereas DEV validates that the data elements entered in CalJOBS are accurate.

Eligibility documentation must be collected and entered into CalJOBS for each enrolled program participant. When applicable, the following data elements must be verified and made available for review:

- Income Eligibility
- Veteran Status
- Dislocated Worker Eligibility
- Barriers

For more information regarding eligibility requirements, refer to the OCWDB Adult and Dislocated Worker Program Eligibility Policy and the OCWDB Youth Program Participant Eligibility Requirements Policy.

**Additional Methods of Allowable Source Documentation**

Below are additional types of Source Documentation that Service Providers may use, if allowable per the WIOA Source Documentation List, to verify eligibility or data element.

Telephone or Electronic Communication - In instances where telephone or electronic communication is acceptable and used, the case file must contain the name of the agency representative, the date of the conversation, and the result of verification. Service Providers must use the WIOA Telephone Eligibility Verification Form to document telephone communication. If telephone communication is used to verify dislocation, the case file must contain the date and reason for termination, and a recall date, if applicable.

Self-Attestation - Self-Attestation occurs when a participant declares their status for a particular data element and signs and dates a form acknowledging the status. The key elements for self-attestation are:

- The participant identifies their status for permitted elements.
- The participant signs and dates the Self-Attestation Form.

Note that self-attestation is not to be used as the primary method of gathering documentation to verify data elements. Self-attestation as a documentation source is only to be used when the preferred options of paper documentation or third-party corroboration are not available. The self-attestation is not a blanket verification for all eligibility components. Within the self-attestation, the individual must document which specific elements of eligibility they are attesting (e.g., authorization to work, proof of termination or layoff, etc.) and how they meet the eligibility criteria.

Case Notes - Case notes refer to statements made in CalJOBS by the case manager and identify, at a minimum, a participant's status for a specific data element or eligibility criteria, the date the information was obtained and the case manager who obtained the information. The case note must provide a documented trail on how the source of information was verified. All documents pertinent to participant activities should be scanned and added as supplemental to support the data element.

Cross-Match - A cross-match requires the Service Provider staff to acquire detailed supporting evidence for applicable data elements, using another database (e.g., public assistance records). An indicator or presence of a social security number in a database alone is not sufficient evidence to document WIOA eligibility; additional details such as the date of the eligibility determination, date of participation, and services rendered should be obtained from the cross-match to confirm the accuracy and currency of the information. The WIOA Source Documentation List identifies the allowable databases to cross-match.

Electronic Records - Electronic records are participant records created, stored, or transferred in a form that can only be processed on a computer and maintained in CalJOBS. However, an indicator such as a checkmark or date on a computer screen is not considered acceptable source documentation.

**Electronic and Physical Files**

Service Providers are required to ensure that all participant eligibility documentation is scanned, uploaded, and verified in CalJOBS immediately upon availability. Internal controls must be implemented to visually inspect all scanned documents for completeness, clarity, and legibility prior to uploading into CalJOBS. Documents must be properly aligned, free from errors, and remain unaltered once finalized. Service Providers must ensure documents are kept current throughout the participant's program involvement, and any new or updated documents must be promptly uploaded into CalJOBS to ensure accurate tracking of eligibility and participation.

Physical and electronic copies must be retained for a minimum of three (3) years after the final closeout expenditure and program report for the fiscal and program period, unless extended upon request. To ensure compliance, documents must be readily available for program and fiscal monitors, and auditors during scheduled or unscheduled reviews.

**Electronic Signatures**

Signatures may be captured within CalJOBS or using electronic software such as Adobe Sign or DocuSign. Service Providers are encouraged to use electronic signatures for participant convenience.

## ACTION

Bring this policy to the attention of all relevant staff, subrecipients, and partners to ensure full understanding and compliance with federal and state audit resolution requirements.

## INQUIRIES

If you have any questions regarding this policy, please email info@ocworkforcesolutions.com.

## ATTACHMENTS

Attachment I: WIOA Title I - Source Documentation List
Attachment II: WIOA Telephone Eligibility Verification Form
Attachment III: Self-Attestation Verification Form

# WIOA Title I - Source Documentation List

The following tables identify the *Workforce Innovation and Opportunity Act* (WIOA) source documentation options for the Title I Adult, Dislocated Worker, and Youth programs as listed in WSD 22-15, Attachments 1 and 2. Each table includes the data element, the program that is required to collect and maintain source documentation for that data element, the data element entry location and prompt in CalJOBS$^{SM}$ (if applicable), and the allowable types of source documents for each data element.

At least one of the listed allowable source documents is required to be captured for each applicable data element.

