Kentucky Career Center
Career Training Employer
TENCO

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TENCO WIOA Program Training

July 27, 2026 at KCC Morehead: 9:30 a.m. to 3:00 pm

July 30, 2026 at Lewis County Empower Youth: 9:30 a.m. to 3:00 pm

Agenda

1. The Flow of Public Workforce Development System Roles and Funds
2. Case Notes
3. Data Entry and types of Documentation
4. Case Management
5. Eligibility
    a. Low-Income Determination
        i. Definition of Family
        ii. Adult
        iii. Youth including the use of High Poverty Area
    b. Change in disability documentation
6. Financials
7. Outcomes
    a. Credentials
    b. Training Outcomes
    c. Employment Outcomes
    d. Youth Post-Exit Outcomes
8. Follow-Up Services

WIOA Program Training

July 27, 2026 at Kentucky Career Center – Morehead

July 30, 2026 at Lewis County Empower Youth

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The Flow of Public Workforce Development System Roles & Funds

U.S. Department of Labor
Oversees the national public workforce system, administers and oversees programs and funds.

State Workforce Development Board
Develop states strategic vision, provides leadership to the local boards and informs local strategies.

State Workforce Agency(ies)
Administers designated programs, negotiates local performance standards, monitors and evaluates local program and fiscal compliance.

Local Workforce Development Board
Aligns partner programs, creates local strategic goals, selects and evaluates service providers, designates Title I funds, and oversees the local workforce career center system.

Kentucky Career Center
Serve job seekers and businesses by meeting their workforce needs; Are hubs for holistic partner programs.

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CASE NOTES

CASE NOTES

- Documents the customer's journey and identifies the strategies used to help the customer reach a specific goal.
- It ties all case management services and activities together for easy review.
- Working tool for Case Management
- Protects yourself and your organization.

CASE NOTES EXPECTATIONS

DWD POLICY:

Local Case Note and Data Entry Policy #46

***** At the time of the activity/service but no later than 10 business days after.***

Doesn't require enrollment into a program for case notes to be entered into KEE suite.

Customer Specific

Legal Record

Clear, Relevant, & Professional

Be factual; Do not include opinions or judgement; Do not use words like "always or never"

ON-GOING FROM THE FIRST MEETING THROUGH THE LAST FOLLOW-UP

1	2	3
Introduce the Customer	Document the Journey	Identify any exceptions or system errors

Initial Case Note Example

An initial case note(s) will:

- Include an orientation to CC services
- Show basic career services were provided
- Describe information from the intake/assessment
- Describe the customer's circumstances
- Identify what services they are seeking
- Include any testing/surveys completed
- Identify next steps
- Describe any additional circumstances

Title: Basic Career Services

ORIENTATION TO CC SERVICES

Ben was referred by the Career Development Office for WIOA services. He has been looking for employment but has not found anything that would provide him with a self-sustaining wage. I provided information on the WIOA program, including eligibility requirements, services available, case management, and follow-up requirements.

INTAKE/ASSESSMENT

Ben is a 20-year-old single man who lives with his grandparents in Lewis County. He graduated from Lewis County High School but has not attended any post-secondary training. Ben took vocational classes in welding while in high school and has expressed an interest in pursuing a Welding Certificate.

Ben is not currently employed. His only work experience has been fast food jobs (Arby's for 2 months and McDonalds for 6 months). These jobs were held beyond 6 months ago. and paid a wage lower than $12.00 and were part-time.

Ben state that he had reliable transportation to get to a training program. He would like to complete as soon as possible in order to find employment quickly. He does not have any children, and he lives rent free with his grandparents.

Ben completed a budget worksheet which shows that his bills are very limited (car insurance) and that is paid by his grandparents.

Ben did not have the documents necessary to complete his eligibility for WIOA. I went over the list of documents he would need to enroll in the WIOA program. I also explained that he could take the "My Next Move" interest inventory at home or at the center. I provided him with information on the three welding programs that are close to his location: ACTC, MCTC, and KWI. Ben stated that if he could receive financial assistance, he would rather attend KWI, so that he could get a job quicker as it is a 6-month program.

We scheduled an appointment for February 3, at 10 AM to complete eligibility.

Individualized Case Note Example

An individualized case note(s) will:

- Show individualized career services
- Follow up on any items from the initial meeting
- Describe assessment results, if applicable
- Identify activities completed
- Include next steps
- Describe any additional circumstances
- Identify any data entry errors

Title: Individualized Career Service

Ben was on time for his appointment and provided the necessary documentation to complete his eligibility. I uploaded all documents. Ben did not register for selective services when he turned 18, so we discussed what the registration meant, the process, and that it was a federal requirement. He registered online while in the office.

Ben does not have any income for the past six months. His grandparents support him. We completed a WIOA-2 describing his living situation. This will be used to document his family size of 1 and income. Ben meets priority status - low income. WIOA-2 uploaded.

Ben completed the My Next Move interest inventory which indicated welding is a good fit with his interests. Score uploaded and included in the tool test.

Ben and I discussed what he identified as his strengths which included athletic, made good grades in vocational, got along well with others, helps his grandfather on the farm, and has reliable transportation. He also mentioned his grandparents were excited about him going back to school. He mentioned they have always been his strongest supporters.

I asked if he had any health concerns that would affect his ability to work in welding. He said "no- he understood the work and had done it in vocational school without any issues." I asked if there were any other obstacles, such as legal and he responded "no - I've never been in any trouble."

His obstacles seem to be around his ability to travel outside of the area for work. He helps take care of his grandparents and will need to find a stable job in the local area. He also does not have funding to pay for the training. We reviewed LMI for jobs in the local area that required a welding certificate. While staying in the area will limit his employment opportunities, there are still several options that interested him. I explained that if approved, our funding is limited to $8,000.00 leaving him $4,000 to cover on his own. We discussed applying for financial aid. He asked if I could help him do that and we set up an appointment on February 5th for him to bring in all the information necessary for him to complete his financial aid application.

Ben provided a copy of his high school transcript which reflected a GPA of 3.0. Based on TENCO policy, this was used to assess that he is not basic skill deficient.

Training Case Note Example

A training case note(s) will:

- Identify the need for training
- Follow up on any items from previous meetings
- Include Training Timelines
- Describe the six training criteria/need to train
- Identify activities completed
- Include next steps
- Describe any additional circumstances, if applicable

Title: Training Service

Ben met with KWI and has documentation to show that he can start training on March 1, 2025 pending payment. The training is six months and will result in three certificates, MIG, TIG, and ...

After the interview, assessment, and review of LMI, it has been determined that Ben will not be able to find self-sustaining employment without training.

I completed the six criteria/need to train:

1. Suitable employment is not available. Ben has no credentials or marketable skills other than a high school diploma. His previous work experience has been part-time fast food jobs. There were no matches on Indeed for his current skill set that would provide him with self-sustaining employment as defined by the TENCO WDB.
2. Ben will benefit from the program. The program will provide him with multiple credentials necessary for him to work as a welder, making him more marketable.
3. Ben had a GPA of 3.0 from high school which was utilized to determine he is not basic skill deficient and should be able to complete the welding program without issue. He received good grades in his vocational high school program. His interest inventory showed welding as a good employment fit. His budget shows that he has the ability to complete as his bills are currently paid by his grandparents.
4. There is a reasonable expectation for employment following training. The TENCO WDB has identified welding as a high demand, high wage job. The TENCO WDB utilizes data from the KYStats projections and local businesses to determine the TENCO Occupational training list.
5. When comparing schools, KWI is the closest (30 miles from Ben's house) and most cost effective at $12,000.00 for a 6-month program. KWI will also start sooner than the other schools. See school comparison in Documents.
   Training is suitable based on his interest inventory (mynextmove.org) and the school/program is on the ETPL.

I submitted Ben's file to the Quality Control Coordinator for review. Upon approval, I will contact Ben for an appointment to complete his ITA and Financial Needs Analysis. Ben brought in verification that he has financial aid in the amount of $2000.00 and a scholarship from KWI for the remaining $2,000.00.

Anticipated Training time: March 1, 2025 – August 31, 2025.

ITA/Budget Case Note Example

An ITA/Budget case note will:

- Follow up on any items from previous meetings
- Include Budget information
- Include Training Timelines
- Include next steps
- Describe any additional circumstances that are policy specific

Eligibilty, ITA and Budget:

Ben's eligibility has been approved by Quality control.

He will start at KWI on March 1st as planned. He will receive $8,000 of WIOA youth funds for tuition. Ben completed his ITA and Financial Needs Analysis today.

KWI is a private school and does not have schedules and/or grades.

I get the following error message when I try to enter the Need to Train in KEE Suite. "……………." This has been reported.

CASE NOTE TIPS

- ✓ Do not put other people's information in case notes and/or files.

- ✓ Watch acronyms - Remember your notes will not just be seen by you.

- ✓ Individualize your case notes when possible - don't just copy and paste.

POLICY

COMMONWEALTH OF KENTUCKY
DEPARTMENT OF WORKFORCE DEVELOPMENT
AND
KENTUCKY WORKFORCE INNOVATION BOARD

POLICY NAME: WIOA Data Entry

POLICY NUMBER: 22-001
DATE OF ISSUE: Reissued March 1, 2023
EFFECTIVE DATE: February 15, 2022

APPLIES/OF INTEREST TO: Local Workforce Development Area (LWDA) staff and Kentucky Career Center (KCC) staff

POINT OF CONTACT: Compliance.Unit@ky.gov

HISTORY: Initial date of issue 2/15/2022 superseding all prior policy and/or correspondence previously issued; revised 3/1/2023 for minor cleanup, thus effective date remains.

BACKGROUND: LWDA staff continuously enter data into the state system of record and, when needed, Department of Workforce Development staff will request data corrections. Such requests for corrections have historically occurred without reference to a timeframe within which those corrections should be made. The lack of finite timeframes has created numerous problems, including inaccuracies in performance measurement data.

PURPOSE: This policy establishes timelines for data entry and data corrections for more timely and consistent submissions to better ensure accuracy of performance measurements.

POLICY: Performance reporting is a federal requirement and a top priority at both the state and federal level. Effective February 15, 2022, all data as it relates to the participant and is needed for federal reporting (please reference the PIRL Layout) must be entered into the state system of record within ten (10) days of its occurrence for the data to be extracted, reviewed, and corrected if necessary. Performance measurement data not entered within the ten-day timeframe specified herein may result in a questioned cost.

Support and performance teams will review records on a case-by-case basis for corrections but will not correct records that do not affect current program year performance measures. Such corrections will be required at the local level within thirty (30) days of notification by the review team.

TEGL 21-19, change 13 can be found at https://www.dol.gov/agencies/eta/advisories/tegl-23-19-change-3 and should be referenced for complete guidance on documentation sources.

Types of Source Documentation

The validation guidelines provide multiple forms of acceptable source documentation. Source documentation must match the reported data. If multiple sources conflict, the most authoritative source should be used to determine if the data element is valid and accurate.

These source documentation types include:

1. Cross-Match: A cross-match requires grantees to identify detailed evidence that confirms the data element in a secondary database. Grantees must also confirm supporting information, such as dates of participation and services rendered. Grantees must have data sharing agreements in place as appropriate. Upon request, results must be available to federal auditors.

2. Self-Attestation: Self-attestation means a written, or electronic/digital declaration of information for a particular data element, signed and dated by the participant. The Department broadly interprets what is considered an electronic/digital signature. Electronic signatures or a submission from the participant such as an email, text, or unique online survey response, are considered an electronic signature or verification; it must be participant-generated and traceable to the participant. Grantees must retain documentation of self attestations provided by participants. Grantees should use other forms of source documentation when possible.

3. Case Notes: Case notes refer to either paper or electronic statements by the case manager or program staff that identify, at a minimum, the following: (a) a participant's situation status related to a specific data element, (b) the date on which the information was obtained, and (c) the name of the case manager or program staff who obtained the information.

4. Electronic Records (any information that is recorded in a form that only a computer can process and that satisfies the definition of a Federal record under the Federal Records Act. The term includes both record content and associated metadata that the agency determines is required to meet agency business needs.), which may include:
   a. Participant Source Documents: Participant source documents maintained in the grantee's management information system (MIS) or other official record keeping system.
   b. Grantee Participant Service Record: Grantee participant information generated and maintained by the grantee regarding the specific services received by a participant. The information may be generated and maintained through the grantee's MIS or other official recordkeeping system but must accurately reflect the data being recorded. System features such as a checkbox, radio button, or date field must corroborate participant information, services, or other elements recorded.

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date of Birth (WIOA)	X	X	X	X	• Driver's License • Baptismal Record • Birth Certificate • DD-214 • Report of Transfer or Discharge Paper • Federal, State, Local or Tribal Identification Card • Passport • Hospital Record of Birth • Public Assistance/Social Service Records • School Records or ID Cards • Work Permit • Family Bible • Cross-Match with State Agency Records • Justice System Records • Selective Service Registration • Signed Letter from a parent or guardian • Medical Records
Individual with a Disability (WIOA)	X	X	X	X	• School 504 Records Provided by Student • Assessment Test Results • School Individualized Education Program (IEP) record • Self-Attestation
Eligible Veteran or Other Eligible Person	X	X	X		Source documentation beyond Self-Attestation for this element is only required at the point in which a decision is made to enroll a covered person over a non-covered person and commit financial resources, which does not include staff time. (Per TEGL 10-09, Section 9.) • DD-214 • Cross-Match with Department of Defense Records • Cross-Match with Veterans Service Database • A Letter from the Veterans' Administration • NGB- 22 documenting Title 10 federal active duty service • Self-Attestation
UC Eligible Status	X	X	X		• Cross-Match with State UI Database • Cross-Match with State MIS Database • Referral Transmittal by RESEA or WPRS • Self-Attestation for Code Values 3 and 4 only

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Long-Term Unemployed at Program Entry (WIOA)	X	X	X		• Public Assistance Records • Refugee Assistance Records • Cross-Match with Public Assistance Database • Cross-Match with UI Database • Self-Attestation
School Status at Program Entry	X	X	X	X	• Applicable records from education
Date of Actual Dislocation	X	X	X		• Verification from Employer • Rapid Response List • Notice of Layoff • Public Announcement with Follow-Up Cross-Match with UI Database
Migrant and Seasonal Farmworker Designation as defined at 20 CFR 651.10	X				• Cross-Match with Public Assistance Records • Cross-Match with State MIS Database • Employment Records • Case notes • Self-Attestation
Temporary Assistance to Needy Families (TANF)	X	X	X		• TANF Eligibility Verification • TANF Period of Benefit Receipt Verification • Referral Transmittal from TANF • Cross-Match with TANF Public Assistance Records
Exhausting TANF Within 2 Years (Part A Title IV of the Social Security Act) at Program Entry (WIOA)	X	X	X		• TANF Eligibility Verification • TANF Period of Benefit Receipt Verification • Referral Transmittal from TANF • Cross-Match with TANF Public Assistance Records
Supplemental Security Income(SSI) / Social Security Disability Insurance (SSDI)	X	X	X		• SSI/SSDI Receipt of Benefits Verification • Referral Transmittal from SSA • SSI/SSDI Eligibility Verification • Cross-Match with SSA Database
Supplemental Nutrition Assistance Program (SNAP)	X	X	X		• SNAP Eligibility Verification • Documentation of SNAP Benefit Receipt • Referral Transmittal from SNAP • Cross-Match
Other Public Assistance Recipient		X	X		• Copy of Authorization to Receive Cash Public Assistance • Copy of Public Assistance Check • Medical Card Showing Cash Grant Status • Public Assistance Eligibility Verification • Cross-Match

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Pregnant or Parenting Youth				X	• Needs Assessment • WIC Eligibility Verification • TANF Single Parent Eligibility Verification • Intake Application or Enrollment Form • Individual Service Strategy • Case notes • Self-Attestation
Youth Who Needs Additional Assistance				X	See State policy on definition: • Intake Application or Enrollment Form • Case notes • Needs Assessment • Individual Service Strategy • Self-Attestation
Foster Care Youth Status at Program Entry (WIOA)	X	X	X	X	• Written Confirmation from Social Services Agency • Case notes • Foster Care Agency Referral Transmittal • Intake Application or Enrollment Form • Needs Assessment • Individual Service Strategy • Self-Attestation
Homeless participant, Homeless Children and Youths, or Runaway Youth at Program Entry (WIOA)	X	X	X	X	• Intake Application or Enrollment Form • Written Statement or Referral Transmittal from a Shelter or Social Service Agency • Needs Assessment • Case notes • Individual Service Strategy • A letter from caseworker or support provider • Self-Attestation
Ex-Offender Status at Program Entry (WIOA)	X	X	X	X	• Documentation from the Juvenile or Adult Criminal Justice System • Written Statement or Referral Document from a Court or Probation Officer • Referral Transmittal from a Reintegration Agency • Intake Application or Enrollment Form • Case notes • Needs Assessment • Individual Service Strategy • Federal Bonding Program Application • Self-Attestation

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Low Income Status at Program Entry (WIOA)	X	X	X	X	• Award Letter From Veteran's Administration • Bank Statements • Pay Stubs • Compensation Award Letter • Court Award Letter • Pension Statement • Employer Statement/Contact • Family or Business Financial Records • Housing Authority Verification • Quarterly Estimated Tax for Self-Employed Persons • Social Security Benefits • UI Claim Documents • Copy of Authorization to Receive Cash Public Assistance • Copy of Public Assistance Check • Public Assistance Eligibility Verification • Cross-Match with Refugee Assistance Records • Cross-Match with Public Assistance Records • Cross-Match with UI Wage Records
English Language Learner at Program Entry (WIOA)	X	X	X	X	• Assessment Test Results • Applicable Records from Education Institution (transcripts, or other school documentation) • Intake Application or Enrollment Form • Individual Service Strategy • Case notes • Self-Attestation
Basic Skills Deficient/Low Levels of Literacy at Program Entry	X	X	X	X	• Assessment Test Results • Applicable Records from Education Institution (transcripts, academic assessments, or other school documentation) • Case notes
Single Parent at Program Entry (WIOA)	X	X	X	X	• Needs Assessment • TANF Single Parent Eligibility Verification • Intake Application or Enrollment Form • Individual Service Strategy or Employment Plan • Case notes

