

**Department of Economic Opportunity (DEO) Technical Assistance Checklist  
PY 2022-23 WIOA Youth@Work Program**

**Level II Services – Academic and Career Development**

AJCC:	Name:	Grant Code: 301
WIOA App #:	App Date:	Participation Date:
		Exit Date:

**WIOA Application** *(Electronic Signatures Acceptable)*

<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> _____	Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</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	

**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>
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**Right to Work** *(As listed on USCIS Form I-9)*

<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"/> Registration Date: _____	<input type="checkbox"/> No Documentation	
<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:

Requirement Met:

N/A  Yes  No

Comments:

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:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Services Determination	
<b>Initial Assessment</b>	
<p><input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b> Was an initial assessment completed before the OAS?</p> <p><input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b> Was an Aptitudes &amp; Abilities assessment conducted?</p> <p><input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b> Was a Supportive Service Needs assessment conducted?</p> <p><input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b> Was a Basic Skills Assessment conducted?</p> <p style="padding-left: 40px;">If Yes, what assessment was used: <input type="checkbox"/> CASAS    <input type="checkbox"/> TABE    <input type="checkbox"/> Wonderlic</p> <p style="padding-left: 40px;"><input type="checkbox"/> Assessment from past 6 months: _____</p> <p style="padding-left: 40px;">Date of assessment: _____</p> <p><input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b> Are basic skills test results accurately reported in CalJOBS?</p> <p><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?</p> <p><input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b> Were all Initial Assessment tools uploaded to CalJOBS?</p>	<p>Requirement Met:  <input type="checkbox"/> N/A    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p><b>Comments:</b></p>

Objective Assessment Summary (OAS)									
<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>								
Individual Service Strategy (ISS)									
<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 as services were provided? 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> <input type="checkbox"/> <b>N/A</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"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>								
Program Services									
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is participant receiving any youth services activity codes? ( <b>Excluding 412 &amp; 413</b> ) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is participant receiving individualized services tied to ISS plan? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Do activity code dates match services provided? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are activity codes used appropriate/accurate to services provided? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Do case notes support activity codes and services provided? <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"/> Yes <input type="checkbox"/> No <b>Comments:</b>								
Work Experience									
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the Academic or Educational Component documented in case notes? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is work experience tied to ISS plan? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Does activity code start dates and end dates match services provided? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the activity code used appropriate/accurate? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Do case notes support activity codes?	Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>								
<table border="1" style="width: 100%;"> <tbody> <tr> <td><input type="checkbox"/> Job Shadowing (409)</td> <td><input type="checkbox"/> Internship – Paid (427)</td> </tr> <tr> <td><input type="checkbox"/> Summer Employment (400)</td> <td><input type="checkbox"/> Pre-apprenticeship (431)</td> </tr> <tr> <td><input type="checkbox"/> Unpaid Work Experience (426)</td> <td><input type="checkbox"/> Paid Work Experience (425)</td> </tr> <tr> <td><input type="checkbox"/> Internship – Unpaid (408)</td> <td><input type="checkbox"/> On-the-Job Training (OJT – 428)</td> </tr> </tbody> </table>	<input type="checkbox"/> Job Shadowing (409)	<input type="checkbox"/> Internship – Paid (427)	<input type="checkbox"/> Summer Employment (400)	<input type="checkbox"/> Pre-apprenticeship (431)	<input type="checkbox"/> Unpaid Work Experience (426)	<input type="checkbox"/> Paid Work Experience (425)	<input type="checkbox"/> Internship – Unpaid (408)	<input type="checkbox"/> On-the-Job Training (OJT – 428)	
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<input type="checkbox"/> Unpaid Work Experience (426)	<input type="checkbox"/> Paid Work Experience (425)								
<input type="checkbox"/> Internship – Unpaid (408)	<input type="checkbox"/> On-the-Job Training (OJT – 428)								
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Work permit/certificate of age if youth under 18 years of age Work Permit Start Date: _____ End Date: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Work Experience falls within work permits issue dates? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> W-4 Form is signed? <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>Consent and Release agreement:</b>									
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Consent and Release Agreement (June 2019) signed by the Youth and Parent (If under the age of 18)? <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?									