The tables are split into three groups:

1. Source documentation is required to be collected and maintained for that data element
2. A signed program application is required as source documentation for that data element
3. No additional action needs to be taken by program staff for that data element

Note – Data Element Validation (DEV) is not the same as eligibility verification. While DEV may verify, in CalJOBS, the existence of acceptable documentation for certain eligibility criteria and vice versa, DEV does not verify participant eligibility. For more information on participant eligibility, refer to the Allowable Eligibility Documentation attachments (Attachment I, Attachment II and Attachment III), which can be found within this policy.

**Table 1**: The following table includes the data elements that require specific source documentation to support the data being entered into CalJOBS.

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **200** | **Date of Birth** | Yes | Yes | Yes | Demographics tab of applicable program application | Date of Birth | • Driver's License<br>• Baptismal Record<br>• Birth Certificate (United States [US] or Non-US Issued)<br>• DD-214<br>• Report of Transfer or Discharge Paper<br>• Federal, State, Local or Tribal Identification Card<br>• Matricula Consular from Mexico<br>• Passport (US or Non-US Issued)<br>• Hospital Record of Birth (US or Non-US Issued)<br>• Public Assistance/Social Service Records<br>• School Records or identification (ID) Cards (US or Non-US Issued)<br>• Work Permit<br>• Family Bible<br>• Justice System Records<br>• Selective Service Registration<br>• Signed Letter from a Parent/Guardian |
| **301** | **Eligible Veteran or Other Eligible Person** | Yes | Yes | No | Veteran tab of applicable program application | Veteran Status<br>*This is system generated based on responses to questions on the Veteran tab of the program application.* | • DD-214<br>• A Letter from the Veterans' Administration<br>• NGB-22 documenting Title 10 Federal Active Duty Service<br>• Self-Attestation*<br><br>*If no financial commitment other than staff resources is provided, self-attestation may be used. |
| **401** | **UC Eligible Status** | Yes | Yes | No | Employment tab of applicable program application | UC Eligibility Status<br>AND<br>Claimant was referred by | • Reemployment Services and Eligibility Assessment (RESEA) CalJOBS Events Calendar Record*<br>• Personalized Job Search Assistance Workshop (PJSA) CalJOBS Events Calendar Record*<br>• For Claimant, Exhaustee, or Exempt from Work Search: Documentation from Unemployment Insurance (UI) or Self-Attestation<br><br>**CalJOBS Events Calendar is populated via electronic record from UI system.* |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **410** | **Date of Actual Dislocation** | Yes | Yes | No | Employment tab of applicable program application | Actual Date of Layoff/ Termination | • Verification from Employer<br>• Rapid Response List<br>• Notice of Layoff<br>• Public Announcement with documentation from a UI data source (see Workforce Services Directive [WSD] 16-08, *Release of Confidential UI Information,* for acceptable sources)<br>• Self-Attestation |
| **411** | **Most Recent Date of Qualifying Separation** | No | No | No | Employment tab of applicable program application | Most Recent Date of Qualifying Separation | • Verification from Employer (includes SF 50)<br>• Rapid Response List<br>• Notice of Layoff<br>• Public Announcement with Follow-Up Cross-Match with UI data source (see WSD16-08, Release of Confidential UI Information, for acceptable sources)<br>• Self-Attestation |
| **600** | **Temporary Assistance to Needy Families (TANF)** | Yes* | Yes* | No | Public Assistance tab of applicable program application | TANF recipient | • TANF Eligibility Verification<br>• TANF Period of Benefit Receipt Verification<br>• Referral Transmittal from TANF<br><br>*Only required if participant received Individualized Career or Training Services. |
| **601** | **Exhausting TANF Within 2 Years** | Yes* | Yes* | No | Barriers tab of program application | Within 2 years of exhausting TANF lifetime eligibility | • TANF Eligibility Verification<br>• TANF Period of Benefit Receipt Verification<br>• Referral Transmittal from TANF<br><br>*Only required if participant received Individualized Career or Training Services. |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **602** | **Supplemental Security Income (SSI) / Social Security Disability Insurance (SSDI)** | Yes* | Yes* | No | Public Assistance tab of applicable program application | Supplemental Security Income (SSI) recipient<br>AND/OR<br>Social Security Disability Insurance (SSDI) recipient<br>AND/OR<br>Ticket-to-Work Holder issued by Social Security Administration | • SSI/SSDI Receipt of Benefits Verification<br>• Referral Transmittal from Social Security Administration (SSA)<br>• SSI/SSDI Eligibility Verification<br><br>*Only required if participant received Individualized Career or Training Services. |
| **603** | **Supplemental Nutrition Assistance Program (SNAP)** | Yes* | Yes* | No | Public Assistance tab of applicable program application | Supplemental Nutrition Assistance Program (SNAP) Recipient | • SNAP Eligibility Verification<br>• Documentation of Food Stamp Benefit Receipt<br>• Referral Transmittal from SNAP<br><br>*Only required if participant received Individualized Career or Training Services. |