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Displaced Homemaker at Program Entry (WIOA)	X	X	X		• Intake Application or Enrollment Form • Cross-Match with Public Assistance Records • Copy of Spouse's Layoff Notice • Copy of Spouse's Death Record • Copy of Spouse's Permanent Change of Station (PCS) Orders (for a military move or assignment) • Copy of Divorce Records • Copy of Applicable Court Records • Copy of Bank Records (showing financial dependence on spouse, no separate individual income support, or no employment income earned) • Needs Assessment • Individual Employment Plan • Self-Attestation
Migrant and Seasonal Farmworker Status	X	X	X		• Cross-Match with Public Assistance Records • NFJP Eligibility Documents used to determine low-income status • Employer Contract/Letter • Program application • Cross-Match with State MIS Database • Cross-Match with H-1B Records • Case notes • Self-Attestation
Date of Program Entry (WIOA)	X	X	X	X	• Individual Plan for Employment • Electronic Records • Program intake documents, such as eligibility determination documentation or program enrollment forms
Date of Program Exit (WIOA)	X	X	X	X	• A copy of the letter sent to the individual indicating that the case was closed • WIOA status/exit forms • Electronic Records • Attendance records • Review of service records identifying the last qualifying service (and lack of a planned gap)

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date of First WIOA Youth Service				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes • Individual Service Strategy
Recipient of Incumbent Worker Training	X	X	X		• Signed Incumbent Worker Training agreement • Cross-Match • Case notes
Rapid Response	X		X		• Cross-Match • Case notes • Rapid Response List • Self-Attestation
Other Reasons for Exit (WIOA)	X	X	X	X	• Information from partner services • WIOA or program status/exit forms • Electronic Records • Withdrawal form with explanation • Information from institution or facility • Case notes
Date of First Basic Career Service (Staff-Assisted)	X	X	X		• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Basic Career Services (Self-Service/Information-Only)	X	X	X		• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Basic Career Services (Staff-Assisted)	X	X	X		• Case notes • Cross-Match • Electronic Records
Date of Most Recent Career Service (WIOA)	X	X	X		• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Staff-Assisted Services (DVOP specialist)	X	X	X		• Case notes • Cross-Match • Electronic Records

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date Referred to Department of Veterans Affairs Vocational Rehabilitation and Employment Program	X	X	X		• Case notes • Cross-Match • Electronic Records
Date of Most Recent Reportable Individual Contact	X	X	X		• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Staff-Assisted Career Guidance Services	X				• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Staff-Assisted Job Search Activities	X				• Case notes • Cross-Match • Electronic Records
Most Recent Date Referred to Employment	X				• Case notes • Cross-Match • Electronic Records
Most Recent Date Referred to Federal Training	X				• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Unemployment Insurance (UI) Claim Assistance	X				• Case notes • Cross-Match • Electronic Records
Most Recent Date Referred to Other Federal/State Assistance	X				• Case notes • Cross-Match • Electronic Records
Date of First Individualized Career Service	X	X	X		• Case notes • Cross-Match • Electronic Records
Most Recent Date Received Individualized Career Service	X	X	X		• Case notes • Cross-Match • Electronic Records
Date Individual Employment Plan Created	X	X	X		• Cross-Match • Case notes • Individual Employment Plan or Individual Service Strategy • Electronic Records
Type of Work Experience	X	X	X	X	• Case notes

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date Received Financial Literacy Services	X	X	X	X	• Activity sheets
Transitional Jobs		X	X		• Electronic Records • Case notes • Signed Transitional Job Agreement
Received Training (WIOA)	X	X	X	X	• Cross-Match • Vendor/Training Provider Records • Signed Training Contract • Individual Training Account • Electronic Records
Eligible Training Provider ID # - Training Service #1 (WIOA)		X	X		• Vendor Training Records • Receipts • Cross-Match
Date Entered Training #1		X	X	X	• Individual Training Account
Type of Training Service #1 (WIOA)		X	X	X	• Copy of enrollment record • Case notes • Cross-Match between dates of service and vendor training information • Vendor training documentation • Electronic Records • Individual Training Account • Attendance records
Occupational Skills Training Code #1		X	X	X	• Cross-Match
Training Completed #1		X	X	X	• Cross-Match • Vendor Training Records • Attendance Sheets or Records • Case notes • Electronic Record • Individual Training Account
Date Completed, or Withdrew from, Training #1		X	X	X	• Cross-Match • Vendor Training Records • Attendance Sheets or Records • Case notes • Electronic Record

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date Entered Training #2		X	X	X	• Individual Training Account • Vendor Training Records • Electronic Record • Attendance Sheets or Records • Case notes
Type of Training Service #2 (WIOA)		X	X	X	• Copy of enrollment record • Case notes • Cross-Match between dates of service and vendor training information • Vendor training documentation
Occupational Skills Training Code #2		X	X		• Cross-Match
Training Completed #2		X	X	X	• Cross-Match
Date Completed, or Withdrew from, Training #2		X	X	X	• Cross-Match
Date Entered Training #3		X	X	X	• Individual Training Account • Vendor Training Records • Electronic Record • Attendance Sheets or Records • Case notes
Type of Training Service #3 (WIOA)		X	X	X	• Copy of enrollment record • Case notes • Cross-Match between dates of service
Occupational Skills Training Code #3		X	X		• Cross-Match • Case notes • Signed Individual Employment Plan or Training Plan • Signed Training Contract • Individual Training Account
Training Completed #3		X	X	X	• Cross-Match
Date Completed, or Withdrew from, Training #3		X	X	X	• Cross-Match • Vendor Training Records • Attendance Sheets or Records • Case notes • Electronic Records • Individual Training Account
Established Individual Training Account (ITA)		X	X		• Cross-Match • Case notes • Individual Training Account Approval, Allocation or Activation Records

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Participated in Postsecondary Education During Program Participation (WIOA)		X	X	X	• Data match with postsecondary data system • Copy of enrollment record • Case notes • School records or verification of enrollment • Transcript or report card
Enrolled in Secondary Education Program (WIOA)		X	X	X	• Copy of enrollment record • Case notes • School records or verification of enrollment • Transcript or report card • Data match to State K-12 data system
Most Recent Date Received Educational Achievement Services				X	• Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes • Cross-Match
Most Recent Date Received Alternative Secondary School Services				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Received Work Experience Opportunities				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Date Enrolled in Post Exit Education or Training Program Leading to a Recognized Postsecondary Credential (WIOA)		X	X	X	• Case notes • School records or verification of enrollment • Transcript or report card • Cross-Match • Post-Exit survey from program participants

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Most Recent Date Received Education Offered Concurrently with Workforce Preparation				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Received Leadership Development Opportunities				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Received Supportive Services		X	X	X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Received Adult Mentoring Services				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Received Comprehensive Guidance/ Counseling Services				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes

Data Element Name	**Wagner Peyser**	**WIOA Adults**	**WIOA DW**	**WIOA Youth**	**Source**
Most Recent Date Received Youth Follow-up Services				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Youth Received Entrepreneurial Skills Training				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Youth Received Services that provide labor market information and employment information				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Most Recent Date Youth Received Postsecondary transition and preparatory activities				X	• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Received Needs-Related Payments		X	X		• Cross-Match • Activity sheets • Sign-in sheets • Attendance record • Vendor contract • Electronic Records • Case notes
Employed in 1st Quarter After Exit Quarter	X	X	X	X	• UI wage data match/administrative

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Type of Employment Match 1st Quarter After Exit Quarter (WIOA)	X	X	X	X	Consistent with TEGL 26-16: • Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate) • Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service) • Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires) • State New Hires Registry • Signed Follow-up Survey Response from Program Participants • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16) • Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation • Railroad Retirement System • Quarterly Tax Payment Forms (such as IRS Form 941) • A Signed Letter from an Employer on Company Letterhead (attesting to an individual's employment status and earnings) • Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants • Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)
Employed in 2nd Quarter After Exit Quarter (WIOA)	X	X	X	X	•UI wage data match/administrative wage match, such as the National Directory of New Hires •Post-Exit suvey (self-reported) from program participants •Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) •Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings •Self-employment worksheets signed and attested to by program participants •Detailed case notes verified by employer and program staff.

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Type of Employment Match 2nd Quarter After Exit Quarter (WIOA)	X	X	X	X	Consistent with TEGL 26-16: • Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate) • Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service) • Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires) • State New Hires Registry • Signed Follow-up Survey Response from Program Participants • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16) • Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation • Railroad Retirement System • Quarterly Tax Payment Forms (such as IRS Form 941) • A Signed Letter from an Employer on Company Letterhead (attesting to an individual's employment status and earnings) • Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants • Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)
Employed in 3rd Quarter After Exit Quarter (WIOA)	X	X	X	X	• UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Type of Employment Match 3rd Quarter After Exit Quarter (WIOA)	X	X	X	X	Consistent with TEGL 26-16: • Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate) • Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service) • Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires) • State New Hires Registry • Signed Follow-up Survey Response from Program Participants • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16) • Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation • Railroad Retirement System • Quarterly Tax Payment Forms (such as IRS Form 941) • A Signed Letter from an Employer on Company Letterhead (attesting to an individual's employment status and earnings) • Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants • Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)
Employed in 4th Quarter After Exit Quarter	X	X	X	X	• UI wage data match/administrative

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Type of Employment Match 4th Quarter After Exit Quarter (WIOA)	X	X	X	X	Consistent with TEGL 26-16: • Cross-Match with State and Out-of-State UI Quarterly Wage Records (intrastate and interstate) • Federal Government Employment Records (such as military employment, Department of Defense, Office of Personnel Management, and US Postal Service) • Cross-Match with Federal Administrative Wage Record Databases (such as the National Directory of New Hires) • State New Hires Registry • Signed Follow-up Survey Response from Program Participants • Copy of Pay Check Stubs, Payroll Slip, or Leave and Earnings Statements (minimum of two per TEGL 26-16) • Income Tax Records, W-2 Form, or Other Records from the State Department of Revenue or Taxation • Railroad Retirement System • Quarterly Tax Payment Forms (such as IRS Form 941) • A Signed Letter from an Employer on Company Letterhead (attesting to an individual's employment status and earnings) • Self-Employment or Sales Commission Worksheets Signed and Attested to by Program Participants • Cross-Match with Partner Program Administrative Databases (such as TANF, SNAP or other public assistance programs)
Employment Related to Training (2nd Quarter After Exit) (WIOA)	X	X	X	X	• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services • Surveys • Record sharing and/or automated record matching with other federal employment and administrative databases • Other out of state federal wage record
Occupational Code	X	X	X		• UI Wage Records
Entered Non-Traditional Employment		X	X		• UI Wage Records
Occupational Code of Employment 2nd Quarter After Exit Quarter (If available)	X	X	X		• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Occupational Code of Employment 4th Quarter After Exit Quarter (If available)	X	X	X		• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services • Surveys • Record sharing and/or automated record matching with other federal employment and administrative databases • Other out of state federal wage record systems • Case notes
Industry Code of Employment 1st Quarter After Exit Quarter	X	X	X		• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services • Surveys • Record sharing and/or automated record matching with other federal employment and administrative databases • Other out of state federal wage record systems • Case notes
Industry Code of Employment 2nd Quarter After Exit Quarter	X	X	X		• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services • Surveys • Record sharing and/or automated record matching with other federal employment and administrative databases • Other out of state federal wage record systems • Case notes
Industry Code of Employment 3rd Quarter After Exit Quarter	X	X	X		• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services • Surveys • Record sharing and/or automated record matching with other federal employment and administrative databases • Other out of state federal wage record systems • Case notes
Industry Code of Employment 4th Quarter After Exit Quarter	X	X	X		• UI Wage Records • Supplemental data sources defined by TEGL 26-16 follow up services • Surveys • Record sharing and/or automated record matching with other federal employment and administrative databases • Other out of state federal wage record systems • Case notes

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Retention with the same employer in the 2nd Quarter and the 4th Quarter (WIOA)	X	X	X	X	Consistent with TEGL 26-16, Change 1: • UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.
Earnings 3rd Quarter Prior to Participation Quarter	X	X	X		Consistent with TEGL 26-16, Change 1: • UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.
Earnings 2nd Quarter Prior to Participation Quarter	X	X	X		Consistent with TEGL 26-16, Change 1: • UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Earnings 1st Quarter Prior to Participation Quarter	X	X	X		Consistent with TEGL 26-16, Change 1: • UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.
Earnings 1st Quarter After Exit Quarter (WIOA)	X	X	X		Consistent with TEGL 26-16, Change 1: • UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.
Earnings 2nd Quarter After Exit Quarter (WIOA)	X	X	X	X	• UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.
Earnings 3rd Quarter After Exit Quarter	X	X	X		Consistent with TEGL 26-16, Change 1:

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Earnings 4th Quarter After Exit Quarter (WIOA)	X	X	X		Consistent with TEGL 26-16, Change 1: • UI wage data match/administrative wage match, such as the National Directory of New Hires • Post-Exit survey (self-reported) from program participants • Paycheck stubs, and tax records (i.e., W2 form, Quarterly tax payment forms, such as an IRS form 941, etc.) • Signed letter or other information from employer on company letterhead attesting to an individual's employment status and earnings • Self-employment worksheets signed and attested to by program participants • Detailed case notes verified by employer and program staff.
Type of Recognized Credential (WIOA)	X	X	X	X	• Cross-Match • Copy of credential • Copy of school record •Post-Exit survey from program participants • Case notes documenting information obtained from education or training provider
Date Attained Recognized Credential (WIOA)	X	X	X	X	• Cross-Match • Copy of credential • Copy of school record • Follow-up survey from program participants • Case notes documenting information obtained from education or training provider
Type of Recognized Credential #2 (WIOA)		X	X	X	• Cross-Match • Copy of credential • Copy of school record • Follow-up survey from program participants • Case notes documenting information obtained from education or training provider
Date Attained Recognized Credential #2 (WIOA)		X	X	X	• Cross-Match • Copy of credential • Copy of school record • Follow-up survey from program participants • Case notes documenting information obtained from education or training provider
Type of Recognized Credential #3 (WIOA)		X	X	X	• Cross-Match • Copy of credential • Copy of school record • Follow-up survey from program participants • Case notes documenting information obtained from education or training provider

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date Attained Recognized Credential #3 (WIOA)		X	X	X	• Cross-Match • Copy of credential • Copy of school record • Follow-up survey from program participants • Case notes documenting information obtained from education or training provider
Date of Most Recent Measurable Skill Gains: Educational Functioning Level (EFL) (WIOA)		X	X	X	• Pre- and post-test results measuring EFL gain • Adult High School transcript showing EFL gain through the awarding of credits or Carnegie units • Postsecondary education or training enrollment determined through data match, survey documentation, or program notes • Pre- and post-test results measuring EFL gain • Adult High School transcript showing EFL gain through the awarding of credits or Carnegie units • Postsecondary education or training enrollment determined through data match, survey documentation, or program notes • Test results of a passing subtest on a State-recognized high school equivalency examination.
Date of Most Recent Measurable Skill Gains: Postsecondary Transcript/Report Card (WIOA)		X	X	X	• Transcript • Report Card
Date of Most Recent Measurable Skill Gains: Secondary Transcript/Report Card (WIOA)		X	X	X	• Transcript • Report Card
Date of Most Recent Measurable Skill Gains: Training Milestone (WIOA)		X	X	X	• Documentation of a skill gained through OJT or Registered Apprenticeship • Contract and/or evaluation from employer or training provider documenting a skill gain • Progress report from employer documenting a skill gain
Date of Most Recent Measurable Skill Gains: Skills Progression (WIOA)		X	X	X	• Results of knowledge-based exam or certification of completion • Documentation demonstrating progress in attaining technical or occupational skills through an exam or benchmark attainment • Documentation from training provider or employer • Copy of a credential that is required for a particular occupation and only is earned after the passage of an exam
Date Enrolled During Program Participation in an Education or Training Program Leading to a Recognized Postsecondary Credential or Employment (WIOA)		X	X	X	• Case notes • School records or verification of enrollment • Transcript or report card • Cross-Match

Data Element Name	Wagner Peyser	WIOA Adults	WIOA DW	WIOA Youth	Source
Date Completed, During Program Participation, an Education or Training Program Leading to a Recognized Postsecondary Credential or Employment (WIOA)		X	X	X	• Cross-Match • Copy of Diploma, Credential or Degree Awarded by Education Institution • Applicable Records from Education Institution (recognized equivalency certificate, transcripts, report card, enrollment record or other school documentation) • Signed File Documentation with Information Obtained from Education or Training Provider • Case notes • Self-Attestation
Youth 2nd Quarter Placement (Title I) (WIOA)				X	• Cross-Match • Copy of registration record • Case notes • School records or verification of enrollment • Transcript or report card • Vendor/training provider training documentation
Youth 4th Quarter Placement (Title I) (WIOA)				X	• Cross-Match • Copy of registration record • Case notes • School records or verification of enrollment • Transcript or report card • Vendor/training provider training documentation

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CASE MANAGEMENT

WHAT IS CASE MANAGEMENT?

- Assessing the customer for strengths and and obstacles.
- Participating in developing goals and a plan of action.
- Connecting the customer with resources.
- Empowering decision making.
- Preparing the customer in job attainment and retention skills.
- Documenting everything.
- Celebrating achievements.

Case management is the difference between our programs and services.

CASE MANAGEMENT EXPECTATIONS

- Case Management starts with the first conversation and ends when follow-up is completed
- Listen to the customer.
- Provide quality customer service. Non-judgmental, professional, empathetic, and courteous
- While enrolled, monthly contact/activities, at a minimum.
- Timely and quality notes and documentation.
- Accessible service delivery.
- Be aware of resources.

ASSESSMENT

- General Information
- Basic/Academic Skills
- Employment History
- Educational History
- Strengths/Resources
- Obstacles
- Goals/Interests
- Identify Needs

OBSTACLES/CONCERNS

- Health Restrictions
- Legal Issues
- Transportation
- Childcare
- Housing
- Financial
- Food

ASSESSMENT EXAMPLES

SEE POLICY 47

- Interview
- Eligibility
- Interest Inventories
- Basic Skills - Policy
- Employability Preparation Skills
- Industry/Occupational Skills
- Budget Worksheet
- And more!

EXAMPLES OF ASSESSMENT QUESTIONS

- Tell me about yourself.
- What made you decide to go into X field?
- What are your concerns about going to college?
- What was your favorite job? Least favorite? Why?
- Tell me about your past education – what did you like, not like?
- How would your friends or co-workers describe you?
- What do you see as your greatest strengths? Obstacles?
- Tell me about your previous job searches.