<p><b>Worksite Expectations Review:</b></p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Worksite Expectations Review form uploaded to CalJOBS?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> The form is signed by the youth?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> The form is signed by the parent or guardian if under 18?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> The form is signed by agency staff?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> The form is signed by worksite representative?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are the duties performed clearly defined (ex. Not "Clerical")?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are the scheduled hours listed (ex. Not "Varies")?</p> <p><b>Timesheets:</b></p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Signed by Youth</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Reviewed by Agency staff to verify compliance of Labor Laws</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Usage of whiteout to correct errors?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Issues with date alterations?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are changes/corrections initialed?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are daily/total number(s) of hours calculated correctly?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are breaks and lunches taken as directed by Labor Laws?</p> <p><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?</p> <p><b>Worksite and Performance Evaluation:</b></p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the Worksite Agreement uploaded to CalJOBS or made available?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the Worksite Checklist uploaded to CalJOBS or made available?</p> <p><b>Performance Evaluation:</b></p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Monthly Performance Evaluation signed &amp; dated by worksite supervisor/case manager/youth? Date(s) evaluation was conducted: _____</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Final Performance Evaluation signed &amp; dated by worksite supervisor/case manager/youth? Date evaluation was conducted: _____</p> <p><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?</p>		
<b>Supportive Services Expenditures</b>		
<p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Need is documented in ISS and tied to goal/objective</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Supportive documentation is included (e.g., receipts)</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are appropriate Supportive Services activity codes opened &amp; closed the same day?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Does Supportive Services timeline align with activities?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are Supportive Services provided appropriate for WIOA activities?</p> <p><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?</p>	<p>Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Comments:</b></p>	
<b>Incentives</b>		
<p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Were incentives provided? If so, date incentives issued: _____</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was need for incentive assessed prior to received date?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was incentive justified?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Was incentive linked to ISS goals/objectives?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is the amount of planned and approved funding documented?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is there verification that services were appropriate to WIOA activities?</p> <p><input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is there verification that services were received?</p> <p><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</p>	<p>Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Comments:</b></p>	

activity code directly tied to training activities, education and/or work experiences? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was documentation appropriately uploaded to CalJOBS?		
<b>Documentation for Grievance/Complaint Procedures</b>		
<input type="checkbox"/> Yes <input type="checkbox"/> No 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"/> Yes <input type="checkbox"/> No 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>
<b>Measurable Skills Gain (MSG)</b>		
<input type="checkbox"/> Yes <input type="checkbox"/> 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:  <b>Educational Functioning Level (EFL)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, is it documented in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> No If Basic Skills Deficient and services provided as a result, was post test conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Pre Test Date:_____ Post Test Date:_____ Pre Test Results:_____ Post Test Results:_____ Did participant receive services adequate and appropriate to EFL gains? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Secondary School Diploma or Equivalent</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, is it documented in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Diploma Received: _____  <b>Secondary School Transcript or Report Card</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, is it documented in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Transcript Received: _____ Is the transcript for one semester and meet the state's academic standards? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Postsecondary School Transcript or Report Card</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, is it documented in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Transcript Received: _____ Does the transcript have 12 credit hours in one semester/over two consecutive semesters and meet state's academic standards? <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Training Milestone</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, is it documented in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Milestone Completed:_____ Did the participant receive one of the following: <ol style="list-style-type: none"> <li>1. Training reports on milestones completed for OJT or apprenticeship program? <input type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>2. Increase in pay resulting from newly acquired skills? <input type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>3. Increase in performance based on newly acquired skills? <input type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>4. Completion of one year of a registered apprenticeship program? <input type="checkbox"/> Yes <input type="checkbox"/> No</li> </ol> <b>Passage of an Exam</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, is it documented in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Do case notes support activity codes and services provided? <input type="checkbox"/> Yes <input type="checkbox"/> No Documented in Measurable Skills Gain Indicator in CalJOBS? <input type="checkbox"/> Yes <input type="checkbox"/> No 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>Program Closure <i>(Only applicable for exited youth)</i></b>		
<b>Outcomes (Accountability Measures)</b>		
Has the youth been exited? <input type="checkbox"/> <b>Yes (Complete below)</b> <input type="checkbox"/> <b>No</b>		
<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>	
<b>Credential Attainment</b>		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Has participant attained a recognized postsecondary credential or secondary school diploma, or equivalent, during participation or within 1 year after exit?		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> If yes, has Credential Attainment been reported accurately and uploaded to CalJOBS? (Codes requiring CA: 415, 418, 421, 429)		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is documentation supporting Credential Attainment uploaded to CalJOBS?		
<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>	
<b>Follow-up Services <i>(Only applicable for exited youth)</i></b>		
<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)?	Requirement Met: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are appropriate Follow-up Services activity code(s) opened?	<b>Comments:</b>	
<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?		
<b>Certification of Review</b> DEO REPRESENTATIVE NOTES:		
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NOTES:		
_____	_____	_____
<b>AJCC REPRESENTATIVE PRINT NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
_____	_____	_____
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