| **604** | **Other Public Assistance Recipient** | Yes | Yes | No | Public Assistance tab of applicable program application | General Assistance (GA) recipient<br>AND/OR<br>Refugee Cash Assistance (RCA) recipient | • Copy of Authorization to Receive Cash Public Assistance<br>• Copy of Public Assistance Check<br>• Medical Card Showing Cash Grant Status<br>• Public Assistance Eligibility Verification |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **802** | **Low Income Status at Program Entry**<br><br>**If Annualized Family Income is chosen, must calculate last 6 months of income and multiply by 2 | Yes* | Yes* | Yes | Public Assistance, and Household and Income tabs of applicable program application | Any of the following:<br>• Temporary Assistance for Needy Families (TANF) recipient<br>• Supplemental Security Income (SSI) recipient<br>• General Assistance (GA) recipient<br>• Refugee Cash Assistance (RCA) recipient<br>• Foster Child (State or local payments are made for applicant)<br>• Youth currently receives, or is eligible to receive, free or reduced lunch<br>• Youth Currently living in high-poverty area<br>• Homeless<br>• Runaway<br>**OR**<br>• Family Size & Annual Family Income | • Award Letter From Veteran's Administration<br>• Pay Stubs<br>• Compensation Award Letter<br>• Court Award Letter<br>• Pension Statement<br>• Employer Statement/Contact<br>• Family or Business Financial Records<br>• Housing Authority Verification<br>• Quarterly Estimated Tax for Self-Employed Persons<br>• Social Security Benefits<br>• UI Claim Documents<br>• Copy of Authorization to Receive Cash Public Assistance<br>• Copy of Public Assistance Check<br>• Public Assistance Eligibility Verification<br>• For Youth Participant Only: Case Note Documenting Living in a High Poverty Area<br>• Self-Attestation<br><br>*Only required if participant received Individualized Career or Training Services. |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **804** | **Basic Skills Deficient (BSD)/Low Levels of Literacy at Program Entry** | Yes* | Yes* | Yes | Barriers tab of applicable program application | Basic Skills Deficient/Low Levels of Literacy | • Case Note<br>• Assessment Test Results<br>• Applicable Records from Education Institution (transcripts, academic assessments, or other school documentation)<br><br>*Only required if participant received Individualized Career or Training Services.<br><br>***If individual is an English Language Learner (ELL) and BSD, then signed application is sufficient. However, if participant is BSD and NOT ELL, then a case note and/or assessment is needed.*** |
| **907** | **Recipient of Incumbent Worker Training (IWT)** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Actual Begin Date | • Signed IWT agreement<br>• Case Note |
| **908** | **Rapid Response** | No | Yes | No | Employment tab of applicable program application | Attended a Rapid Response Orientation | • Rapid Response List<br>• Case Note<br>• Self-Attestation |
| **923** | **Other Reasons for Exit** | Yes | Yes | Yes | Exit / Outcome under applicable program application | Exit Reason | • Case Note<br>• Withdrawal form with explanation<br>• Information from institution or facility<br><br>Note: Reason for Exit needs to be documented and must be in alignment with the definition of Exclusionary Exit in WSD 22-01, Performance Guidance. |
| **1301** | **Eligible Training Provider - Name - Training Service #1 (WIOA)** | Yes | Yes | No | Service Provider Tab of Activity Enrollment | Provider | • Vendor Training Records (including attendance sheets)<br>• Signed Training Contract<br>• ITA |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1302** | **Date Entered Training #1** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date: | • Vendor Training Records (including attendance sheets)<br>• Case Note<br>• ITA |
| **1306** | **Occupational Skills Training Code #1** | Yes | Yes | Yes | Service Provider Tab of Activity Enrollment | Occupational Training Code | • Cross-Match to CalJOBS Provider Program Information<br>• Case Note<br>• Signed Individual Employment Plan or Training Plan<br>• Signed Training Contract<br>• ITA |
| **1307** | **Training Completed #1** | Yes | Yes | Yes | Closure Information of Activity Enrollment | Completion Code | • Vendor Training Records (including attendance sheets or certificate of completion)<br>• Case Note |
| **1308** | **Date Completed, or Withdrew from, Training #1** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date | • Vendor Training Records (including attendance sheets or certificate of completion)<br>• Case Note |
| **1309** | **Date Entered Training #2** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date: | • Vendor Training Records (including attendance sheets)<br>• Case Note<br>• ITA |
| **1311** | **Occupational Skills Training Code #2** | Yes | Yes | Yes | Service Provider Tab of Activity Enrollment | Occupational Training Code | • Cross-Match to CalJOBS Provider Program Information<br>• Case Note<br>• Signed Individual Employment Plan or Training Plan<br>• Signed Training Contract<br>• ITA |
| **1312** | **Training Completed #2** | Yes | Yes | Yes | Closure Information of Activity Enrollment | Completion Code | • Vendor Training Records (including attendance sheets or certificate of completion)<br>• Case Note |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1313** | **Date Completed, or Withdrew from, Training #2** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date | • Vendor Training Records (including attendance sheets or certificate of completion)<br>• Case Note |
| **1314** | **Date Entered Training #3** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date: | • Vendor Training Records (including attendance sheets)<br>• Case Note<br>• ITA |
| **1316** | **Occupational Skills Training Code #3** | Yes | Yes | Yes | Service Provider Tab of Activity Enrollment | Occupational Training Code | • Cross-Match to CalJOBS Provider Program Information<br>• Case Note<br>• Signed Individual Employment Plan or Training Plan<br>• Signed Training Contract<br>• ITA |
| **1317** | **Training Completed #3** | Yes | Yes | Yes | Closure Information of Activity Enrollment | Completion Code | • Vendor Training Records (including attendance sheets or certificate of completion)<br>• Case Note |
| **1318** | **Date Completed, or Withdrew from, Training #3** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date | • Vendor Training Records (including attendance sheets or certificate of completion)<br>• Case Note |
| **1319** | **Established ITA** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Activity | • Case Note<br>• ITA Approval, Allocation or Activation Records |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1332** | **Participated in Postsecondary Education During Program Participation** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date: | • School records<br>• Transcript or report card<br>• Case Note |