KEE SUITE RELATED TAB

Tool Tests

- Basic Skill Assessment
- Career Interest Assessment
- Other

Career Goals

- Short and long term at time of data entry
- Goals can be modified and/or new goals set

KEE SUITE ASSESSMENT TAB

- Individual Information - Identifying information
- Skills & Interests
  - Current skills
  - Summary of self
  - *Specific interest leading to employment
- *Challenges and/or Stressors
  - Drop-down box
  - Other requires explanation
- *Convictions & Pending Charges
  - “Do you have an offender charge?” (Yes or No)
  - If yes, more information will be required.
- *Dependent Childcare Assistance
  - Childcare provider
  - Backup

KEE SUITE ASSESSMENT *(continued)*

- Employment Barriers
  - *Can they accept a job?
  - Issues with past work experiences
  - *Credit check
  - *Pass a drug test
  - *Indicate a need for training
  - Challenges in upgrading employment
  - Discussed relevant work experience
  - *Part of special programs such as NDWG
- Transportation
  - *Driver’s license
  - Own a vehicle
  - Issues with vehicle (insurance, etc.)
  - Other means of transportation
  - *Maximum willingness to drive

KEE SUITE ASSESSMENT *(continued)*

- Well-being
  - Any physical restrictions
  - Health needs (mental/physical)
  - Treated for current condition
  - Additional health details (can be N/A for items if not relevant)
- *Financial - Spends more than they make; if yes, explain
- *Household and social issues - Drug/Alcohol concerns
- *Additional Questions
  - Barrier that prevents a job search
  - Interviewing barriers

KEE SUITE
INDIVIDUAL EMPLOYMENT PLAN (IEP)

- Work History
- Labor Market Information
  - Reviewed Current Labor Market
  - LMI Indicate Marketable Skills
  - Suitable employment is available based on Current Labor Market
- Industry Sector
  - Select the industry sector to which you want to align the customer
  - Drop-down option with other below if not listed
  - Is it local area approved “Occupational Training List?”
- Strengths
  - Skills based
  - Work experience
  - Interest
  - Interest
  - Training

KEE SUITE
INDIVIDUAL EMPLOYMENT PLAN (IEP)

- Goals - Should populate from related tab
- Tool Test - Should populate from related tab
- Challenges - Should populate from assessment tab
- To do - Can list the items the customer is “assigned” to do
- **Youth** Elements
  - Only for youth
  - Choose the element(s) that you and the customer agree will be beneficial
  - Update these throughout the program
  - Elements selected must be identified in services and notes when related service/activity has started.
- Trade

RESOURCE GUIDE

- Area Development Districts
- Department for Community Based Services
- Food Banks/Clothing Banks
- Career Development Office
- Family Resource Centers
- Goodwill
- Vocational Rehabilitation
- Veteran’s Programs
- Youth Programs
- Farm and Migrant Workers
- Community Action Programs
- Mental Health
- Rehabilitation Services
- Low-Income Housing/Homeless Shelters
- Health Department Services

- www.tencocareercenter.com
- https://kynect.ky.gov

ASSESSMENT THROUGHOUT SERVICES

Ask Questions:

*Tell me about your classes?
*What is your favorite (or least favorite class?
*What kinds of things are you doing at your clinicals?
*How did that test go?
*Have you gotten an answer on your financial aid?
*How are your online classes going?
*Having kids and going to school is hard: How are you doing?
*Were you able to follow-up on that job lead we discussed?
*What Can I help you with?

Getting & Keeping a Job

1. Updated Resume
2. Job Search Skills
3. Complete Applications
4. Practice Interviewing
5. Link with resources such as CDO, OJT, Expungement Fairs
6. Follow-up with employment information, job fairs, and weekly job lists.

Customer’s Plan

- Gather information through an Assessment
- Determine and document next steps
- Implement steps
- Evaluate progress

Help the customer have a Plan B.

CELEBRATE GOAL ATTAINMENT

WIOA Low-Income Determination

For WIOA you will need to adhere to WIOA Section 3(36)(A)(ii) which defines a low income individual as an individual who:

a) Receives, has received in the past six (6) months, or is a member of a family that is receiving or has received in the past six (6) months, assistance through:
   i. The Supplemental Nutrition Assistance Program (SNAP);
   ii. Temporary Assistance for Needy Families (TANF) programs;
   iii. The Supplemental Security Income (SSI) program; or
   iv. State or local income-based public assistance.

b) Is a homeless individual, as defined in the Violence Against Women Act, or the McKinney-Vento Homeless Assistance Act (includes an individual who is “couch surfing” or has a temporary residence);

c) Receives or is eligible to receive a free or reduced-price lunch under the Richard B. Russell National School Lunch Act;

d) Is a foster child on behalf of whom State or local government payments are made; or

e) Is in a family with a total family income that does not exceed the higher of:
   - 70 percent of the Lower Living Standard Income Level (LLSIL); or
   - The Lower Living Standard (LLS)/Poverty Level.

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This last criterion is referred to as “income guidelines.” For the WIOA Youth program, one (1) additional low-income criterion is that the individual is living in a High Poverty area.

Determining Yearly Income for LLSIL

To determine the yearly income for the LLSIL, you would follow the guidelines below:

1. Determine the current family size of the participant.
   – Family is defined as two (2) or more people related by blood, marriage, or decree of court, who are living in a single residence, and are included in one (1) or more of the following categories:
     - A married couple and dependent children;
     - A parent or guardian and dependent children; or
     - A married couple (WIOA 20 CFR 675.300).
2. Calculate the customer's annualized total family income: You will take the household income and determine what that amount would be annually. The easiest way to do this is determine the gross amount of income from every member of the household for one (1) month and multiply that amount by 12 to get the yearly income.
3. You will then look at the updated LLSIL chart in KEE Suite to determine if the yearly household income is considered low income.

Included Income, Excluded Income, and Examples of Methods to Calculate Income Tool

Use this attachment in conjunction with TEGL 18-16, Change 2. The definition of a low-income individual under the Workforce Innovation and Opportunity Act (WIOA) Section 3(36) does not exclude unemployment compensation (this includes Pandemic Emergency Unemployment Compensation, Pandemic Unemployment Assistance, and Extended Benefits), old-age survivors insurance benefits, or child support payments from income calculations as they were previously excluded under the Workforce Investment Act (WIA) Section 101(25). ETA used the U.S. Department of Labor's Bureau of Labor Statistics definition of income to develop this tool.[1] This tool aims to increase NFJP grantees' understanding of what types of income would count towards the income requirement to qualify for NFJP and provide examples of methods to calculate income.

A. Examples of the types of income that could be included when making eligibility determination based on income are outlined in the table below.

Included Income	
Income: Earnings before Taxes	• Wages and salaries;[2] • Self-employment income; • Social Security (Old-Age Survivors and Disability Insurance), private and government retirement; • Interest, dividends, rental income, and other property income; • Unemployment and workers' compensation; and • Regular contributions for support (alimony and child support) – Please note, the term *regular* for this source of income. If an individual is a parent and cannot rely on receiving contributions such as child support, grantees may consider this when calculating income. Important to Know: When gathering information about an individual's income, please note that some types of Federal, State, or local income-based public assistance may automatically qualify someone as low-income. • For example, under WIOA Section 3(36)(A)(i), an individual meets the low-income eligibility when they receive, or in the past 6 months has received, or is a member of a family that is receiving or in the past 6 months has received, assistance through the supplemental nutrition assistance program (SNAP) established under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.); the program of block grants to States for temporary assistance for needy families program (TANF) under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.); or the supplemental security income (SSI) program established under

[1] https://www.bls.gov/cex/csxgloss.htm
[2] https://www.bls.gov/bls/glossary.htm

	title XVI of the Social Security Act (42 U.S.C. 1381 et seq.); or State or local income-based public assistance; • Additionally, per WIOA Section 3(50), the term "public assistance" means Federal, State, or local government cash payments for which eligibility is determined by a needs or income test. State or local income-based public assistance payments, which includes but is not limited to the following type of assistance: • Utility • Child care • Nutrition • Housing

B. Examples of types of income that could be excluded when making eligibility determination based on income are outlined in the table below. When calculating income, do not include any allowance, earnings, or payments stemming from participation in WIOA Title I programs. Per 20 CFR 683.275 (d), allowances, earnings, and payments to individuals participating in programs under title I of WIOA are not considered as income for purposes of determining eligibility for and the amount of income transfer and in-kind aid furnished under any Federal or Federally-assisted program based on need, other than as provided under the Social Security Act (42 U.S.C. 301 *et seq.*).

Excluded Income	
Volunteer/Job Training Payments	• Allowances, earnings, and payments to individuals participating in programs under title I of WIOA; • Any payment to volunteers under Title I (VISTA and others) and Title II (RSVP, foster grandparents, and others) of the Domestic Volunteer Service Act of 1973; • Payments to volunteers under Section 8(b)(1)(B) of the Small Business Act (SCORE and ACE); and • Payments and allowances to individuals participating in AmeriCorps to the extent excluded by the National and Community Service Act of 1990.
Student Financial Aid	• Student financial assistance received under Title IV of the Higher Education Act of 1965, including the Pell Grant, Supplemental Education Opportunity Grant, State Student Incentive Grants, National Direct Student Loan, PLUS, College Work Study, and

	Byrd Honor Scholarship Programs, to the extent excluded by the Act; and • Payments received under the Carl D. Perkins Vocational Education Act, as amended by the Carl D. Perkins Vocational and Applied Technology Act Amendments of 1990, P.L. 101-392.
Military Service-related Income	• Any amounts received as military pay or allowances by any person who served on active duty, and certain other specified benefits paid while on active duty or paid by the Department of Veterans Affairs (VA) for vocational rehabilitation, disability payments, or related VA-funded programs are not to be considered as income, in accordance with VA Title 38 U.S.C. 4213 and 20 CFR 683.230. For additional information about assisting Veterans, please see Training and Employment Guidance Letter NO. 10-09. All pay and/or financial allowances earned while a veteran was on active duty are exempt. Title 38 U.S.C. 4213 also exempts from inclusion in "low income" calculations any financial benefits received by a covered person under the following Chapters of Title 38 of the U.S. Code: 11. Compensation for service-connected disability or death. 13. Dependency and indemnity compensation for service-connected deaths. 30. All-volunteer force educational assistance program. 31. Training and rehabilitation for veterans with service-connected disabilities. 35. Survivors' and dependents' educational assistance. 36. Administration of educational benefits Also excluded from "low income" calculations are benefits received under Chapter 106 of Title 10 U.S. Code, Educational assistance for members of the selected reserve. **Note:** Pension payments authorized by Title 10 U.S. Code, such as those received by military retirees whether or not their retirement was based on disability, are not exempt and are to be included in "low income" calculations. Also not exempt are pension benefits paid under Chapter 15 of Title 38 U.S. Code.
Lump sum payments	• Lump sum payments or large cash settlements are not counted as income since they are not received on a regular basis. These funds may be provided as compensation for a loss that must be replaced, such as payment from an insurance company for fire damage to a house. **Note:** When lump sum payments are put into a savings account and the household regularly draws from that account for living expenses, the amount withdrawn is counted as income.

Annual Gross Income Calculation Sheet

Instructions: You must have one full month's worth of income documentation in paystubs. Use only the gross pay amount shown on the paystubs, including any overtime, bonuses, commissions, or other gross earnings paid during that month. Do not use net pay.

Gross Monthly Income: $___________________ × 12

Gross Annual Income: $___________________

Notes/Explanation:

____

WORKFORCE INNOVATION AND OPPORTUNITY ACT, TITLE 1
WIOA – 2

IDENTIFYING INFORMATION

Doe	Jane	M
Applicant's Last Name	First Name	M.I.

EKOS ID# ____________________

PART A

APPLICANT STATEMENT/SELF-ATTESTATION I hereby certify, under penalty of perjury, that

I, Jane Doe, am currently not in the labor force as defined by PIRL element 400 and therefore have no income.

(If applicant cannot obtain satisfactory witness or provide a telephone contact, explain in area above.)

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

Jane Doe	7/17/26		
Applicant's Signature	Date	Parent/Legal Guardian's Signature	Date

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

Signature of Corroborating Witness	Date	Witness' Relationship to Applicant

Address of Witness	Phone Number of Witness

FOR OFFICE USE ONLY

PART B

ELIGIBILITY ITEM	DOCUMENT INSPECTION Document or computer screen/program viewed Document # and expiration date (if available)	TELEPHONE/EMAIL VERIFICATION
		Agency: Individual: Phone #:
		Verification provided:
		Date/time verified

PART C

STAFF STATEMENT For Part A and/or Part B above, I attest that:

☑ The above applicant statement is being used for documentation of the following eligibility criteria: employment status at program entry

☐ The document inspected or computer inquiry verified the item required determining eligibility for the WIOA program.

☐ The infomation recorded by me on this documentwas obtained through telephone contact. If provided by an agent, all information was obtained from data previously determined and recorded in the applicant's records at the agency providing the eligibility verification.

Natasha Olson	7/17/26
Authorized Staff Signature	Date

Directions for Determining High-Poverty Areas for WIOA Youth

Introduction

The Workforce Innovation and Opportunity Act (WIOA) Title I Youth Program contains a provision that allows for youth living in a high-poverty area to automatically meet the low-income eligibility criterion. This criterion applies to all in-school youth and some out-of-school youth in the WIOA Youth Program, and for youth in the Indian and Native American Supplemental Youth Services Program.

This document contains instructions for how to determine whether a youth lives in a high-poverty area for WIOA eligibility purposes. These instructions reference the layout of the Census Bureau's website as of July 2024. If you run into any problems with these instructions or if you have any questions, please email **youth.services@dol.gov** for technical assistance.

Background Information:

WIOA regulations at **20 CFR § 681.260** define high-poverty areas as a Census tract, a set of contiguous Census tracts, an American Indian Reservation, Oklahoma Tribal Statistical Area (**as defined by the U.S. Census Bureau**), Alaska Native Village Statistical Area or Alaska Native Regional Corporation Area, Native Hawaiian Homeland Area, or other tribal land as defined by the Secretary in guidance or county that has a poverty rate of at least 25 percent as set every 5 years using American Community Survey 5-Year data. (Please note that this definition does not include cities, towns, or sets of non-contiguous Census tracts.)

For more information about the low-income WIOA Youth eligibility criterion, please review **Training and Employment Guidance Letter (TEGL) 21-16**.

INDIAN AND NATIVE AMERICAN SUPPLEMENTAL YOUTH SERVICES PROGRAM: The regulations at **20 CFR § 684.130** allow Indian and Native American Program grantees to use either the poverty rate of an area's total population or the poverty rate of an area's Indian and Native American population in determining whether the poverty rate of the area meets the 25 percent threshold.

For more information about the Indian and Native American Supplemental Youth Services Program poverty guidelines, please visit the **Youth Program Poverty Guidelines page on WorkforceGPS**.

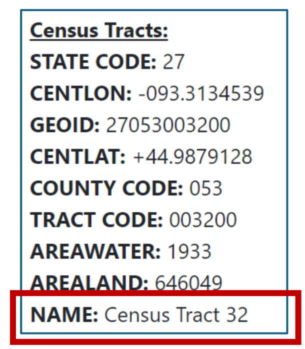
Step-by-Step Instructions for Determining High-Poverty Areas

These instructions are divided up by section. Use:

- **Section A** to identify the youth's Census tract and county;
- **Section B** to prepare the Census Bureau's website for use in Sections C and D;
- **Section C** to identify whether the youth lives in a high-poverty Census tract, county, American Indian Reservation, Oklahoma Tribal Statistical Area (OTSA), Alaska Native Village Statistical Area (ANVSA), Alaska Native Regional Corporation (ANRC), or Native Hawaiian Homeland area; and
- **Section D** to check whether the youth lives in a high-poverty set of contiguous Census tracts if the youth does not qualify as low-income under Section C.

Section A: Use a youth's street address to determine their Census tract and county.

1. Go to: https://geocoding.geo.census.gov/geocoder/geographies/address?form
2. Type in the youth's residential address in the designated boxes.
3. Leave the default selections under Benchmark and Vintage (i.e., "Public_AR_Current" and "Current_Current," respectively).
4. Click ***Get Results***.
5. Scroll down. The two relevant sections are **Counties** and **Census Tracts**. Under each of these sections, take note of the output next to "**NAME**."



Section B: Set up the data table on the Census Bureau's website.

1. Go to: https://data.census.gov/
2. In the search box, type "S1701" and select **S1701: Poverty Status in the Past 12 Months** from the dropdown menu that appears. You will be redirected to the table.
3. **Identify the menu** at the top of the page that contains a variety of icons, including Notes, Geos, Topics, Codes, etc. These instructions will reference this as "the toolbar." Depending on the size of your screen, some of the icons referenced in these instructions may be under "More Tools" in the toolbar.

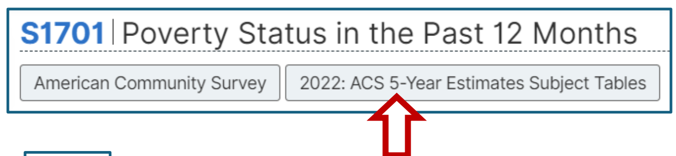
4. **Change the data source** for the table to the most recent ACS 5-Year Estimates. One way to do this is to click the icon for ***Dataset*** in the toolbar. In the dropdown that appears, select **2022: ACS 5-Year Estimate Subject Tables** or the most recent ACS 5-Year Estimates dataset that is available.
5. [OPTIONAL] Click the icon for ***Margin of Error*** (which may be under "More Tools") in the toolbar to deselect it. This will clean up the table by hiding columns that you do not need for this process.

Section C: Determine whether a youth lives in a high-poverty county, Census tract, American Indian Reservation, OTSA, ANVSA, ANRC, or Native Hawaiian Homeland Area.

Follow the instructions in this section to determine whether a youth qualifies as low-income based on whether they reside in a high-poverty area. You may check the poverty rates of multiple types of geographic areas permitted under **WIOA regulations** to find one that qualifies as high poverty. For instance, if you find that the youth's residential county does not have a poverty rate of at least 25 percent, then you can check their Census tract. If the youth lives on an American Indian Reservation or in an OTSA, ANVSA, ANRC, or Native Hawaiian Homeland area, then you may also check the poverty rates of those geographic areas.

