

**Workforce Development, Aging and Community Services (WDACS) Technical Assistance Checklist PY 2021-22  
WIOA Youth@Work Program**

Level II Services – Academic and Career Development			
AJCC:	Name:	Grant Code:	
WIOA App #:	App Date:	Participation Date:	Exit Date:
WIOA Application <i>(Electronic Signatures Acceptable)</i>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was completed application uploaded to CalJOBS? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Staff /Case Manager Signature <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Application Reviewer Signature <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Participant Signature <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Parent Signature <i>(if applicable, below age 18)</i> <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Application is reviewed and approved prior to providing services <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Reviewer is not same as staff/case manager			Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
General Eligibility			
Residence			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is participant a resident of Los Angeles County? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> If not a resident, is a waiver for service provided and uploaded to CalJOBS? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was documentation appropriately uploaded to CalJOBS?			Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
Right to Work <i>(As listed on USCIS Form I-9)</i>			
<input type="checkbox"/> <b>LIST A</b>	<input type="checkbox"/> US Passport <input type="checkbox"/> Per. Resident Card <input type="checkbox"/> Other:		Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>OR</b>			
<input type="checkbox"/> <b>LIST B</b>	<input type="checkbox"/> CA ID/DL Card <input type="checkbox"/> School ID w/Photo <input type="checkbox"/> Other:		
<input type="checkbox"/> <b>LIST C</b>	<input type="checkbox"/> SSN Card <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Other:		
<b>Right to Work Documents</b> <input type="checkbox"/> Current <input type="checkbox"/> Expiring soon <input type="checkbox"/> Have expired on: _____			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are signed I-9 and supporting documents appropriately uploaded to CalJOBS?			
Selective Service			
<b>Male 18 years of age or older born after 12/31/1959</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<input type="checkbox"/> Documentation provided: Ex: <input type="checkbox"/> Print out <input type="checkbox"/> Card <input type="checkbox"/> Other:		<input type="checkbox"/> Dated after participation date:  <input type="checkbox"/> No Documentation	
<input type="checkbox"/> Confirmation Date: _____			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Was documentation appropriately uploaded to CalJOBS?			

**Eligibility Criteria**

**WIOA In-School Youth (ISY)**

**Yes**  **No** Is participant a foster, homeless, or runaway youth being served as OSY per waiver?

If yes, was **Local Grant Code LAO982** opened?  **Yes**  **No**

**Yes**  **No**  **N/A** Attending any school (Secondary and/or Post-Secondary) **AND**

**Yes**  **No**  **N/A** Not younger than 16 nor older than 21 **AND**

1. Low income

Resides in High poverty Area (Print Out)  Income Verification

5% Low-income exception approval from County in file

**AND**

2. One or more of the following:

a)  Basic Skills Deficient

b)  An English language learner

c)  An offender

d)  A homeless individual, a runaway

e)  An individual in foster care or who has aged out of the foster care system or who has attained 16 years of age and left foster care for kinship guardianship or adoption

f)  Pregnant/parenting

g)  Individual with disability

h)  An individual who requires additional assistance\* to complete an educational program or secure and hold employment

5% limitation approval from County in file

Which of the above was documented as the eligibility barrier (ex: a, b, c, d, e, f, g, or h)?

\_\_\_\_\_

Was the barrier substantiated with proper documents and uploaded to CalJOBS:

**Yes** (If yes, list documents below)  **No**

Documents collected:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Requirement Met:

N/A  Yes  No

Comments:

## Eligibility Criteria

### WIOA Out-of-School Youth (OSY)

1.  Not attending any school **OR**  
 Is attending school through partnership with Title II Adult Education, Job Corps, YouthBuild, Conservation Corps, or High School Equivalency program.
2.  Not younger than 16 nor older than 24  
**AND**
3.  One or more of the following:
- a)  School dropout (No diploma or equivalent)
  - b)  Within the age of compulsory school attendance but has not attended school for at least the most recent complete school year calendar quarter.
  - c)  Recipient of a secondary school diploma or its recognized equivalent who is low income and either basic skills deficient or/and English language learner
  - d)  An individual who is subject to the juvenile or adult justice system
  - e)  A homeless individual who meets the criteria defined in sec. 41403(6) of the Violence Against Women Act of 19994 (42 U.S.C. 14043e-2(6)), a homeless child or youth who meets the criteria defined in sec. 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a (2)) or a runaway
  - f)  An individual in foster care or who has aged out of the foster care system or who has attained 16 years of age and left foster care for kinship guardianship or adoption, a child eligible for assistance under Section 477 of the Social Security Act, or in an out-of-home placement.
  - g)  An individual who is pregnant or parenting
  - h)  A youth who is with disability
  - i)  A low-income individual who requires additional assistance to enter or complete an educational program or to secure or hold employment.