| **1401** | **Enrolled in Secondary Education Program** | Yes | Yes | Yes | Education tab of applicable program application<br><br>OR<br><br>Activities / Enrollments / Services under applicable program application<br><br>OR<br><br>Closure under applicable program application | School Status<br><br>OR<br><br>Activity<br><br>OR<br><br>School Status at Exit | • Enrollment or School records<br>• Transcript or report card<br>• Case Note |
| **1406** | **Date Enrolled in Post Exit Education or Training Program Leading to a Recognized Postsecondary Credential** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application<br><br>Follow-ups under applicable program application | Actual End Date – ***If no end date then use the begin date*** of Education Placement | • Enrollment or School records<br>• Transcript or report card<br>• Case Note<br>• Follow-up survey from program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1600** | **Employed in 1st Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |
| **1601** | **Type of Employment Match 1st Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1602** | **Employed in 2nd Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |
| **1603** | **Type of Employment Match 2nd Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1604** | **Employed in 3rd Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |
| **1605** | **Type of Employment Match 3rd Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1606** | **Employed in 4th Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |
| **1607** | **Type of Employment Match 4th Quarter After Exit Quarter** | Yes | Yes | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Worked in Quarter? | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1608** | **Employment Related to Training (2nd Quarter After Exit)** | Yes | Yes | Yes | Add Employment under applicable program application<br><br>OR<br><br>Follow-ups under applicable program application | Is this considered Training Related Employment?<br><br>OR<br><br>Is this considered Training Related Employment? | • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1610** | **Occupational Code (if available)** | Yes | Yes | No | Add Employment under applicable program application<br><br>OR<br><br>Follow-ups under applicable program application | Occupation<br><br>OR<br><br>Occupation | • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1611** | **Entered Non-Traditional Employment** | Yes | Yes | No | Add Employment under applicable program application<br>Follow-ups under applicable program application | Is this considered Non-Traditional Employment? | • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1612** | **Occupational Code of Employment 2nd Quarter After Exit Quarter (If available)** | Yes | Yes | No | Add Employment under applicable program application<br>Follow-ups under applicable program application | Occupation | • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1613** | **Occupational Code of Employment 4th Quarter After Exit Quarter (If available)** | Yes | Yes | No | Add Employment under applicable program application<br><br>Follow-ups under applicable program application | Occupation | • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1614** | **Industry Code of Employment 1st Quarter After Exit Quarter** | Yes | Yes | No | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Industry NAICS Code | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1615** | **Industry Code of Employment 2nd Quarter After Exit Quarter** | Yes | Yes | No | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Industry NAICS Code | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1616** | **Industry Code of Employment 3rd Quarter After Exit Quarter** | Yes | Yes | No | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Industry NAICS Code | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1617** | **Industry Code of Employment 4th Quarter After Exit Quarter** | Yes | Yes | No | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Industry NAICS Code | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1703** | **Wages 1st Quarter After Exit Quarter** | Yes | Yes | Yes | Add Employment under applicable program application<br><br>Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Hours Worked per Week<br><br>Hourly Wage | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1704** | **Wages 2nd Quarter After Exit Quarter** | Yes | Yes | Yes | Add Employment under applicable program application<br>Follow-ups under applicable program application<br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Hours Worked per Week<br>Hourly Wage | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1705** | **Wages 3rd Quarter After Exit Quarter** | Yes | Yes | Yes | Add Employment under applicable program application<br>Follow-ups under applicable program application<br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Hours Worked per Week<br>Hourly Wage | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1706** | **Wages 4th Quarter After Exit Quarter** | Yes | Yes | Yes | Add Employment under applicable program application<br>Follow-ups under applicable program application<br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Hours Worked per Week<br>Hourly Wage | If utilizing base wage information, no additional source documentation is required. If utilizing supplemental information, use one of the following:<br>• Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16)<br>• Income Tax Records, W-2 Form, or Other Records form the State Department of Revenue or Taxation<br>• Quarterly Tax Payment Forms (such as IRS Form 941)<br>• Document from employer on company letterhead attesting to an individual's employment status and earnings<br>• Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants<br>• Case Notes<br>• Follow-up survey form program participants |
| **1800** | **Type of Recognized Credential** | Yes | Yes | Yes | Credentials under applicable program application | Credential Received | • Copy of credential<br>• Copy of school record<br>• Signed follow-up survey from program participants<br>• Case Note documenting information obtained from education or training provider |