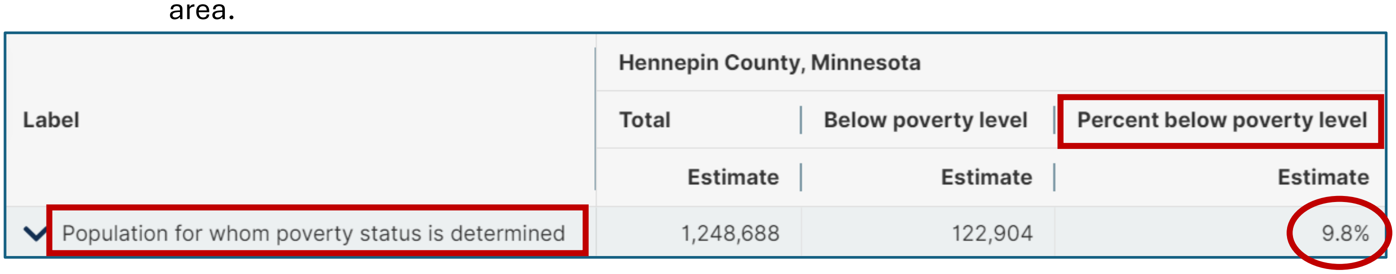
It does not matter the order in which you check the types of geographic areas. As long as one of the types of geographic areas permitted under WIOA regulations has a poverty rate of at least 25 percent, then the youth who lives in that geographic area qualifies as low-income.

1. Use the table that you set up in **Section B**: **S1701: Poverty Status in the Past 12 Months**. Confirm that your dataset is the most recent ACS 5-Year Estimates.



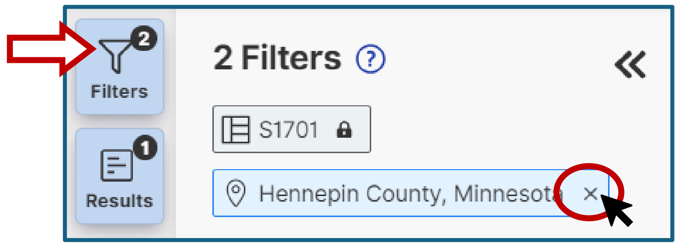
2. Select the ***Geos*** icon in the toolbar.

3. Select a type of geographic area in the dropdown to check. This may include:
   a. County
   b. Census Tract
   c. Alaska Native Regional Corporation
   d. American Indian Area/Alaska Native Area (Reservation or Statistical Entity Only)
   e. American Indian Area/Alaska Native Area/Hawaiian Home Land
4. Navigate through the menu to select the youth's residential geographic area.
5. Exit out of the Geos selector by clicking the ***X*** in the corner of the dropdown.
6. Confirm that your geographic area was correctly selected by checking that it is written in the header of the table (directly underneath the toolbar).
7. Identify the percent below poverty level for the geographic area. This is found in the top row of the table, "**Population for whom poverty status is determined**," under the column header "**Percent below poverty level, Estimate**" for your selected geographic area.



Label	Hennepin County, Minnesota		
	Total	Below poverty level	Percent below poverty level
	Estimate	Estimate	Estimate
Population for whom poverty status is determined	1,248,688	122,904	9.8%

8. If the percentage listed is **above 25%**, then the geographic area is considered to be high poverty under WIOA regulations. Document this for the youth's file and you are done. If the percentage is 25% or below, move on to the next step.
9. If the percentage listed is **25% or below**, then you may repeat these steps in Section C to check other types of geographic areas. (For instance, if the youth's county is not considered high poverty, you can check their Census tract, or vice versa.) Clear your existing geographic filter and go back to step #2 above to check another type of geographic area. To clear your geographic filters:
    a. Click the ***Filters*** icon on the far left of the screen.
    b. Select the **X** next to the geographic filter(s) you want to remove.
    c. Click the ***Filters*** icon again to hide the section.



   If you have already repeated Section C and you have determined that the youth does not live in a high-poverty county, Census tract, American Indian Reservation, OTSA, ANVSA, ANRC, or Native Hawaiian Homeland area, then you can check if they live in a high-poverty set of contiguous Census tracts by following the instructions in **Section D** on the next page.

10. **FOR INDIAN AND NATIVE AMERICAN PROGRAM GRANTEES ONLY:** If the percentage listed for the **population for whom poverty status is determined** is **25% or below**, you may check the poverty level for the area's American Indian and Alaska Native population alone. To do this:
    a. Scroll down in the table until you see the race and ethnicity breakdown under "RACE AND HISPANIC OR LATINO ORIGIN" in the left column.
    b. Find the "**Percent below poverty level, Estimate**" for the American Indian and Alaska Native population of your selected geographic area.

   If the percentage below poverty level for the area's American Indian and Alaska Native population alone is **above 25%**, then the youth qualifies as low income. Document this for the youth's file and you are done.

   If the percentage is **25% or below**, then you may repeat these steps in Section C to check other types of geographic areas. Clear your existing geographic filters and go back to step #2 above to check another type of geographic area.

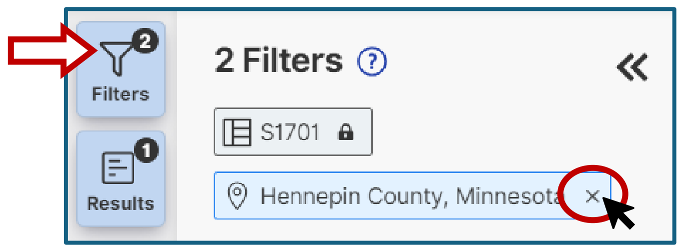
   If you have already repeated Section C and you have determined that the youth does not live in a high-poverty county, Census tract, American Indian Reservation, OTSA, ANVSA, ANRC, or Native Hawaiian Homeland area, then you can check if they live in a high-poverty set of contiguous Census tracts by following the instructions in **Section D** on the next page.

<u>Section D</u>: Identify a set of contiguous high-poverty Census tracts to determine eligibility or target recruitment and services.

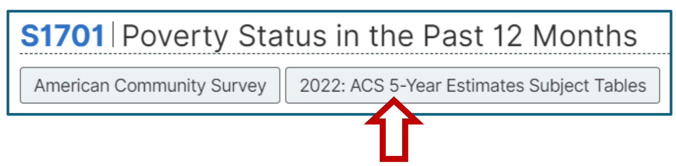
A youth may be eligible for WIOA Youth services if they reside within a set of contiguous Census tracts that has a combined poverty rate of at least 25 percent. The instructions in this section describe how to identify a set of contiguous Census tracts and check their combined poverty rate.

Identifying contiguous high-poverty Census tracts can also be helpful when creating and implementing a targeted recruitment strategy for WIOA programs.

1. Use the table that you set up in [Section B](#): **S1701: Poverty Status in the Past 12 Months.**
2. If applicable, clear any previously selected geographic filters you have from Section C.
    a. Click the ***Filters*** icon on the far left of the screen.
    b. Select the **X** next to the geographic filter(s) you want to remove.
    c. Click the ***Filters*** icon again to hide the section.

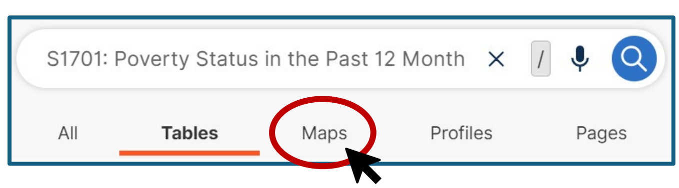


3. Confirm that the data source is the most recent ACS 5-Year Estimates by looking underneath the table title, **S1701: Poverty Status in the Past 12 Months.**



4. Select the ***Geos*** icon in the toolbar.
5. Select ***Census Tract*** from the dropdown and select the correct state, county, then Census tract for the youth. (See [Section A](#) if you need help identifying the youth's Census tract.)

   If you see "No results found" here, your data source may be incorrectly set to the ACS 1-Year Estimates. Check that your data source is set to the most recent ACS 5-Year Estimates and try again.
6. Exit out of the Geos selector by clicking the ***X*** in the corner of the dropdown.
7. Select the ***Maps*** tab directly above the toolbar (in between "Tables" and "Profiles"). This option may also show up as an icon in the toolbar under "More Tools."

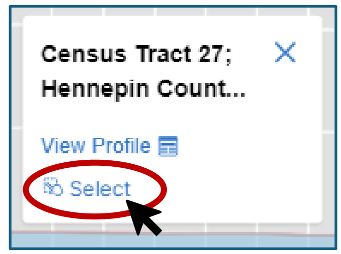


8. The map that appears should automatically be centered and zoomed in on the youth's Census tract. The Census tract should be shaded, indicating that it is selected. (If this is not the case, check that your Geos are selected correctly and try again.)

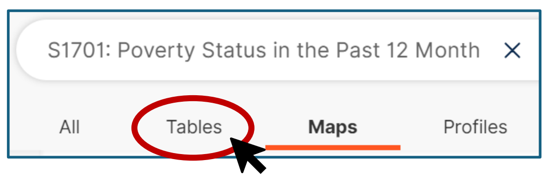
TIPS FOR USING THE MAP:

- To zoom in and out, you can use your mouse, trackpad, or touchscreen to scroll, or you can use the plus and minus buttons in the top right corner of the map.
- To move across the map, you can click the map and drag in any direction or use your arrow keys after you have selected the map.
- Adjust the color scheme of the map for improved visibility by selecting the ***Colors*** icon in the toolbar and selecting your preferred color scheme.

9. Select one or more additional Census tracts.
    a. Click on Census tracts that are contiguous to (i.e., **share a border with**) the youth's residential Census tract.
    b. When you click on a Census tract, a small pop-up will appear. Click ***Select*** on the pop-up. The Census tract will become shaded indicating that it has been selected.
    c. Click on the Census tract again to view the individual tract's poverty rate or to deselect it by clicking ***Deselect*** in the pop-up.



10. Once you have selected one or more additional Census tracts and you are ready to check if their combined poverty rate is at least 25 percent, select ***Tables*** at the top of the screen between the search bar and the toolbar.



11. [OPTIONAL] Click the icon for ***Margin of Error*** (which may or may not be under "More Tools") in the toolbar to deselect it. This will clean up the table by hiding columns that you do not need for this process.

12. Data for each Census tract that you selected on the map will appear in the table. The data you need are in the top row of the table: **Population for whom poverty status is determined**. You may need to scroll to the right to see all of the data.

13. Calculate the total poverty rate for the set of contiguous Census tracts. To do this:
    a. Add together the **Total, Estimate** for all Census tracts.
    b. Add together the number **Below poverty level, Estimate** for all Census tracts.
    c. Divide the total below poverty level from part (b) by the total population from part (a) to find the proportion of the population that is below the poverty level. Multiply this number by 100 to get the percentage.

TIPS FOR CALCULATING THE TOTAL POVERTY RATE:

- Check out the last page of these instructions for **an example of how to calculate the combined poverty rate of a set of contiguous Census tracts**.
- For this calculation, you can **download the Excel worksheet from WorkforceGPS,** which will do this calculation for you based on the numbers you enter.
- If you would prefer to do the calculations yourself in Excel, you may download the Table from the Census website to Excel by selecting the ***Excel*** icon in the toolbar.

14. If the calculated percentage is **above 25%**, the set of contiguous Census tracts is considered high poverty under WIOA. Document this by downloading the Table to Excel by clicking the ***Excel*** icon in the toolbar under "More Tools" and saving it to the youth's file. At this point, you are done.

15. If the calculated percentage is **25% or below**, you may continue reworking the set of contiguous Census tracts if you think there is another combination that will yield a total poverty rate that is above 25%. To return to the map and continue selecting and deselecting Census tracts, click the ***Maps*** tab between the search bar and the toolbar or select the icon under "More Tools" in the toolbar.

If you have already reworked the set of contiguous Census tracts and you do not find a combination that yields a combined poverty rate of at least 25%, then the youth does not qualify as living in a high-poverty area for WIOA.

16. **FOR INDIAN AND NATIVE AMERICAN PROGRAM GRANTEES ONLY:** If the percentage listed for the set of contiguous Census tracts is **25% or below**, you can check the poverty level for the area's American Indian and Alaska Native population alone. To do this:

a. Scroll down in the table until you see the race and ethnicity breakdown under "RACE AND HISPANIC OR LATINO ORIGIN" in the left column.
b. Use the **Total, Estimate** and **Below poverty level, Estimate** for the American Indian and Alaska Native alone population to calculate the combined poverty rate for the set of contiguous Census tracts.

If the percentage below poverty level for the area's American Indian and Alaska Native population alone is **above 25%**, then the youth qualifies as low income. Document this for the youth's file and you are done.

If the percentage is **25% or below**, you may continue reworking the set of contiguous Census tracts if you think there is another combination that will yield a total poverty rate that is above 25%. To return to the map and continue selecting and deselecting tracts, click the ***Maps*** tab between the search bar and the toolbar or select the icon under "More Tools" in the toolbar.

If you have already reworked the set of contiguous Census tracts and you do not find a combination that yields a combined poverty rate of at least 25%, then the youth does not qualify as living in a high-poverty area for WIOA.

Example: Calculating the Combined Poverty Rate for a Set of Contiguous Census Tracts

This is an example of how to calculate the combined poverty rate of a set of contiguous Census tracts using data for Census tract 27 and Census tract 32.

Label	Census Tract 27; Hennepin County; Minnesota			Census Tract 32; Hennepin County; Minnesota		
	Total	Below poverty l...	Percent belo...	Total	Below poverty l...	Percent belo...
	Estimate	Estimate	Estimate	Estimate	Estimate	Estimate
Population for whom poverty sta...	2,820	889	31.5%	2,136	482	22.6%

The table below is a recreation of the table in the image above:

Label	***Census Tract 27,*** Total, Estimate	***Census Tract 27,*** Below poverty level, Estimate	***Census Tract 27,*** Percent below poverty level, Estimate	***Census Tract 32,*** Total, Estimate	***Census Tract 32,*** Below poverty level, Estimate	***Census Tract 32,*** Percent below poverty level, Estimate
Population for whom poverty status is determined	2,820	889	31.5%	2,136	482	22.6%

a. Add together the **Total, Estimate** for all Census tracts.

2,820 + 2,136 = 4,956

b. Add together the number **Below poverty level, Estimate** for all Census tracts.

889 + 482 = 1,371

c. Divide the total below poverty level from part (b) by the total population from part (a) to find the proportion of the population that is below the poverty level. Multiply this number by 100 to get the percentage.

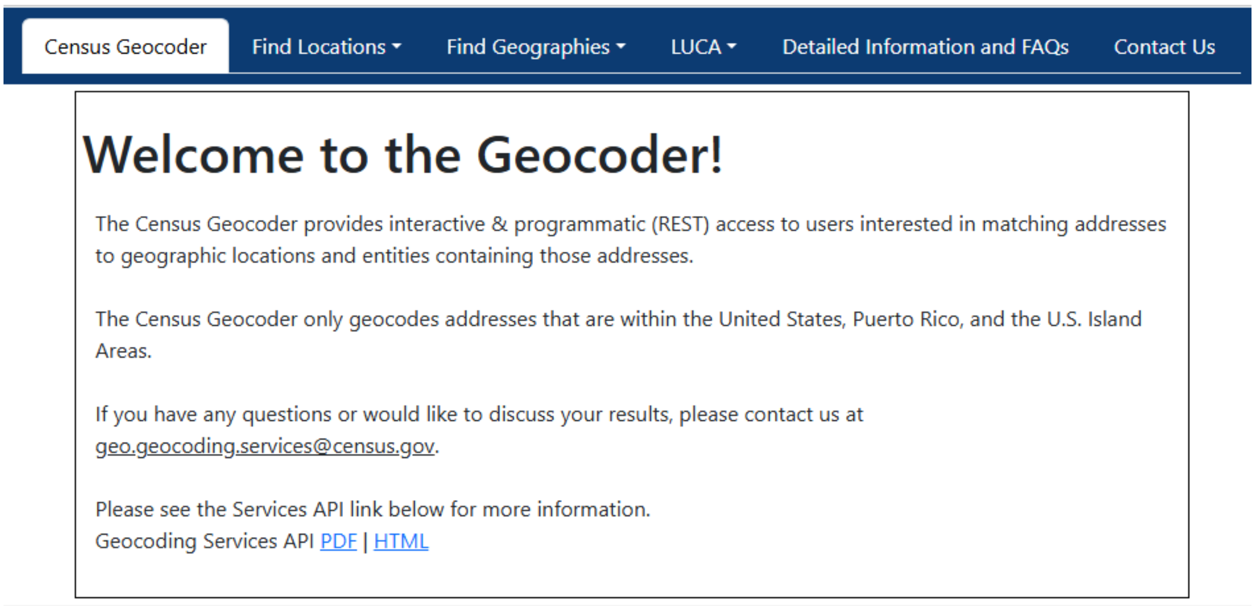
1,371 / 4,956 = 0.277 or 27.7%

The total combined poverty rate for the set of two contiguous Census tracts in the table above is **27.7%**. Because this is greater than 25%, a youth who resides in Census tract 32 would qualify as living in a high poverty set of contiguous Census tracts under WIOA.

How to Calculate High Poverty

Step 1: Finding your participant's census tract and county

1. Go to Census Geocoder.



2. Select the "Find Geographies" tab at the top, then select "Stateside Parsed Address Processing" in the drop-down menu.
3. Enter your participant's address in the appropriate fields
    a. *Note – You do not need to change the "Benchmark" and "Vintage" dropdowns.*
4. Click "Get Results"
    a. *Note – Ensure the "Matched Address" aligns exactly with the address you input. Sometimes Geocoder will return more than one matched address.*
5. Scroll through the populated data and find the "Counties" section and the "Census Tracts" section. Next to the "NAME" line in each section will tell you what county and census tract your participant resides in.