**For criteria c and i only:**

- Resides in High poverty Area (Print Out)     Income Verification  
 5% Low-income exception approval from County in file

Which of the above was documented as the eligibility barrier (ex: a, b, c, d, e, f, g, h, or i):

\_\_\_\_\_

Was the barrier substantiated with proper documents and uploaded to CalJOBS:

- Yes** (If yes, list documents below)     **No**

Documents collected:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Requirement Met:

- N/A     Yes     No

Comments:

Services Determination	
<b>Objective Assessment Summary (OAS)</b>	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was eligibility established before OAS? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was OAS completed within 30 days of enrollment? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was the OAS signed? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the required CalJOBS <b>OAS (412)</b> activity code open? Date: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is <b>OAS (412)</b> the first Activity Code opened? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was documentation appropriately uploaded to CalJOBS?	Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Individual Service Strategy (ISS)</b>	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are goals and objectives identified? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was the ISS signed? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is ISS linked to one or more performance outcome? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the required CalJOBS <b>ISS (413)</b> activity code open? Date: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Has AJCC staff reviewed and updated the ISS with youth at least once a month? If yes, was a new <b>ISS (413)</b> activity code opened each time? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Were goals/objectives closed prior to program exit? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was documentation appropriately uploaded to CalJOBS?	Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Initial Assessment</b>	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was an initial assessment completed before the OAS? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was an Aptitudes & Abilities assessment conducted? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was a Supportive Service Needs assessment conducted? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was a Basic Skills Assessment conducted? If Yes, what assessment was used: <input type="checkbox"/> CASAS <input type="checkbox"/> TABE <input type="checkbox"/> Wonderlic <input type="checkbox"/> Assessment from past 6 months: _____ Date of assessment: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are basic skills test results accurately reported in CalJOBS? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are initial assessment testing tools legible, dated, and signed by participant and staff? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Were all Initial Assessment tools uploaded to CalJOBS?	Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>



<b>Worksite and Performance Evaluation:</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the Worksite Agreement uploaded to CalJOBS or made available? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the Worksite Checklist uploaded to CalJOBS or made available?  <b>Performance Evaluation:</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Monthly Performance Evaluation signed & dated by worksite supervisor/case manager/youth? Date(s) evaluation was conducted: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Final Performance Evaluation signed & dated by worksite supervisor/case manager/youth? Date evaluation was conducted: _____  <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Was documentation appropriately uploaded to CalJOBS?		
<b>Supportive Services Expenditures</b>		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Need is documented in ISS and tied to goal/objective <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Supportive documentation is included (e.g., receipts) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are appropriate Supportive Services activity codes opened & closed the same day? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Does Supportive Services timeline align with activities? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are Supportive Services provided appropriate for WIOA activities? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Was documentation appropriately uploaded to CalJOBS?		Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Incentives</b>		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Were incentives provided? If so, date incentives issued: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was need for incentive assessed prior to received date? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was incentive justified? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was incentive linked to ISS goals/objectives? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the amount of planned and approved funding documented? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is there verification that services were appropriate to WIOA activities? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is there verification that services were received? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is <b>Incentive Payment (419)</b> activity code opened along with appropriate WIOA activity code directly tied to training activities, education and/or work experiences? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Was documentation appropriately uploaded to CalJOBS?		Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Documentation for Grievance/Complaint Procedures</b>		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> WIOA Complaint and Resolution Policies and Procedures Participant Acceptance Form (Dated 8/2021) properly filled out, signed, dated, and uploaded to CalJOBS <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> WIOA Applicant Acknowledgement Statements (Dated 8/2021), signed, dated and uploaded to CalJOBS		Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>

**Measurable Skills Gain (MSG)**

**Yes**  **No** Participant in WIOA ADW funded training program, ISY, or OSY who are in one of the following: Occupational Skills Training, secondary/postsecondary school attendance, Title II-funded Adult Education at or above 9<sup>th</sup> grade level, YouthBuild, Job Corps

If yes, specify MSG type from selections below:

**Educational Functioning Level (EFL)**  **Yes**  **No**

If yes, is it documented in CalJOBS?  **Yes**  **No**

If Basic Skills Deficient and services provided as a result, was post test conducted?