| **1801** | **Date Attained Recognized Credential** | Yes | Yes | Yes | Credentials under applicable program application | Date Credential Received | • Copy of credential<br>• Copy of school record<br>• Signed follow-up survey from program participants<br>• Case Note documenting information obtained from education or training provider |
| **1802** | **Type of Recognized Credential #2** | Yes | Yes | Yes | Credentials under applicable program application | Credential Received | • Copy of credential<br>• Copy of school record<br>• Signed follow-up survey from program participants<br>• Case Note documenting information obtained from education or training provider |
| **1803** | **Date Attained Recognized Credential #2** | Yes | Yes | Yes | Credentials under applicable program application | Date Credential Received | • Copy of credential<br>• Copy of school record<br>• Signed follow-up survey from program participants<br>• Case Note documenting information obtained from education or training provider |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1804** | **Type of Recognized Credential #3** | Yes | Yes | Yes | Credentials under applicable program application | Credential Received | • Copy of credential<br>• Copy of school record<br>• Signed follow-up survey from program participants<br>• Case Note documenting information obtained from education or training provider |
| **1805** | **Date Attained Recognized Credential #3** | Yes | Yes | Yes | Credentials under applicable program application | Date Credential Received | • Copy of credential<br>• Copy of school record<br>• Signed follow-up survey from program participants<br>• Case Note documenting information obtained from education or training provider |
| **1806** | **Date of Most Recent Measurable Skill Gains: Educational Functioning Level (EFL)** | Yes | Yes | Yes | Educational Functioning Level for Measurable Skills Gain under applicable program application<br><br>Measurable Skills Gain under applicable program application | Date of Post Test<br><br>Date Skills Attained | • Pre and post-test results measuring EFL gain<br>• Adult High School transcript showing EFL gain through the awarding of credits or Carnegie units<br>• Postsecondary education or training enrollment determined through data match, survey documentation, or program notes |
| **1807** | **Date of Most Recent Measurable Skill Gains: Postsecondary Transcript/Report Card** | Yes | Yes | Yes | Measurable Skills Gain under applicable program application | Date Skills Attained | • Transcript<br>• Report Card |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1808** | **Date of Most Recent Measurable Skill Gains: Secondary Transcript/Report Card** | Yes | Yes | Yes | Measurable Skills Gain under applicable program application | Date Skills Attained | • Transcript<br>• Report Card |
| **1809** | **Date of Most Recent Measurable Skill Gains: Training Milestone** | Yes | Yes | Yes | Measurable Skills Gain under applicable program application | Date Skills Attained | • Documentation of a skill gained through On-the-job Training or Registered Apprenticeship<br>• Contract and/or evaluation from employer or training provider documenting a skill gain<br>• Progress report from employer documenting a skill gain |
| **1810** | **Date of Most Recent Measurable Skill Gains: Skills Progression** | Yes | Yes | Yes | Measurable Skills Gain under applicable program application | Date Skills Attained | • Results of knowledge-based exam or certiciation of completion<br>• Documentation demonstrating progress in attaining technical or occupational skills through an exam or benchmark attainment<br>• Documentation from training provider or employer<br>• Copy of a credential that is required for a particular occupation and only is earned after the passage of an exam |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1811** | **Date Enrolled During Program Participation in an Education or Training Program Leading to a Recognized Postsecondary Credential or Employment** | Yes | Yes | Yes | Education tab of applicable program application<br><br>OR<br><br>Activities / Enrollments / Services under applicable program application<br><br>OR<br><br>Closure Information of Activity Enrollment under applicable program application | School Status<br><br>Receiving Services from YouthBuild<br><br>Receiving services from Job Corps<br><br>Receiving Services from Vocational Education (Carl Perkins)<br><br>OR<br><br>Actual Begin/End Date<br><br>OR<br><br>School Status | • Case Note<br>• School records<br>• Transcript or report card |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1813** | **Date Completed, During Program Participation, an Education or Training Program Leading to a Recognized Postsecondary Credential or Employment** | Yes | Yes | Yes | Closure under applicable program application<br><br>Activities / Enrollments / Services under applicable program application<br><br>Credential under applicable program application | School Status at Exit<br><br>Actual End Date<br><br>Date Credential Received | • Applicable Records from Education Institution (diploma, transcripts, report card, school documentation, credential, degree, or an HSE certification, such as a GED®or HiSET® certificate)<br>• Signed File Documentation with Information Obtained from Education or Training Provider<br>• Case Note<br>• Self-Attestation |
| **1900** | **Youth 2nd Quarter Placement (Title I)** | No | No | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Education in Quarter<br>Worked in Quarter | • School records<br>• Transcript or report card<br>• Vendor/training provider training documentation<br>• Case Note |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1901** | **Youth 4th Quarter Placement (Title I)** | No | No | Yes | Follow-ups under applicable program application<br><br>*Note: If UI or base wage data is used, the information will be not be visible in CalJOBS.* | Education in Quarter<br>Worked in Quarter | • School records<br>• Transcript or report card<br>• Vendor/training provider training documentation<br>• Case Note |