Counties:

STATE CODE: 21
CENTLON: -083.8242140
GEOID: 21161
CENTLAT: +38.5951431
COUNTY CODE: 161
AREAWATER: 16274511
AREALAND: 621926396
NAME: Mason County

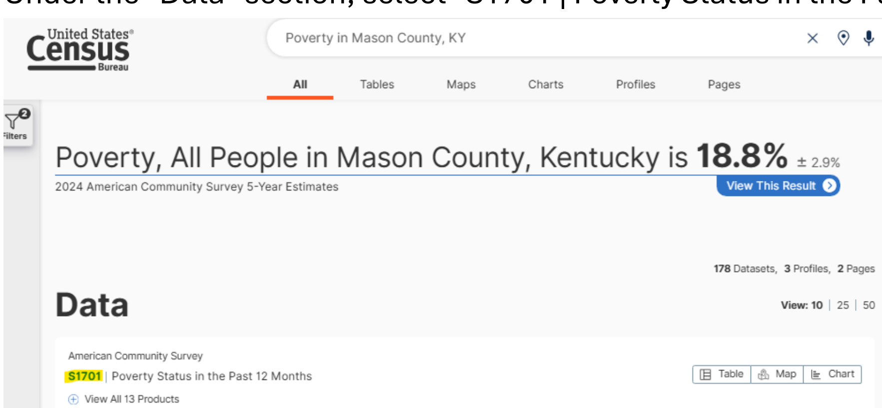
Census Tracts:

STATE CODE: 21
CENTLON: -083.7868304
GEOID: 21161960300
CENTLAT: +38.6584141
COUNTY CODE: 161
TRACT CODE: 960300
AREAWATER: 4761440
AREALAND: 29595026
NAME: Census Tract 9603

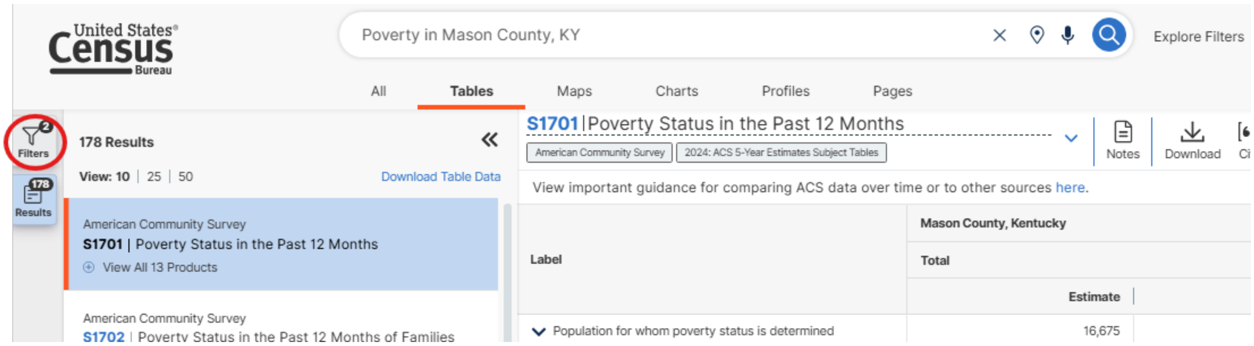
Step 2: Calculating High Poverty

1. Go to data.census.gov (best typed directly in the URL bar)

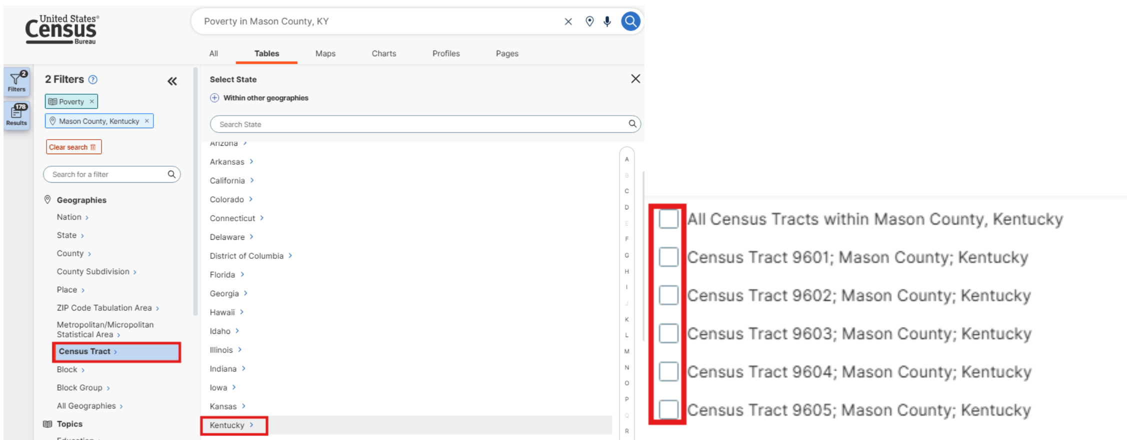
2. In the main search bar, under “Explore Census Data” type “Poverty in (participant’s county), KY.”
3. If your participant’s entire county is high poverty (above 25%), the next page will immediately tell you at the top as pictured. If it is below 25%, continue to the next step.
4. Under the “Data” section, select “S1701 | Poverty Status in the Past 12 Months”.



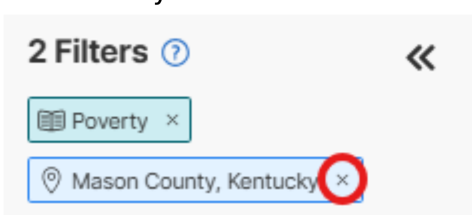
5. A data table will populate. On the lefthand side, select “filters”, then “Census Tract” under the “Geographies” section.



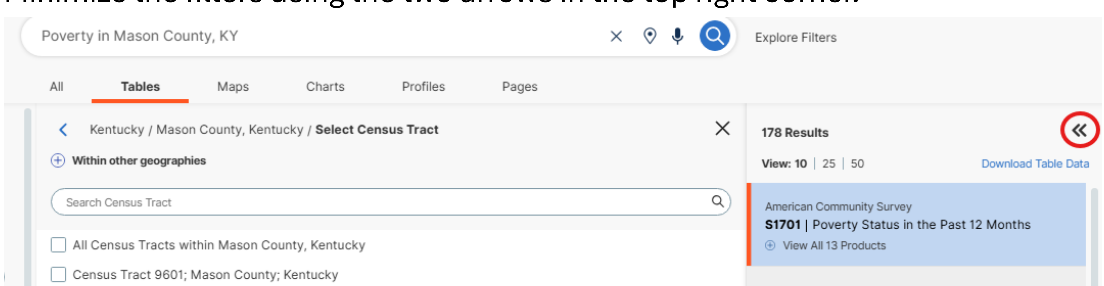
6. Select Kentucky, and then the county that the participant resides in, then census tract they reside in.



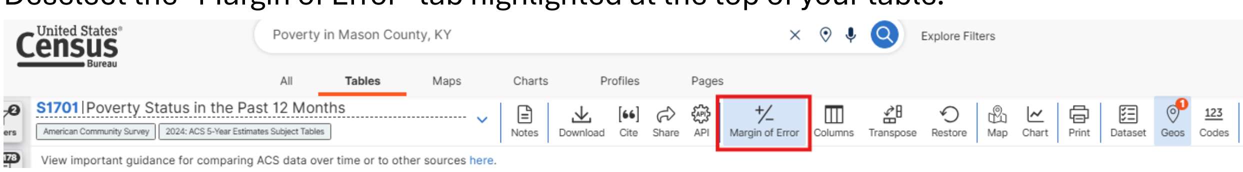
7. On the lefthand side of the filters, click the "X" next to the light blue bar that has their county's name on it.



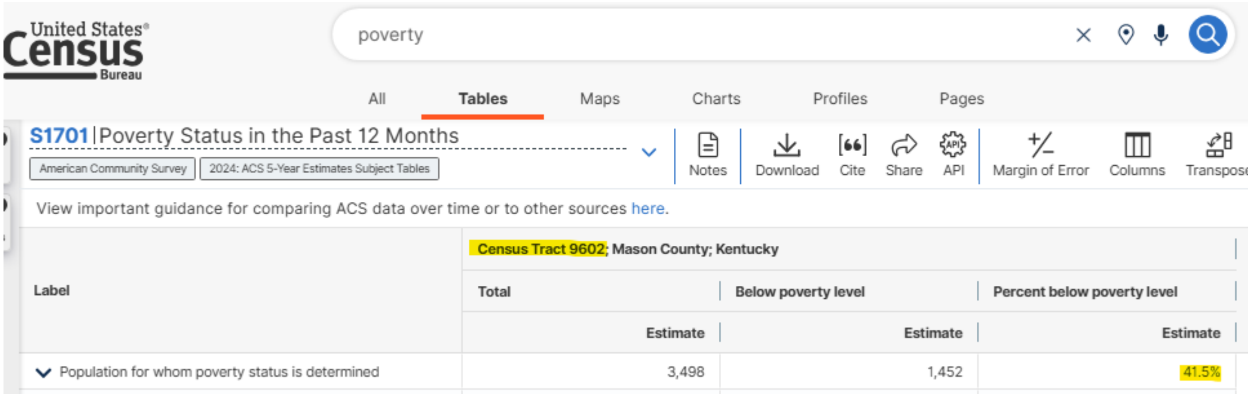
8. Minimize the filters using the two arrows in the top right corner.



9. Deselect the "Margin of Error" tab highlighted at the top of your table.



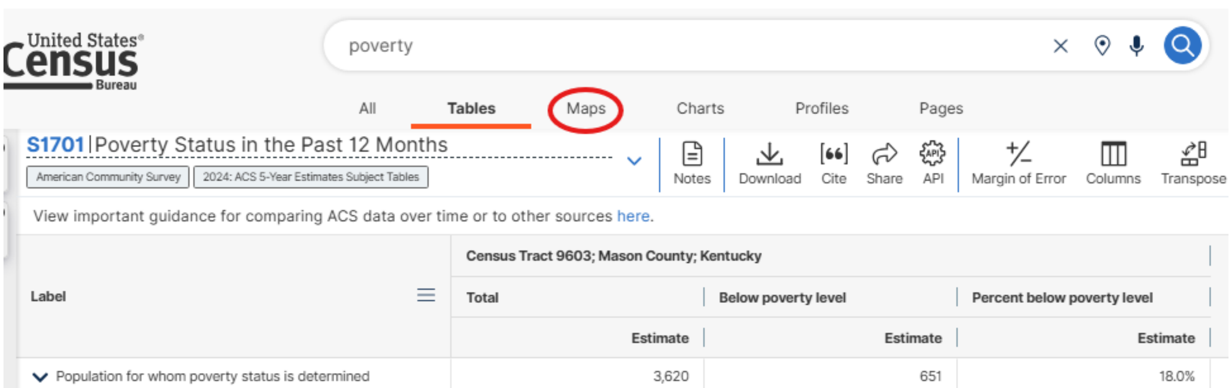
10. This table will show you the poverty percentage of the census tract your participant resides in. It is located on the top line in the "Percent below poverty level" section, under the "Estimate" column.



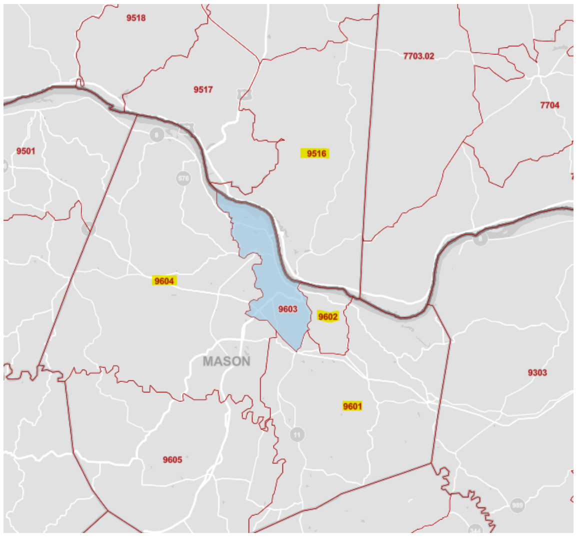
11. If the percentage is above 25%, a screenshot of this table will suffice as documentation for the participant being high poverty. If not, continue to the next step.

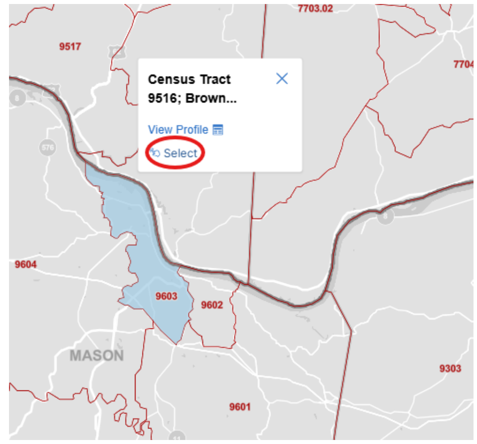
Step 3: Contiguous Census Tracts

1. From the data table, select the "Maps" tab right below the search bar.
    a. *Note – The map should automatically be zoomed in to your selected census tract, highlighted in a light blue. If it is not, select "Layer" at the top of the map, then select "Census Tract" from the layer list and zoom in to your participant's tract*

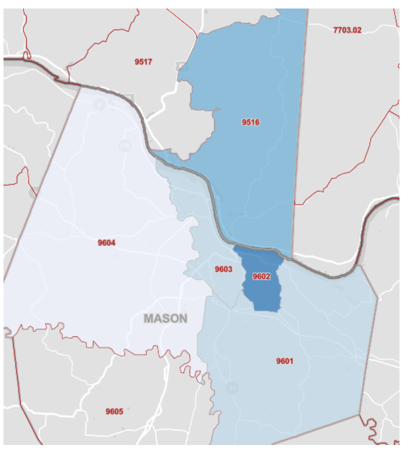


2. On the map, click and "select" each census tract that touches the residential census tract.
    a. *Note – It does not matter if bordering census tracts cross state or county lines. If they are touching the residential tract, they can be used.*

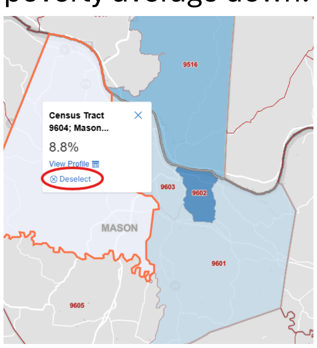




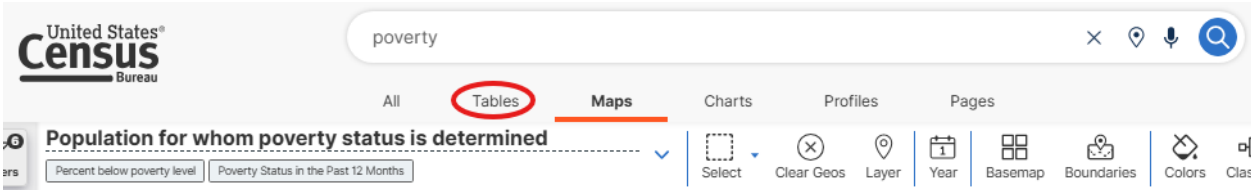
3. Once all contiguous census tracts are selected, your map should be color coded in different shades of blue, indicating levels of poverty with a legend in the lower left corner. The darker the blue, the higher the poverty level.



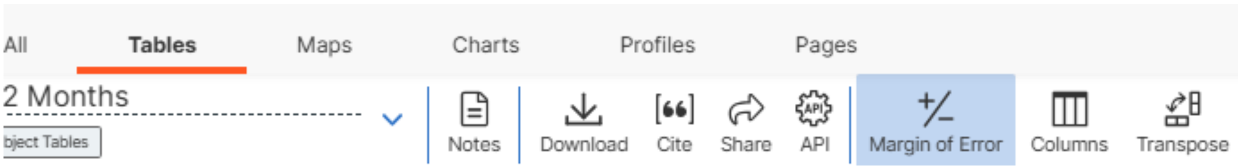
4. Click each surrounding census tract again to view the poverty percentage. If the poverty percentage is below 25%, “deselect” it as including it will only bring your poverty average down. **Do not deselect the residential tract.**



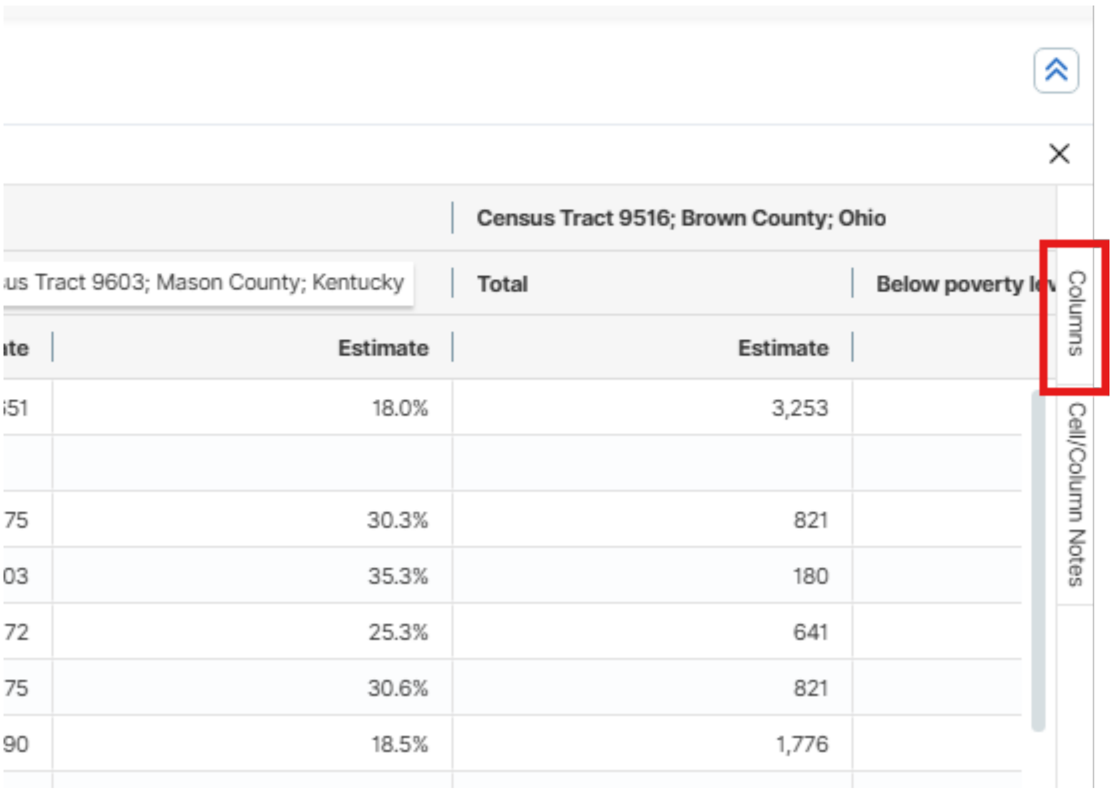
5. Once you have the residential tract selected and all contiguous tracts that are above 25% selected, return to the data table via the “Tables” tab below the search bar.



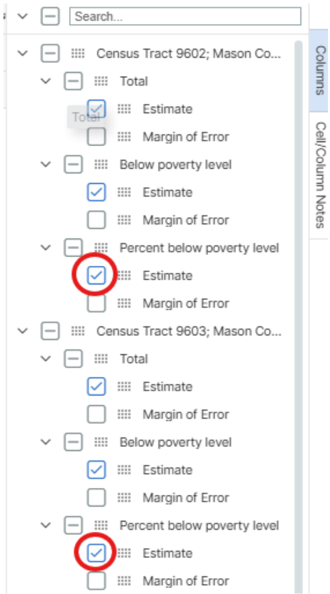
6. Deselect the “Margin of Error” tab highlighted at the top of your table.