**Yes**  **No**  **N/A** Pre Test Date: \_\_\_\_\_ Post Test Date: \_\_\_\_\_

Pre Test Results: \_\_\_\_\_ Post Test Results: \_\_\_\_\_

Did participant receive services adequate and appropriate to EFL gains?  **Yes**  **No**

**Secondary School Diploma or Equivalent**  **Yes**  **No**

If yes, is it documented in CalJOBS?  **Yes**  **No** Date Diploma Received: \_\_\_\_\_

**Secondary School Transcript or Report Card**  **Yes**  **No**

If yes, is it documented in CalJOBS?  **Yes**  **No** Date Transcript Received: \_\_\_\_\_

Is the transcript for one semester and meet the state's academic standards?  **Yes**  **No**

**Postsecondary School Transcript or Report Card**  **Yes**  **No**

If yes, is it documented in CalJOBS?  **Yes**  **No** Date Transcript Received: \_\_\_\_\_

Does the transcript have 12 credit hours in one semester/over two consecutive semesters and meet state's academic standards?  **Yes**  **No**

**Training Milestone**  **Yes**  **No**

If yes, is it documented in CalJOBS?  **Yes**  **No** Date Milestone Completed: \_\_\_\_\_

Did the participant receive one of the following:

1. Training reports on milestones completed for OJT or apprenticeship program?  **Yes**  **No**
2. Increase in pay resulting from newly acquired skills?  **Yes**  **No**
3. Increase in performance based on newly acquired skills?  **Yes**  **No**
4. Completion of one year of a registered apprenticeship program?  **Yes**  **No**

**Passage of an Exam**  **Yes**  **No**

If yes, is it documented in CalJOBS?  **Yes**  **No** Date Exam Passed: \_\_\_\_\_

Does the exam show progress in attaining skills per trade-related benchmarks OR was the exam required for the completion of a credential?  **Yes**  **No**

**Yes**  **No**  **N/A** Do case notes support activity codes and services provided?

**Yes**  **No** Documented in Measurable Skills Gain Indicator in CalJOBS?

**Yes**  **No** Was documentation appropriately uploaded to CalJOBS?

Requirement Met:

**N/A**  **Yes**  **No**

**Comments:**

Program Closure	
Outcomes (Accountability Measures)	
<input type="checkbox"/> Placement in unsubsidized Employment/Military <input type="checkbox"/> 2 <sup>nd</sup> Quarter After Exit <input type="checkbox"/> 4 <sup>th</sup> Quarter After Exit	<b>Date:</b>
<input type="checkbox"/> Placement in Post-Secondary Education <input type="checkbox"/> 2 <sup>nd</sup> Quarter After Exit <input type="checkbox"/> 4 <sup>th</sup> Quarter After Exit	<b>Date:</b>
<input type="checkbox"/> Attainment of Degree or Certificate	<b>Date:</b>
<input type="checkbox"/> Placement in Advanced Training <input type="checkbox"/> 2 <sup>nd</sup> Quarter After Exit <input type="checkbox"/> 4 <sup>th</sup> Quarter After Exit	<b>Date:</b>
<input type="checkbox"/> Global Exclusion, if applicable (health/medical, incarcerated, deceased, reservist called to Active Duty, or foster youth moved out of service area)	<b>Date</b>
Follow-up Services	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Were follow-up services provided within 12 months after exit? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> If No, is the reason documented (participant declined or unable to be located/contacted)? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are appropriate Follow-up Services activity code(s) opened? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Do activity code start dates and end dates align with services? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Were Follow-up Services provided appropriate to WIOA activities? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was documentation appropriately uploaded to CalJOBS?	Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>

Certification of Review		
WDACS REPRESENTATIVE NOTES:		
<b>All Requirements Met:</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <b>NOTES:</b>		
_____ <b>AJCC REPRESENTATIVE PRINT NAME</b>	_____ <b>SIGNATURE</b>	_____ <b>DATE</b>
_____ <b>WDACS REPRESENTATIVE PRINT NAME</b>	_____ <b>SIGNATURE</b>	_____ <b>DATE</b>

Last updated: 10/2021