**Table 2**: The following table includes the data elements that require a signed program application to support the data being entered into CalJOBS.

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **202** | **Individual with a Disability** | Yes | Yes | Yes | Demographics tab of applicable program application | Considered to have a disability | • Signed Program Application |
| **402** | **Long-Term Unemployed at Program Entry** | Yes | Yes | No | Employment tab of applicable program application | Long Term unemployed (27 or more consecutive weeks) | • Signed Program Application |
| **409** | **School Status at Program Entry** | Yes | Yes | Yes | Education tab of applicable program application | School Status | • Signed Program Application |
| **701** | **Pregnant or Parenting Youth** | No | No | Yes | Barriers tab of applicable program application | Pregnant/ Parenting Youth | • Signed Program Application |
| **702** | **Youth Who Needs Additional Assistance** | No | No | Yes | Barriers tab of applicable program application | Youth Requires Additional Assistance to complete an educational program or to secure/hold employment | • Signed Program Application |
| **704** | **Foster Care Youth Status at Program Entry** | Yes | Yes | Yes | Barriers tab of applicable program application | Foster Care Status | • Signed Program Application |
| **800** | **Homeless participant, Homeless Children and Youths, or Runaway Youth at Program Entry** | Yes | Yes | Yes | Barriers and Veteran tab of applicable program application | Homeless<br>AND/OR<br>Runaway<br>AND/OR<br>Homeless Veteran | • Signed Program Application |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **801** | **Ex-Offender Status at Program Entry** | Yes | Yes | Yes | Barriers tab of applicable program application | Ex-Offender | • Signed Program Application |
| **803** | **English Language Learner at Program Entry** | Yes | Yes | Yes | Barriers tab of applicable program application | English Language Learner | • Signed Program Application |
| **806** | **Single Parent at Program Entry** | Yes | Yes | Yes | Barriers tab of applicable program application | Single Parent (including single pregnant women) | • Signed Program Application |
| **807** | **Displaced Homemaker at Program Entry** | Yes | Yes | No | Barriers tab of applicable program application | Displaced Homemaker | • Signed Program Application |
| **808** | **Eligible Migrant and Seasonal Farmworker Status (WIOA sec. 167)** | Yes | Yes | No | Farmworker tab of program application<br><br>Barriers tab of program Title I application | Eligible Migrant Seasonal Farmworker Status: | • Signed Program Application |