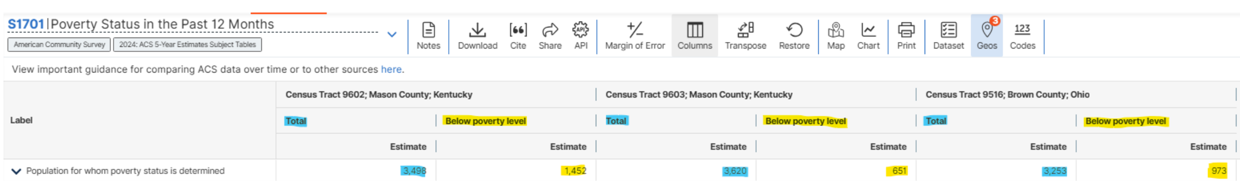
7. On the righthand side, select the vertical tab labeled “Columns”.



8. Under each census tract section, under the “percent below poverty level” subsection, deselect the “estimate” box.



9. Close the columns tab by clicking it again.
10. The resulting data left will be used to calculate the average poverty level of the contiguous census tracts. Add together each "Below poverty level" number from the top line for each census tract. Then, add together the "total" number from the top line for each tract.



Ex: Below Poverty Level 973 + 651 + 1,452 = 3,076

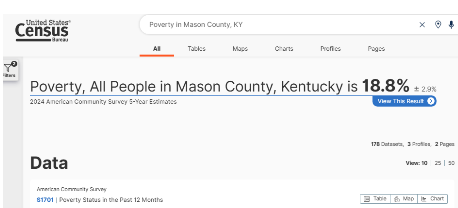
Total 3,253 + 3,620 + 3,498 = 10,371

11. Divide the sum of the "below poverty level" numbers by the sum of the "total" numbers. The percentage you receive is your average poverty for contiguous census tracts.

3,076 / 10,371 = 0.296 (29.6%)

Step 4: Documentation

1. If your participant's county is high poverty, you can screenshot the initial page from your original poverty search and upload that as your documentation. *Example below.*



2. If your participant's residential tract is high poverty, you can screenshot the top line of the table showing the numbers and poverty percentage and upload that as your documentation.

S1701 | Poverty Status in the Past 12 Months

American Community Survey | 2024: ACS 5-Year Estimates Subject Tables

Notes | Download | Cite | Share | API | Margin of Error | Columns | Transpose

View important guidance for comparing ACS data over time or to other sources here.

Label	Census Tract 9602; Mason County; Kentucky		
	Total	Below poverty level	Percent below poverty level
	Estimate	Estimate	Estimate
Population for whom poverty status is determined	3,498	1,452	41.5%

3. If you utilized contiguous census tracts to prove high poverty, you must screenshot the table with all census tract data included as well as the map showing that all census tracts used touch the residential census tract.

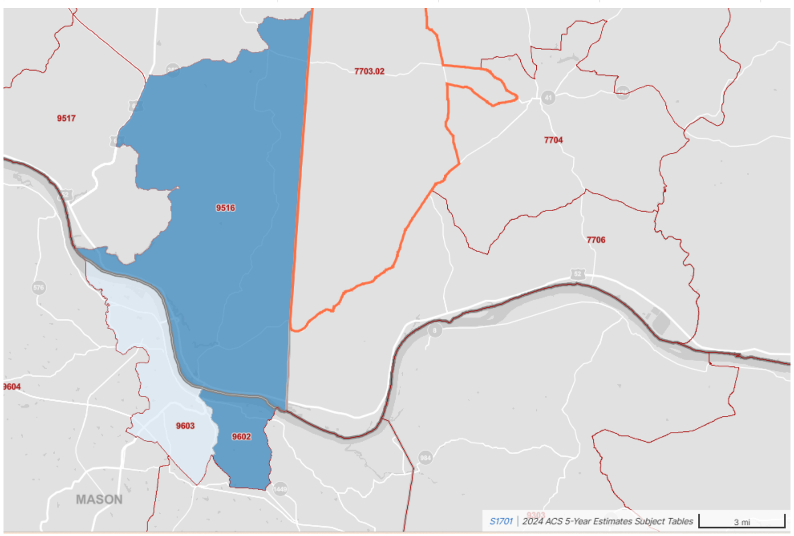
S1701 | Poverty Status in the Past 12 Months

American Community Survey | 2024: ACS 5-Year Estimates Subject Tables

Notes | Download | Cite | Share | API | Margin of Error | Columns | Transpose | Restore | Map | Chart | Print | Dataset | Geos | Codes

View important guidance for comparing ACS data over time or to other sources here.

Label	Census Tract 9602; Mason County; Kentucky		Census Tract 9603; Mason County; Kentucky		Census Tract 9516; Brown County; Ohio	
	Total	Below poverty level	Total	Below poverty level	Total	Below poverty level
	Estimate	Estimate	Estimate	Estimate	Estimate	Estimate
Population for whom poverty status is determined	3,498	1,452	3,620	651	3,253	973



WIOA Family Definition
20 CFR § 675.300

Family **means two or more persons related by blood, marriage, or decree of court, who are living in a single residence, and are included in one or more of the following categories:**

- **(1) A married couple and dependent children;**
- **(2) A parent or guardian and dependent children; or**
- **(3) A married couple.**

Financial Training

July 27, 2026 at Kentucky Career Center – Morehead

July 30, 2026 at Lewis County Empower Youth

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Agenda

IMPORTANT POLICIES

PARTICIPANT AGREEMENT

FINANCIAL NEEDS ANALYSIS (BUDGETS)

VOUCHERS

TUITION & SUPPORTIVE SERVICES

DISALLOWED COSTS

WORK EXPERIENCE AGREEMENTS, TRAINING PLANS, & TIMESHEETS

FAQ

Kentucky Career Center
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Participant Agreement

Rev. 07.26.2026

TENCO WORKFORCE INNOVATION AND OPPORTUNITY ACT
WORKFORCE DEVELOPMENT AREA (WDA)
PARTICIPANT AGREEMENT
Individual Training Account and Support Service Agreement

Agreement Number: ______________________

Name: ________________________________ **Workforce Case #:** ______________

Address: ____ **Phone #:** ______________

____ **Alt Phone #:** ____________

Adult _____ **Dislocated Worker** _______ **NDWG**_____
Youth _____ **Career Pathway** ____ **PYKTW** _________

Training Start Date: ____________ **Anticipated Completion Date:** ____________
Eligibility Approval Date: ____________

Major Course of Study: ________________________________

Training Institution: ________________________________

Address: ________________________________

____

School Contact Person: ________________________________

Telephone Numbers:

Buffalo Trace ADD	*FIVCO Area*	*Gateway Area*
1-800-998-4347	606-920-2024	606-783-8525
606-564-6894	606-929-1366	606-780-0090

As a TENCO WDA participant, I understand and agree to the following:

1. I understand that Buffalo Trace Area Development District, on behalf of the TENCO Workforce Development Board will provide funding toward the cost of education to the training institution identified above.

2. I will enroll and attend classes required for the above-named course of study on a full time basis. However, I also understand the TENCO Workforce Development Board will waive the requirement to attend training on a full-time basis if: 1) The courses required to complete my course of study are not offered during a particular semester/quarter; 2) I am attending the last quarter or semester of my course of study and required to complete a minimal number of courses; 3) TENCO will only be paying for a select number of courses toward the completion of a course of study.

Rev. 07.26.2026

3. I shall obtain, complete and submit the Kentucky and Federal Financial Aid Forms requesting consideration for Grant Funds that may be available to me. Upon notification of award, I will provide the TENCO Career Counselor with one copy of the Student Financial Aid award notification. In the event I am not eligible for financial assistance through a State or Federal Grant, I will notify TENCO representatives.

4. I agree to provide TENCO Career Counselor with any information related to financial or educational assistance provided by other funding sources. Providing this information will eliminate the possibility of making duplicate payments for any costs. A duplication of payment is unallowable and may require repayment from a participant or educational institution. TENCO will not fund a participant's educational cost without receipt of financial aid notification documentation.

5. I agree to the exchange of information between TENCO, the educational institution Financial Aid office, and other agencies providing assistance on my behalf. This information will be used to document my financial status or that of my family for purposes of determining my eligibility to receive financial assistance to attend the above-named educational institution.

6. Upon request, provide the TENCO Career Counselor with receipts or invoices for allowable purchases that may be reimbursed to me for costs incurred. Buffalo Trace Area Development District, Administrative Entity for TENCO Workforce Development Board and the Local Elected Officials, reserves the right to deny or withhold payment for allowable costs incurred pending receipt of original invoices or information related to training. Allowable costs approved by a TENCO Career Counselor may include book costs, transportation costs, child care costs, uniforms, or supplies required by an educational institution. To be considered for reimbursement, the Career Counselor shall represent the costs on the TENCO financial obligation form, after consideration of other sources of grant funding.

7. I understand that as approved, tuition, fees, books, and supplies will be paid directly to the Training Institution at which I am enrolled and attending training or to an applicable vendor. Such payments will not be paid to me or any other individual on my behalf unless prior approval has been granted by a TENCO Career Counselor.

8. Continued assistance through the Workforce Innovation and Opportunity Act is contingent upon satisfactory performance in training (2.0 grade point average or better per semester unless otherwise approved by a TENCO Career Counselor, attendance at scheduled classes as required by the WDA or school. Additionally, continued funding is contingent upon the availability of federal funding through the Workforce Innovation and Opportunity Act, up to the amount established by TENCO WDA on the Financial Budget Worksheet.

9. I understand that I may be eligible to receive assistance with Supportive Service costs. Assistance with such costs may be made available in accordance with policies established by TENCO Workforce Development Board, up to the amount established as my individual "unmet need" for educational expenses. Such assistance is contingent upon the availability of WDA funding, authorization of program activities, federal or state legislative actions, continued performance and attendance as required by the TENCO Workforce Development Board or educational institution.

10. If approved to receive assistance for supportive service needs, I agree to provide TENCO Career Counselors with a true and accurate record of class attendance, mileage records, or other expenses incurred for allowable costs. I understand that misrepresenting costs or providing false information

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will result in the denial of the request, may result in denial of future WIOA services and/or further collection actions taken by Buffalo Trace Area Development District, Administrative Entity for TENCO Workforce Development Board.

11. I agree to meet with my Career Counselor as scheduled upon entrance into the program or at any time deemed appropriate by TENCO. This is a requirement for continued WDA funding.

12. I agree to report changes in training status, progress, employment, earnings, and follow-up with TENCO staff for 12 months following completion of training. Should I withdraw from training or scheduled courses, I agree to notify the Career Counselor prior to withdrawal from training. I understand that information provided to a TENCO Career Counselor is confidential and will be used to ensure accuracy of participant records, expenditures, and performance data.

13. In the event I receive WDA funds that are later disallowed due to misrepresentation of information or purchasing unallowable items, I understand that I will be responsible for repayment of the Federal Funds to Buffalo Trace Area Development District, Administrative Entity for TENCO Workforce Development Board.

14. I agree to provide TENCO Career Counselors with a copy of grade reports, transcripts, attendance records, supportive service information and receipts as requested. Continued funding will be contingent upon providing the TENCO Career Counselor with such information.

15. I understand that Buffalo Trace Area Development District will not cover costs which have not been approved in writing, documented on my Individual Service Strategy and required by the educational institution at which I am receiving skills training.

16. TENCO Workforce Development Area staff is authorized to use my photograph for purposes of program promotion, advertising, or nominations for awards as determined appropriate.
☐ **Yes** ☐ **No**

All signatures below represent agreement to the outlined terms and conditions stated herein, including the release of information necessary to maintain accurate participant records and authorize payment for allowable costs.

Signatures

________________________________ ______________
Participant Signature **Date**

________________________________ ______________
TENCO WDA Representative Signature **Date**

Participant Agreement

- Agreement must be completed before the Financial Needs Analysis (Budget)

- Review Participant Agreement with Participants.
  - Go over it and give them time to read it.
  - Highlight important sections
    - 2.0 GPA
    - Monthly Contact
    - Apply for Financial Aid each year
    - Documents such as Schedule, Transcript, etc.

- Agreement number is assigned by Assistant Director

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Participant Agreement

- Must be signed before the Financial Needs Analysis (Budget). Monitors will check the dates

- Original Sent to Assistant Director.

- Give copy to participant, place one in file, & upload to KEE Suite

- ITA is typically completed once while the budget may be updated regularly.

    - ITA will be redone if the person was approved to change their program and/or school.

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Participant Agreement

- **Participant cannot start a training service or support service (neither service can be entered into KEE Suite) until the ITA and Budget is completed.**
  - **Monitors will check the dates**
- **Budget must be uploaded each time it is updated.**

Funding Allotment for Training

- **Each Summer Adult/DW Counselors will receive an email from the Assistant Director with an allotment which has been budgeted for you to spend on training and supportive services for *new* participants for the next Fiscal Year.**
- **Youth Counselors funding is based on the contract.**

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Funding Allotment for Training

Hi I

After a review of the budget and available funding you are being allocated $100,000 to serve individuals who pursue training services through the Adult and Dislocated Worker program for Fiscal Year 2025. Pending the availability of additional funds your allotment may be increased. While TENCO policy allows for a maximum of $4,000, and in some instances $8,000, for costs associated with occupational skills training per fiscal year, you are encouraged to budget these funds wisely and to not inflate customer budgets to ensure you are able to recruit and maintain a case load of 50 individuals per quarter.

This funding allocation is for individuals you enroll after July 1, 2024, anyone who you have already enrolled and have a budget submitted are already accounted for in our Master Obligation.

We are scheduled to receive our next round of funding in October and this allotment will be reevaluated at that time.

Attached is a tracker I created for you to keep track of the amount of funding you have for the year. Please let me know if you have any questions on how to use this.

Please let me know if you have any questions.

Justin

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Policy #7 Limitation on Costs

- Eligible for funding: tuition, fees, textbooks, supplies/testing, and supportive services.
- Maximum up to $6,000 for costs associated with training per fiscal year.
  - OJT, Internships/WEX, Relocation, and Out-of-Area costs not included

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Short Term Training Program <12 mos.

- May receive up to a maximum of $10,000 per training program if these performance measures are met based on TENCO participants:
  - 75% graduation rate
  - 70% employment in the field of study during the 2nd quarter after exit.
- Counselors will receive an email each year from Assistant Director with the schools and programs that are eligible for the maximum $10,000 funding.

Short Term Training Program <12 mos.

Justin Suttles

From: Justin Suttles
Sent: Monday, July 29, 2024 10:37 AM
To: Green, Dena (GWADD); Mann, Jacey (GWADD); sarahg.smith@ky.gov; McCane, Renee; Crystal Michelle Riddle; Lakyn Miller; Ashley Amanda Dehart; sandra.cornett@lewis.kyschools.us; Sullivan, Anna; Madison Onorato
Cc: Andrea Holbrook; haley.allen@ky.gov
Subject: Policy 7

Importance: High

Good morning,

I have pulled the information regarding the schools and programs of study that are eligible for a maximum of $8,000.00. Keep in mind that some of these schools may offer multiple certificate programs. The policy is for trainings that are 12 months or less. Please keep in mind that what you provide the student should be ***based on need*** which means not everyone will receive the $8,000.00. Performance for each school and program is calculated in May utilizing the previous fiscal years data.

Approved FY25 (July 24 – June 25)

School	Program
MCTC	CDL
ACTC	CDL
Bluegrass CDL Academy	CDL
KWI	Welding
Elite Welding	Welding

Please let me know if you have any questions.

Thank you,
Justin

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Short Term Training Program <12 mos.

- **These programs do not typically have Cost of Attendance, Financial Aid, Schedule, etc.**
  - **Case note needs to be written explaining why these items are not uploaded.**
- **Can be funded up to $10,000.00 – does not mean everyone will get $10,000.00 – it is still based on need.**

Policy # 14: Short Term Pre-Vocational

- **Does not lead to a formal credential.**
- **Examples include: OSHA, TWIC, soft skill development, and basic computer classes.**
- **Costs cannot exceed $2,000**
- **Cannot not exceed 6 months in duration**
- **Maximum of 2 prevocational activities.**

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Policy # 28: Training Limitations

- **Participants can receive a maximum of two or four years of funding per training.**
- **Exceptions:**
  - **One additional semester may be allowed to complete required pre-requisite courses.**
  - **Additional credit hours are required to successfully complete the training program.**

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Financial Needs Analysis

FINANCIAL NEED ANALYSIS

Rev. 07.26.2026

WORKFORCE DEVELOPMENT SERVICES
TENCO

Funding Source:
☐ Closure
☐ Dislocated Worker ____________ (Name of Company)
☐ Adult ☐ Career Pathway ____________ (Petition #)
☐ Youth ☐ NDWG

Students Name: ____________ JT # ____________
Training Institution: ____________ Course of Study: ____________
Address: ____________ Area: Please select from drop down list

Table Number 1: FINANCIAL AID AND SCHOLARSHIPS

Fiscal Year	Quarter / Semester / Month	PELL	CAP	Scholarship	Other (list source below)	Other (list source below)	Total Award
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
Total		$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

List other Source Funding

Grants for Academic School Year are estimated until actual grant received. Indicate year for each grant or Scholarship.

Grants do not reduce unmet need for Trade.

Total Cost of Attendance	FY____ $ -	FY ____		FY____ $ -
-Total of All Grants	(minus) $ -			$ -
=Total unmet Needs	$0.00		$0.00	$0.00

Table Number 2: TENCO FUNDING INCLUDING TRADE

Fiscal Year	Quarter / Semester / Month	Tuition and Fees	Books	Supplies	(If Applicable) DW/T	Transportation	Child Care	Total Obligation
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
Total		$0.00	$0.00	$0.00		$0.00	$0.00	$0.00

WDB Staff Signature: ____________ Date: ____________

*Closure:
☐ Completed Training ☐ Other
☐ Withdrew ☐ Employed

"The Budget"

Kentucky Career Center
Career Training Employer
TENCO

Financial Needs Analysis

- **The Budget (FNA) shows the unmet need for the participant, the amount of funds we agree to spend on them per semester and the categories in which it will be spent.**
- **It is completed AFTER the Participant Agreement is signed.**
- **It is completed with the Participant, but you can have a lot of influence on how funds are used.**
- **Budget must include all semesters.**
- **Budget may be revised multiple times per semester**
  - **Upload with each revision**

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Financial Needs Analysis

Rev. 07.26.2026

WORKFORCE DEVELOPMENT SERVICES TENCO

Funding Source:

☐ Closure

☐ Dislocated Worker

☐ Adult ☐ Career Pathway

☐ Youth ☐ NDWG

(Name of Company)

(Petition #)

Students Name:

Training Institution:

Address:

JT #

Course of Study:

Area: Please select from drop down list

Table Number 1: FINANCIAL AID AND SCHOLARSHIPS

Fiscal Year	Quarter / Semester / Month	PELL	CAP	Scholarship	Other (list source below)	Other (list source below)	Total Award
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
Total		$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

List other Source Funding

Grants for Academic School Year are estimated until actual grant received. Indicate year for each grant or Scholarship.