**Table 3**: The following table includes the data elements that do not require additional action from program staff.

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **900** | **Date of Program Entry** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • Date of first participant level service in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **901** | **Date of Program Exit** | Yes | Yes | Yes | Exit / Outcome under applicable program application | Date of Exit | • Date of last participant level activity code in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **906** | **Date of First WIOA Youth Service** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date | • Date of first Youth participant level service in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1001** | **Date of First Basic Career Service (Staff-Assisted)** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • Date of first Basic Career Service (Staff-Assisted) activity code listed in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1002** | **Most Recent Date Received Basic Career Services (Self-Service/ Information-Only)** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Actual End Date<br><br>***Most recent date = end date. If no end date then use the begin date.*** | Most recent date of:<br>• Basic Career Service (Self-service / Information-only) activity code listed in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*; OR<br>• Eligiblity date |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1003** | **Most Recent Date Received Basic Career Services (Staff-Assisted)** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Actual End Date<br><br>***Most recent date = end date. If no end date then use the begin date.*** | • Most recent date of Basic Career Service (Staff-Assisted) activity code listed in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1004** | **Date of Most Recent Career Service** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Actual End Date<br><br>***Most recent date = end date. If no end date then use the begin date.*** | • Most recent date of Basic Career Service (Staff-Assisted), or Individualized Career Service activity code listed in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1005** | **Most Recent Date Received Staff-Assisted Services (DVOP specialist)** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Actual End Date<br><br>***Most recent date = end date. If no end date then use the begin date.*** | • Most recent date of Basic Career Service (Staff-Assisted) activity code provided by a DVOP. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1006** | **Date Referred to Department of Veterans Affairs Vocational Rehabilitation and Employment Program** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>***Most recent date = end date. If no end date then use the begin date.***<br><br>****Wagner-Peyser**: Actual End Date | • Most recent date of a 169 CalJOBS activity code. |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1007** | **Date of Most Recent Reportable Individual Contact** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>***Most recent date = end date. If no end date then use the begin date.***<br><br>****Wagner-Peyser only**:<br>Actual End Date | Most recent date of:<br>• 101 CalJOBS activity code; OR<br>• Eligibility date. |
| **1200** | **Date of First Individualized Career Service** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • Date of first Individualized Career Service activity code in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1201** | **Most Recent Date Received Individualized Career Service** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • Most recent date of Individualized Career Service activity code listed in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |
| **1202** | **Date Individual Employment Plan Created** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • Date of first 205 CalJOBS activity code |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1205** | **Type of Work Experience** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Activity | • For Summer employment/internships during the summer (WIOA Youth): CalJOBS activity code 400<br>• For Employment opportunites, including internships, not limited to summer months: CalJOBS activity code 219, 408, 425, 426, 427, or 625<br>• For Pre-apprenticeship programs: CalJOBS activity code 224, 307, 431, or 437<br>• For Job shadowing: CalJOBS activity code 409<br>• For On-the-Job Training (WIOA Youth): CalJOBS activity code 428<br>• For Transitional Jobs (WIOA Adult, DW, and NDWG): CalJOBS activity code 321 |
| **1206** | **Date Received Financial Literacy Services** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • Date of CalJOBS activity code 221, 407, or 617 |
| **1211** | **Transitional Jobs** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | **Program Applications**: Actual Begin Date<br><br>****Wagner-Peyser only**:<br>Actual End Date | • CalJOBS activity code 321 |
| **1300** | **Received Training** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Activity | • Training Service activity code in CalJOBS. For a list of CalJOBS activity codes, please see WSD24-05, *CalJOBS Activity Codes*. |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1303** | **Type of Training Service #1** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Activity | • For On the Job Training (non-WIOA Youth): CalJOBS activity code 301<br>• For Skill Upgrading: CalJOBS activity code 305<br>• For Entrepreneurial Training (non-WIOA Youth): CalJOBS activity code 302<br>• For ABE or ESL in conjunction with Training: CalJOBS activity code 324<br>• For Customized Training: CalJOBS activity code 304<br>• For Occupational Skills Training (non-WIOA Youth): CalJOBS activity code 300, 307, 323, 328, or 330<br>• For ABE or ESL NOT in conjunction with training (TAA only): CalJOBS activity code 333, 339, or 355<br>• For Prerequisite Training: CalJOBS activity code 306<br>• For Registered Apprenticeship: CalJOBS activity code 325 or 432<br>• For Youth Occupational Skills Training: CalJOBS activity code 416, 421, 430, 437, or 438<br>• For Job Readiness Training in conjunction with other training: CalJOBS activity code 322 |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1310** | **Type of Training Service #2** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Activity | • For On the Job Training (non-WIOA Youth): CalJOBS activity code 301<br>• For Skill Upgrading: CalJOBS activity code 305<br>• For Entrepreneurial Training (non-WIOA Youth): CalJOBS activity code 302<br>• For ABE or ESL in conjunction with Training: CalJOBS activity code 324<br>• For Customized Training: CalJOBS activity code 304<br>• For Occupational Skills Training (non-WIOA Youth): CalJOBS activity code 300, 307, 323, 328, or 330<br>• For ABE or ESL NOT in conjunction with training (TAA only): CalJOBS activity code 333, 339, or 355<br>• For Prerequisite Training: CalJOBS activity code 306<br>• For Registered Apprenticeship: CalJOBS activity code 325 or 432<br>• For Youth Occupational Skills Training: CalJOBS activity code 416, 421, 430, 437, or 438<br>• For Job Readiness Training in conjunction with other training: CalJOBS activity code 322 |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1315** | **Type of Training Service #3** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Activity | • For On the Job Training (non-WIOA Youth): CalJOBS activity code 301<br>• For Skill Upgrading: CalJOBS activity code 305<br>• For Entrepreneurial Training (non-WIOA Youth): CalJOBS activity code 302<br>• For ABE or ESL in conjunction with Training: CalJOBS activity code 324<br>• For Customized Training: CalJOBS activity code 304<br>• For Occupational Skills Training (non-WIOA Youth): CalJOBS activity code 300, 307, 323, 328, or 330<br>• For ABE or ESL NOT in conjunction with training (TAA only): CalJOBS activity code 333, 339, or 355<br>• For Prerequisite Training: CalJOBS activity code 306<br>• For Registered Apprenticeship: CalJOBS activity code 325 or 432<br>• For Youth Occupational Skills Training: CalJOBS activity code 416, 421, 430, 437, or 438<br>• For Job Readiness Training in conjunction with other training: CalJOBS activity code 322 |
| **1402** | **Most Recent Date Received Educational Achievement Services** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date | • Most recent date of one of the following CalJOBS activity codes: 406, 414, or 429 |
| **1403** | **Most Recent Date Received Alternative Secondary School Services** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual Begin Date | • Most recent date of one of the following CalJOBS activity codes: 415 or 418 |
| **1405** | **Most Recent Date Received Work Experience Opportunities** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of one of the following CalJOBS activity codes: 400, 408, 409, 425, 426, 427, 428, or 431 |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1407** | **Most Recent Date Received Education Offered Concurrently with Workforce Preparation** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 439 |
| **1408** | **Most Recent Date Received Leadership Development Opportunities** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 410 |
| **1409** | **Most Recent Date Received Supportive Services** | Yes | Yes | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of one of the following CalJOBS activity codes: 180 -192, 327, 419, or 480-493 |
| **1410** | **Most Recent Date Received Adult Mentoring Services** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 411 |
| **1411** | **Most Recent Date Received Comprehensive Guidance/ Counseling Services** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 417 |
| **1412** | **Most Recent Date Received Youth Follow-up Services** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date received one of the following CalJOBS activity codes: F01-F22 |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1413** | **Most Recent Date Youth Received Entrepreneurial Skills Training** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 424 |
| **1414** | **Most Recent Date Youth Received Services that provide labor market information and employment information** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of one of the following CalJOBS activity codes: 433, 434 or 435 |
| **1415** | **Most Recent Date Youth Received Postsecondary transition and preparatory activities** | No | No | Yes | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 436 |
| **1500** | **Received Needs-Related Payments** | Yes | Yes | No | Activities / Enrollments / Services under applicable program application | Actual End Date – ***If no end date then use the begin date.*** | • Most recent date of CalJOBS activity code 326 |
| **1618** | **Retention with the same employer in the 2nd Quarter and the 4th Quarter** | Yes | Yes | Yes | Base Wage | N/A | • Cross-match to UI Wage data |
| **1700** | **Wages 3rd Quarter Prior to Participation Quarter** | Yes | Yes | No | Base Wage | N/A | • Cross-match to UI Wage data |