Grants do not reduce unmet need for Trade.

Total Cost of Attendance	FY_____ $ -	FY _____	FY_____ $ -
-Total of All Grants	(minus) $ -		$ -
=Total unmet Needs	$0.00	$0.00	$0.00

- **Funding Source must be checked, AND if Career Pathway**
- **Closure is checked when training is complete**
- **JT# is assigned by Assistant Director**
- **Area will be FIVCO, Morehead, Mt. Sterling or BTADD based on the Career Center location.**

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Financial Needs Analysis

WORKFORCE DEVELOPMENT SERVICES TENCO

Rev. 07.26.2026

Funding Source:

- ☐ Closure
- ☐ Dislocated Worker — ________ (Name of Company)
- ☐ Adult — ☐ Career Pathway — ________ (Petition #)
- ☐ Youth — ☐ NDWG

Students Name: ________ JT # ________

Training Institution: ________ Course of Study: ________

Address: ________ Area: Please select from drop down list

Table Number 1: FINANCIAL AID AND SCHOLARSHIPS

Fiscal Year	Quarter / Semester / Month	PELL	CAP	Scholarship	Other (list source below)	Other (list source below)	Total Award
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
Total		$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

List other Source Funding

Grants for Academic School Year are estimated until actual grant received. Indicate year for each grant or Scholarship.

Grants do not reduce unmet need for Trade.

Total Cost of Attendance	FY_____ $ -	FY _____	FY_____	$ -
-Total of All Grants	(minus) $ -			$ -
=Total unmet Needs	$0.00	$0.00		$0.00

- **Complete for each semester and FY**
- **Must match documents in KEE Suite**
- **We cannot fund more than Total Unmet Needs**
- **Must be calculated each Fiscal Year**

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TENCO

Financial Needs Analysis

Table Number 2: TENCO FUNDING INCLUDING TRADE

Fiscal Year	Quarter / Semester / Month	Tuition and Fees	Books	Supplies	(If Applicable) DW/T	Transportation	Child Care	Total Obligation
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
Total		$0.00	$0.00	$0.00		$0.00	$0.00	$0.00

WDB Staff Signature: Date:

*Closure:

- ☐ Completed Training
- ☐ Other
- ☐ Withdrew
- ☐ Employed

- Complete for each "semester"
- Breakdown of how funds will be spent
- Counselor must sign; date CANNOT be prior to the Participant Agreement or Service Program in KEE Suite
- Completed at end of training

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Policy #8 Coordination with Pell and Other Funding Sources

- WIOA funds are used last, federal financial aid must be applied before WIOA funds are allocated.
- Exceptions to this policy include programs and/or schools that are ineligible for Federal Financial Aid like those programs offered through KCTCS Workforce Solutions.
  - You must document this exception in case notes

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Financial Needs Analysis

Unmet Needs

- We cannot provide funding that is more than the participant's unmet need
- You must upload proof of
  - Cost of Attendance
  - Financial Aid Awards

Total Cost of Attendance

- Total Financial Aid Received

= Total Unmet Need

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Financial Needs Analysis

- **Not included in Unmet Need Calculations:**
  - **Veterans Benefits**
  - **Student Loans**
  - **Work Study Pay**
  - **Estimated Family Contribution**

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Financial Needs Analysis

- **Quarter Semester and Year must match for Table #1 and Table #2**
- **Examples:**
  - **Spring 2026**
  - **Summer 2026 (FY27)**
- **How you label Quarter/Semester tells us what FY the funds will be pulled from.**
- **What if a semester goes across fiscal years?**

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Financial Needs Analysis

- **Semesters that go across fiscal years, must be broken down in the budget to show the amount budgeted for each fiscal year.**

- **Example:**

  Student is taking a class that begins June 3, 2026 and ends August 2, 2026

  - **Tuition would be covered under FY26 because that is when the class begins**
  - **Any supportive services paid during the month of June would go with FY26**
  - **Supportive services paid in July or August would go on FY27.**

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Financial Needs Analysis

- **Students don't always get financial aid during Summer terms, you may want to put most of their funds during those terms.**

- **If you would like to provide more than $6,000 in a particular fiscal year, email Workforce Director requesting the additional amount you would like to budget and give justification. Do not assume it will be approved.**

- **Justification can include:**
  - **Participant Financial Aid changes**
  - **Maintained monthly contact**
  - **Maintained high GPA**
  - **Needs funds for certification testing**

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Financial Needs Analysis

- You do not have to split funds equally such as $3,000 per semester.
- Budgets can and WILL likely be changed throughout the year.
  - Anytime a budget is updated it MUST be uploaded to KEE Suite
- If participant changes training programs, it goes on the same budget. They do not start a new budget.

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Financial Needs Analysis

- JT# = Vendor Number, you will not have this until they are added to the Client Spreadsheet.
- Keep an eye on the Client Spreadsheet, it will let you know when expenses are paid and when you need to de-obligate the budget.
- Double check funding stream (A/DW/Y) before submitting and if participant is Career Pathway
- When updating budgets make sure you change the date where you sign at the bottom. Highlight the changes made.

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Tuition

- Tuition is paid first
- Tuition can be paid when
  - ✓ Student's Federal Financial Aid does not cover tuition in full
  - ✓ Training Provider is on the ETPL
  - ✓ Program of Study is on the ETPL
- If Training Provider is not on the ETPL you can pay Supportive Services only

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Policy #2: Supportive Services

- **Transportation**
  - You must upload Google Maps for training AND “clinicals”
  - $0.43 / mile or actual cost of public transportation
  - One roundtrip / day
  - $20 / day maximum
- **Childcare**
  - $20 / day for 1 child
  - $26 / day for 2 children
  - $35 / day for 3 children
  - $46 / day for 4+ children
  - $200 Maximum per week
- **Supplies**
  - We cannot purchase supplies that are not on the Supply List.

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Career Training Employer
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Supportive Services

- Logs and reimbursement request must be submitted in a timely manner
  - ❑ Timeliness is defined as up to 30 days after the activity occurred. (Policy #29 “Invoicing and Support Requests”)
    - ▪ Supportive Services are provided because there is a need.

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Common Disallowed Costs

- **When reviewing mileage and childcare requests, be very aware of school holidays, weekends, and school breaks. This is one of the most common errors that result in disallowed costs.**

- **Documents not being uploaded such as: Cost of Attendance, Financial Aid, School Schedule, and Grades**

- **Fiscal Year's are not correctly entered, especially with summer sessions.**

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De-obligate Budgets

- **De-ob = take off whatever was not used that semester. It can be added to another semester in the same FY.**
- **The Client Spreadsheet will show you what has been budgeted and what has been paid.**
- **All Budgets must be de-obligated at the end of each semester and uploaded to KEE Suite.**

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Financial Needs Analysis Closure

- Closure budgets are submitted when everything has been paid.
  - Cannot be anything pending on a closure budget (FA)
  - Communicate with Workforce Financial Specialist
- Submit closure budget to Assistant Director
- There should be uploaded documents that matches the budget COA, FA, and expenditures.

Financial Needs Analysis Closure

Table Number 1: FINANCIAL AID AND SCHOLARSHIPS

Quarter/ Semester and Year	PELL	CAP	Scholarship	Other (list source below)	Other (list source below)	Total Award
Fall 2024	$3,697.00	$1,250.00	$0.00	$750.00	$0.00	$5,697.00
Spring 2025	$3,697.00	Pending	$0.00	$750.00	$0.00	$4,447.00
Summer (FY25)	Pending	Pending	$0.00	$0.00	$0.00	$0.00
Fall 2025	Pending	Pending	$0.00	$0.00	$0.00	$0.00
Spring 2026	Pending	Pending	$0.00	$0.00	$0.00	$0.00
						$0.00
						$0.00
						$0.00
Total	$7,394.00	$1,250.00	$0.00	$1,500.00	$0.00	$10,144.00
List other Source Funding						

Table Number 2: TENCO FUNDING INCLUDING TRADE

Quarter/ Semester and Year	(If Applicable) DW/T	Tuition and Fees	Books	Supplies	(If Applicable) DW/T	Transportation	Child Care	Total Obligation
Fall 2024		$1,500.00	$0.00	$100.00		$500.00		$2,100.00
Spring 2025		$0.00	$900.00	$500.00		$500.00		$1,900.00
Summer (FY25)		$0.00	$0.00	$0.00		$0.00		$0.00
Fall 2025		$1,200.00	$300.00	$400.00		$600.00		$2,500.00
Spring 2026		$0.00	$300.00	$600.00		$600.00		$1,500.00
								$0.00
								$0.00
								$0.00
Total		$2,700.00	$1,500.00	$1,600.00		$2,200.00	$0.00	$8,000.00
Trade Budget								**$0.00**

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Client Spreadsheet - Budget

	Budget						
Term	Tuition	Books	Supplies	Subsistence	Mileage	Childcare	Total
Fall 2024	1,500.00	0.00	100.00	0.00	500.00	0.00	2,100.00
Spring 2025	0.00	900.00	500.00	0.00	500.00	0.00	1,900.00
Summer (FY25)	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Fall 2025	1,200.00	300.00	400.00	0.00	600.00	0.00	2,500.00
Spring 2026	0.00	300.00	600.00	0.00	600.00	0.00	1,500.00
Total	**2,700.00**	**1,500.00**	**1,600.00**	**0.00**	**2,200.00**	**0.00**	**8,000.00**

The Budget Section of the Client Spreadsheet comes from what you submit.

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Client Spreadsheet - Expenses

Expenses						
Tuition	Books	Supplies	Subsistence	Mileage	Childcare	Total
1,500.00	0.00	0.00	0.00	0.00	0.00	1,500.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,500.00	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**	**1,500.00**

The Expenses Section of the Client Spreadsheet is the charges that have come to the Workforce Financial Specialist that have been paid.

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Client Spreadsheet - Balance

Balance						
Tuition	Books	Supplies	Subsistence	Mileage	Childcare	Total
0.00	0.00	100.00	0.00	500.00	0.00	600.00
0.00	900.00	500.00	0.00	500.00	0.00	1,900.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,200.00	300.00	400.00	0.00	600.00	0.00	2,500.00
0.00	300.00	600.00	0.00	600.00	0.00	1,500.00
1,200.00	**1,500.00**	**1,600.00**	**0.00**	**2,200.00**	**0.00**	**6,500.00**

The Balance Section of the Client Spreadsheet is what is left for each semester when expenses have been paid and will be $0 when the budget has been de-obligated.

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Financial Needs Analysis Closure

Quarter/ Semester and Year	(If Applicable) DW/T	Tuition and Fees	Books	Supplies	(If Applicable) DW/T	Transportation	Child Care	Total Obligation
Fall 2024		$1,500.00	$0.00	$0.00		$0.00		$1,500.00
Spring 2025		$0.00	$900.00	$600.00		$500.00		$2,000.00
Summer (FY25)		$500.00	$0.00	$0.00		$0.00		$500.00
Fall 2025		$1,200.00	$300.00	$400.00		$600.00		$2,500.00
Spring 2026		$0.00	$300.00	$600.00		$600.00		$1,500.00
								$0.00
								$0.00
								$0.00
Total		$3,200.00	$1,500.00	$1,600.00		$1,700.00	$0.00	$8,000.00
Trade Budget								**$0.00**

- **Moved $100 supplies to Spring 2025 supplies.**
- **Moved $500 transportation to Summer (FY25) Tuition**

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Client Spreadsheet After De-ob

	Budget						
Term	Tuition	Books	Supplies	Subsistence	Mileage	Childcare	Total
Fall 2024	1,500.00	0.00	0.00	0.00	0.00	0.00	1,500.00
Spring 2025	0.00	900.00	600.00	0.00	500.00	0.00	2,000.00
Summer (FY25)	500.00	0.00	0.00	0.00	0.00	0.00	500.00
Fall 2025	1,200.00	300.00	400.00	0.00	600.00	0.00	2,500.00
Spring 2026	0.00	300.00	600.00	0.00	600.00	0.00	1,500.00
Total	**3,200.00**	**1,500.00**	**1,600.00**	**0.00**	**1,700.00**	**0.00**	**8,000.00**

Balance						
Tuition	Books	Supplies	Subsistence	Mileage	Childcare	Total
0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	900.00	600.00	0.00	500.00	0.00	2,000.00
500.00	0.00	0.00	0.00	0.00	0.00	500.00
1,200.00	300.00	400.00	0.00	600.00	0.00	2,500.00
0.00	300.00	600.00	0.00	600.00	0.00	1,500.00
1,700.00	**1,500.00**	**1,600.00**	**0.00**	**1,700.00**	**0.00**	**6,500.00**

Kentucky Career Center
Career Training Employer
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Vouchers

- **Tuition Vouchers are written directly to the Training Provider.**

- **Vouchers cannot be for more than the budget allows for the category.**
  - **If the FNA has $1,500 for tuition, the voucher cannot be written for $2,000 without updating the FNA**

- **Voucher goes to Training Provider and copies are given to the Workforce Financial Specialist and uploaded to KEE Suite**

Rev. 07.26.2026

TENCO WORKFORCE DEVELOPMENT BOARD
TITLE I SERVICES VOUCHER FOR TRAINING PROVIDERS

This voucher is considered to be an obligation of funding, up to the amounts specified for Title I award to training provider on behalf of the individual identified on this form. Title I Workforce Innovation and Opportunity Act funds have been obligated to cover allowable educational expenses incurred by the participant, up to the amount specified for all sources. Once this voucher is completed the obligation of funding takes place and the amount obligated will not fluctuate, unless the participant fails to attend training or unforeseen documented costs are identified after the obligation of funding occurred. **The funding amount on this voucher will expire 90 days after issuance. This voucher, along with an invoice must be presented to TENCO by the vendor within 30 days of incurred cost.**

☐ TRADE PARTICIPANTS - DO NOT USE PELL FUNDS ☐ ADULT/DW/Youth - USE PELL FUNDS FIRST

Educational Institution: ______

Name of Participant: ______ Student I.D ______

Address: ______ Phone ______

______ Major ______

Cost of Attendance (Per School Documentation): ______

Total of All Grants (Federal, State, Other): ______

Total Unmet Educational Need: ______

Total Anticipated WIOA Title 1 funding Awarded for School Year: ______

Actual Training Start Date: ______ Tuition: ______

Term End Date: ______ Fees: ______

Send all invoices for payment to: TENCO Workforce Development Area
Buffalo Trace Area Development District
P.O. Box 460
Maysville, KY 41056
Phone:(606) 564-6894 Fax: (606)564-0955

I hereby authorize the obligation of Workforce Innovation and Opportunity Act Title I funds to be paid to the educational institution listed above on behalf of the identified student. The financial aid office of the educational institution has been notified of this award and understands that this is an obligation of federal funding on behalf of the student. The amount awarded as shown in "**WIOA Title I Funding Awarded to Training Provider**" will not be altered, unless the student fails to enroll in classes for which he/she is registered or prices change prior to the Title I representative becoming aware of such price changes. **Billing is to be within 30 days of incurred costs.**

______ ______
WIOA Title I Representative Date

______ ______
Representative of Training Provider Date

Vouchers

- Supply Vouchers are written directly to the Vendor.

- Vouchers cannot be for more than the budget allows for the category.
  - If the FNA has $500 for books, the voucher cannot be for $550 without updating the FNA
  - If multiple vendors are used, a voucher must be written to each vendor and the total amount approved cannot exceed what is on FNA

- Voucher goes to Vendor and copies are given to the Workforce Financial Specialist and uploaded to KEE Suite

TENCO WORKFORCE DEVELOPMENT BOARD
TITLE I SERVICES VOUCHER FOR VENDOR SERVICES

This voucher is considered to be an obligation of funding, up to the amounts specified for Title I, on behalf of the individual identified on this form. Title I Workforce Innovation and Opportunity Act funds have been obligated to cover allowable educational expenses incurred by the participant, up to the amount specified. Once this voucher is completed the obligation of funding takes place and the amount obligated will not fluctuate, unless the participant fails to attend training or unforeseen documented costs are identified after the obligation of funding occurred. **The funding amount on this voucher will expire 90 days after issuance. This voucher, along with an invoice must be presented to TENCO by the vendor within 30 days of incurred cost.**

Vendor or Supplier Name: ____________
Address: ____________ Phone: ____________
____________ Fax: ____________

Name of Participant: ____________ Student ID: ____________
Address: ____________ Phone: ____________
____________ Major: ____________

List of Approved Books/Supplies/Services	Amount Approved

Total Amount Approved from TENCO WIOA: $ ____________

Send all invoices for payment to: **Buffalo Trace Area Development District**
TENCO Workforce Development Area
P.O. Box 460
Maysville, KY 41056
Phone:(606) 564-6894 Fax: (606)564-0955

I hereby authorize the obligation of Workforce Innovation and Opportunity Act Title I funds to be paid to the above-referenced vendor for the supplies, books, or materials listed on behalf of the participant enrolled into WIOA Title I program.