| Data Element # | Data Element Name | Adult | Dislocated Worker | Youth | CalJOBS Location | CalJOBS Data Entry Prompt | Allowable Source Documents |
|---|---|---|---|---|---|---|---|
| **1701** | **Wages 2nd Quarter Prior to Participation Quarter** | Yes | Yes | No | Base Wage | N/A | • Cross-match to UI Wage data |
| **1702** | **Wages 1st Quarter Prior to Participation Quarter** | Yes | Yes | No | Base Wage | N/A | • Cross-match to UI Wage data |

# WIOA Telephone Eligibility Verification

| Application Information | |
|---|---|
| **Applicant Name:** | |
| **Eligibility Criteria Verified:** | |
| **Document Inspected:** | |
| **Verification Details** | |
| **Case Manager Conducting Verification:** | |
| **Agency Providing Verification:** | |
| **Name of Agency Representative:** | |
| **Agency Representative's Phone Number:** | |
| **Date and Time of Verification:** | |
| **Notes (if any):** | |

I attest that the information recorded by me on this document was obtained through a telephone contact on the above date. As indicated by the agency representative, all information was obtained from data previously determined in the applicant's records at the agency providing eligibility verification.

Case Manager Name Signature Date

# Self-Attestation Verification Form

| Applicant Details | |
|---|---|
| **Applicant Name:** | |
| **Phone Number:** | |
| **Address:** | |
| **The following statement is being utilized for documentation of the following eligibility criteria:** | |
| | |
| **I hereby certify, under penalty of perjury, that the following information is true:** | |
| | |

I attest that the information stated above is true and accurate, and understand that the above information, if misrepresented, or incomplete, may be grounds for immediate termination and/or penalties as specified by law.

Applicant Name  Applicant Signature  Date

**If under the age of 18:*

Guardian Name  Guardian Signature  Date

Case Manager Name  Case Manager Signature  Date