____________ ____________
WIOA Title I Representative Date

As a representative for the identified vendor, I hereby agree to provide the products listed directly to the participant identified and invoice Buffalo Trace ADD for the actual cost of each approved product, not to exceed the amount approved per line item. The participant shall be responsible for costs exceeding the amount approved per item. The amount awarded will not be altered, unless the product received must be returned with a credit. **Billing has occurred with 30 days of incurred costs.**

____________ ____________
Vendor Representative Date

Rev. 5/2026

Participant Reimbursements

- **Reimbursements can be made to participants for**
  - Mileage
  - Childcare
  - Supplies
  - Books

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Participant Reimbursements

1. **Student purchases the supply or book and submits the itemized receipt to the counselor.**
2. **Counselor needs to let participant know it may be a month before they receive their check.**
3. **Counselor reviews the receipt and makes sure items align with policy.**
4. **Counselor submits request to Workforce Financial Specialist for participant reimbursement.**

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Forms : Child Care Expense Form

- **Must be completed with each reimbursement request.**

Rev.07/15

TENCO WORKFORCE DEVELOPMENT BOARD
Buffalo Trace Area Development District
201 Government Street, Suite 300
Maysville, Kentucky 41056

TENCO Child Care Expense Form

- WDA Participant: ______________________________
- Child Care Provider: ______________________________
- Provider contact information: ______________________________
  Address and Phone Number
- Child Care Services Provided from ________ ____ ________
  Month Day Year
  - through __________ ________ ________
    Month Day Year
- Actual Total Cost of Child Care Services: $______________________
- Please list the names and ages of children for whom child care services were provided and the cost for each child:

____
Name Age Cost

____
Name Age Cost

____
Name Age Cost

______Payment in the amount of $_______ for the above services has been received.

______ Payment for the above services has not been received.

______Payment for prior month's services has been received.

____
Signature of Child Care Provider

____
Date

❖ *This form should be attached to the Mileage/Child Care Reimbursement Request on a monthly basis.*

Forms : Transportation / Child Care Reimbursement Request

- **Must be completed with each reimbursement request.**
- **One month per request**

Revised 10/27/2017

TENCO WORKFORCE DEVELOPMENT AREA

Mileage/Child Care Reimbursement Request

This Form Must Be Completed In Ink.

Participant's Name: ______________________ JT# _______ Adult ___ DW ___ Youth ___

Program of Study: ______________________ KY# ______________ Approved Miles _________

School or Provider: ______________________ Number of Children: _______ Month: ___________

Date	Hours of Training	# of Miles Traveled (Round Trip)	# of Miles X .43 (Cap $20.00)	Child Care Rate	Grand Total	Comments
Grand Totals		#	$		$	

Do Not Use Ditto Marks or Arrows. Complete information each day costs are incurred.

I attest to the accuracy and legitimacy of all costs incurred as represented on this form. (Include childcare expense form)

Participant Signature: ______________________ Date: ______________

NOTE: If ALL information is not completed, reimbursement will be delayed until the following month. Signature of participant will be verified through review of original forms.

Staff Use Only: I have reviewed this form from participant and reviewed for accuracy.

Initials ______________ Date ______________

Continuation of Funding

Policy # 30

- **Students must remain full time however exceptions can be made.**
- **Those who withdraw or fail a class must be able to complete their training program within their approved timeframe.**
- **FAFSA must be completed each year unless you can document that it is a school and/or program that is not Pell eligible.**
- **Maintain monthly contact with Career Counselors.**
- **Maintain 2.0 GPA each semester.**

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FAQ

- **What do I do if they are not eligible for funding but haven't finished their program?**
  - ❑ You can ask for an additional semester of funding
  - ❑ What other financial aid is available for them? Ky Work Ready Scholarship?
  - ❑ Other services you can provide such as Youth Elements, resume development, interview prep, etc.

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FAQ

- **Can a student pursing a 2-year degree ever receive more than $12,000 in funding?**

Yes. Example:

○ Semester 1: Spring 2026	$6,000
○ Semester 2: Fall 2026	$4,000
○ Semester 3: Spring 2027	$2,000
○ Semester 4: Fall 2027	$6,000
Total	$18,000

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FAQ

- **Can a student pursing a 2-year degree ever have a budget for more than two fiscal years?**

  Yes. Example:

  - Semester 1: Spring 2026 (FY 26)
  - Semester 2: Fall 2026 (FY 27)
  - Semester 3: Spring 2027 (FY 27)
  - Semester 4: Fall 2027 (FY 28)

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FAQ

- **Can a student pursing a 2-year degree have a budget for more than 4 semesters?**

  Yes

  - Semester 1: Fall 2026 $4,000
  - Semester 2: Spring 2027 $1,500
  - Semester 3: Summer FY27 $500
  - Semester 4: Fall 2027 $2,000
  - Semester 5: Spring 2028 $2,000

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Work Experience Timesheets

- **Start/end time must have AM or PM and need to be 00, 15, 30 or 45.**
  - Such as 8:00 am or 2:45 pm
- **Signatures Requires:**
  - Participant
  - Worksite Supervisor
  - Contract Representative

Rev. 12/12/2024

Pay Period ______ - ______
Paydate __________

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TENCO Workforce Innovation and Opportunity Act
YOUTH WORK EXPERIENCE TIME SHEET

Name: ______________________________ Worksite: ______________________________

Student Wage Per Hour: ______________________ Contractor: ______________________________

Day/Date	Mon,	Day/Date	Tues,	Day/Date	Wed,	Day/Date	Thurs,
Time In		Time In		Time In		Time In	
Lunch Out		Lunch Out		Lunch Out		Lunch Out	
Lunch In		Lunch In		Lunch In		Lunch In	
Time Out		Time Out		Time Out		Time Out	
Total		**Total**		**Total**		**Total**	

Day/Date	Fri,	Day/Date	Sat,	Day/Date	Sun,
Time In		Time In		Time In	
Lunch Out		Lunch Out		Lunch Out	
Lunch In		Lunch In		Lunch In	
Time Out		Time Out		Time Out	
Total		**Total**		**Total**	

Day/Date	Mon,	Day/Date	Tues,	Day/Date	Wed,	Day/Date	Thurs,
Time In		Time In		Time In		Time In	
Lunch Out		Lunch Out		Lunch Out		Lunch Out	
Lunch In		Lunch In		Lunch In		Lunch In	
Time Out		Time Out		Time Out		Time Out	
Total		**Total**		**Total**		**Total**	

Day/Date	Fri,	Day/Date	Sat,	Day/Date	Sun,
Time In		Time In		Time In	
Lunch Out		Lunch Out		Lunch Out	
Lunch In		Lunch In		Lunch In	
Time Out		Time Out		Time Out	
Total		**Total**		**Total**	

I certify that the above information is correct.

Participant Signature: __________________________ Worksite Supervisor Signature: ______________________

Contract Representative Signature: ____________________________

_____ In-School
_____ Out of School

Total allocated work hours	
(-) Hours worked this pay period	
(-) Prior cumulative hours	
(=) Hours remaining	

Work Experience Timesheets

- If participant works more than 5 hours, they must take a 30-minute unpaid lunch.
- Follow your contract on allowable time per day
- Complete bottom section for each timesheet
- Must be completed in ink.

Work Experience Timesheets

- Training Plan and Worksite Agreement must be uploaded to KEE Suite
- Time cannot be paid prior to the dates on the TP and WA, including signature
- If you edit a timesheet or other document due to invoicing, make sure you upload it in KEE Suite
- Put a strikethrough and initial – no white out or scribble

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Questions?

Kentucky Career Center
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Rev. 07.26.2026

TENCO WORKFORCE INNOVATION AND OPPORTUNITY ACT
WORKFORCE DEVELOPMENT AREA (WDA)
PARTICIPANT AGREEMENT
Individual Training Account and Support Service Agreement

Agreement Number: ________________________

Name: ____________________________________ **Workforce Case #: _________________**

Address: ____Phone #: ______________

____Alt Phone #: ___________

Adult _____ **Dislocated Worker _______** **NDWG_____**
Youth _____ **Career Pathway ____** **PYKTW __________**

Training Start Date: ______________ **Anticipated Completion Date: ______________**
Eligibility Approval Date: ______________

Major Course of Study: _____________________________________

Training Institution: ____

Address: ____

____

School Contact Person: ______________________________________

<u>Telephone Numbers:</u>

Buffalo Trace ADD	*FIVCO Area*	*Gateway Area*
1-800-998-4347	606-920-2024	606-783-8525
606-564-6894	606-929-1366	606-780-0090

As a TENCO WDA participant, I understand and agree to the following:

1. I understand that Buffalo Trace Area Development District, on behalf of the TENCO Workforce Development Board will provide funding toward the cost of education to the training institution identified above.

2. I will enroll and attend classes required for the above-named course of study on a full time basis. However, I also understand the TENCO Workforce Development Board will waive the requirement to attend training on a full-time basis if: 1) The courses required to complete my course of study are not offered during a particular semester/quarter; 2) I am attending the last quarter or semester of my course of study and required to complete a minimal number of courses; 3) TENCO will only be paying for a select number of courses toward the completion of a course of study.

3. I shall obtain, complete and submit the Kentucky and Federal Financial Aid Forms requesting consideration for Grant Funds that may be available to me. Upon notification of award, I will provide the TENCO Career Counselor with one copy of the Student Financial Aid award notification. In the event I am not eligible for financial assistance through a State or Federal Grant, I will notify TENCO representatives.

4. I agree to provide TENCO Career Counselor with any information related to financial or educational assistance provided by other funding sources. Providing this information will eliminate the possibility of making duplicate payments for any costs. A duplication of payment is unallowable and may require repayment from a participant or educational institution. TENCO will not fund a participant's educational cost without receipt of financial aid notification documentation.

5. I agree to the exchange of information between TENCO, the educational institution Financial Aid office, and other agencies providing assistance on my behalf. This information will be used to document my financial status or that of my family for purposes of determining my eligibility to receive financial assistance to attend the above-named educational institution.

6. Upon request, provide the TENCO Career Counselor with receipts or invoices for allowable purchases that may be reimbursed to me for costs incurred. Buffalo Trace Area Development District, Administrative Entity for TENCO Workforce Development Board and the Local Elected Officials, reserves the right to deny or withhold payment for allowable costs incurred pending receipt of original invoices or information related to training. Allowable costs approved by a TENCO Career Counselor may include book costs, transportation costs, child care costs, uniforms, or supplies required by an educational institution. To be considered for reimbursement, the Career Counselor shall represent the costs on the TENCO financial obligation form, after consideration of other sources of grant funding.

7. I understand that as approved, tuition, fees, books, and supplies will be paid directly to the Training Institution at which I am enrolled and attending training or to an applicable vendor. Such payments will not be paid to me or any other individual on my behalf unless prior approval has been granted by a TENCO Career Counselor.

8. Continued assistance through the Workforce Innovation and Opportunity Act is contingent upon satisfactory performance in training (2.0 grade point average or better per semester unless otherwise approved by a TENCO Career Counselor, attendance at scheduled classes as required by the WDA or school. Additionally, continued funding is contingent upon the availability of federal funding through the Workforce Innovation and Opportunity Act, up to the amount established by TENCO WDA on the Financial Budget Worksheet.

9. I understand that I may be eligible to receive assistance with Supportive Service costs. Assistance with such costs may be made available in accordance with policies established by TENCO Workforce Development Board, up to the amount established as my individual "unmet need" for educational expenses. Such assistance is contingent upon the availability of WDA funding, authorization of program activities, federal or state legislative actions, continued performance and attendance as required by the TENCO Workforce Development Board or educational institution.

10. If approved to receive assistance for supportive service needs, I agree to provide TENCO Career Counselors with a true and accurate record of class attendance, mileage records, or other expenses incurred for allowable costs. I understand that misrepresenting costs or providing false information

will result in the denial of the request, may result in denial of future WIOA services and/or further collection actions taken by Buffalo Trace Area Development District, Administrative Entity for TENCO Workforce Development Board.

11. I agree to meet with my Career Counselor as scheduled upon entrance into the program or at any time deemed appropriate by TENCO. This is a requirement for continued WDA funding.

12. I agree to report changes in training status, progress, employment, earnings, and follow-up with TENCO staff for 12 months following completion of training. Should I withdraw from training or scheduled courses, I agree to notify the Career Counselor prior to withdrawal from training. I understand that information provided to a TENCO Career Counselor is confidential and will be used to ensure accuracy of participant records, expenditures, and performance data.

13. In the event I receive WDA funds that are later disallowed due to misrepresentation of information or purchasing unallowable items, I understand that I will be responsible for repayment of the Federal Funds to Buffalo Trace Area Development District, Administrative Entity for TENCO Workforce Development Board.

14. I agree to provide TENCO Career Counselors with a copy of grade reports, transcripts, attendance records, supportive service information and receipts as requested. Continued funding will be contingent upon providing the TENCO Career Counselor with such information.

15. I understand that Buffalo Trace Area Development District will not cover costs which have not been approved in writing, documented on my Individual Service Strategy and required by the educational institution at which I am receiving skills training.

16. TENCO Workforce Development Area staff is authorized to use my photograph for purposes of program promotion, advertising, or nominations for awards as determined appropriate.
   ☐ **Yes** ☐ **No**

All signatures below represent agreement to the outlined terms and conditions stated herein, including the release of information necessary to maintain accurate participant records and authorize payment for allowable costs.

Signatures

______________________________ ______________________
Participant Signature **Date**

______________________________ ______________________
TENCO WDA Representative Signature **Date**

FINANCIAL NEED ANALYSIS

Rev. 07.26.2026

Funding Source:

- [ ] Closure
- [ ] Dislocated Worker ______ (Name of Company)
- [ ] Adult
- [ ] Career Pathway ______ (Petition #)
- [ ] Youth
- [ ] NDWG

Students Name: ______ JT # ______

Training Institution: ______ Course of Study: ______

Address: ______ Area: **Please select from drop down list**

Table Number 1: FINANCIAL AID AND SCHOLARSHIPS

Fiscal Year	Quarter / Semester / Month	PELL	CAP	Scholarship	Other (list source below)	Other (list source below)	Total Award
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
							$0.00
Total		$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

List other Source Funding

Grants for Academic School Year are estimated until actual grant received. Indicate year for each grant or Scholarship.

Grants do not reduce unmet need for Trade.

Total Cost of Attendance	FY_____ $ -	FY _____ $ -	FY_____ $ -	FY_____ $ -
-Total of All Grants	(minus) $ -	$ -	$ -	$ -
=Total unmet Needs	$0.00	$0.00	$0.00	$0.00

Table Number 2: TENCO FUNDING INCLUDING TRADE

Fiscal Year	Quarter / Semester / Month	Tuition and Fees	Books	Supplies	(If Applicable) DW/T	Transportation	Child Care	Total Obligation
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
								$0.00
Total		$0.00	$0.00	$0.00		$0.00	$0.00	$0.00

WDB Staff Signature: ______ Date: ______

*Closure:

- [ ] Completed Training
- [ ] Other
- [ ] Withdrew
- [ ] Employed

Rev. 07.26.2026

TENCO WORKFORCE DEVELOPMENT BOARD
TITLE I SERVICES VOUCHER FOR TRAINING PROVIDERS

This voucher is considered to be an obligation of funding, up to the amounts specified for Title I award to training provider on behalf of the individual identified on this form. Title I Workforce Innovation and Opportunity Act funds have been obligated to cover allowable educational expenses incurred by the participant, up to the amount specified for all sources. Once this voucher is completed the obligation of funding takes place and the amount obligated will not fluctuate, unless the participant fails to attend training or unforeseen documented costs are identified after the obligation of funding occurred. **The funding amount on this voucher will expire 90 days after issuance. This voucher, along with an invoice must be presented to TENCO by the vendor within 30 days of incurred cost.**

☐ TRADE PARTICIPANTS - DO NOT USE PELL FUNDS　　☐ ADULT/DW/Youth - USE PELL FUNDS FIRST

Educational Institution: ______________________________

Name of Participant: ____________________　　Student I.D ____________________

Address: ____________________　　Phone ____________________

____________________　　Major ____________________

Cost of Attendance (Per School Documentation): __________

Total of All Grants (Federal, State, Other): __________

Total Unmet Educational Need: __________

Total Anticipated WIOA Title 1 funding Awarded for School Year: __________

Actual Training Start Date: ____________________　　Tuition: __________

Term End Date: ____________________　　Fees: __________

Send all invoices for payment to:

TENCO Workforce Development Area
Buffalo Trace Area Development District
P.O. Box 460
Maysville, KY 41056
Phone:(606) 564-6894　　Fax: (606)564-0955

I hereby authorize the obligation of Workforce Innovation and Opportunity Act Title I funds to be paid to the educational institution listed above on behalf of the identified student. The financial aid office of the educational institution has been notified of this award and understands that this is an obligation of federal funding on behalf of the student. The amount awarded as shown in "**WIOA Title I Funding Awarded to Training Provider**" will not be altered, unless the student fails to enroll in classes for which he/she is registered or prices change prior to the Title I representative becoming aware of such price changes. **Billing is to be within 30 days of incurred costs.**

____　　____________________

WIOA Title I Representative　　Date

____　　____________________

Representative of Training Provider　　Date

TENCO WORKFORCE DEVELOPMENT BOARD
TITLE I SERVICES VOUCHER FOR VENDOR SERVICES

This voucher is considered to be an obligation of funding, up to the amounts specified for Title I, on behalf of the individual identified on this form. Title I Workforce Innovation and Opportunity Act funds have been obligated to cover allowable educational expenses incurred by the participant, up to the amount specified. Once this voucher is completed the obligation of funding takes place and the amount obligated will not fluctuate, unless the participant fails to attend training or unforeseen documented costs are identified after the obligation of funding occurred. **The funding amount on this voucher will expire 90 days after issuance. This voucher, along with an invoice must be presented to TENCO by the vendor within 30 days of incurred cost.**

Vendor or Supplier Name:	____________________		
Address:	____________________	**Phone:**	____________
	____________________	**Fax:**	____________

Name of Participant:	____________________	**Student ID:**	____________
Address:	____________________	**Phone:**	____________
	____________________	**Major:**	____________

List of Approved Books/Supplies/Services	**Amount Approved**
____________________	____________
____________________	____________
____________________	____________
____________________	____________

Total Amount Approved from TENCO WIOA: **$** ____________

Send all invoices for payment to:

Buffalo Trace Area Development District
TENCO Workforce Development Area
P.O. Box 460
Maysville, KY 41056
Phone:(606) 564-6894 Fax: (606)564-0955

I hereby authorize the obligation of Workforce Innovation and Opportunity Act Title I funds to be paid to the above-referenced vendor for the supplies, books, or materials listed on behalf of the participant enrolled into WIOA Title I program.

______________________________ ______________________________
WIOA Title I Representative Date

As a representative for the identified vendor, I hereby agree to provide the products listed directly to the participant identified and invoice Buffalo Trace ADD for the actual cost of each approved product, not to exceed the amount approved per line item. The participant shall be responsible for costs exceeding the amount approved per item. The amount awarded will not be altered, unless the product received must be returned with a credit. **Billing has occurred with 30 days of incurred costs.**

______________________________ ______________________________
Vendor Representative Date

ACCEPTABLE CREDENTIALS

TOPICS

INTRODUCTION

In accordance with WIOA law and federal and state guidance, credentials submitted for WIOA participants across all programs must be **nationally recognized** to count as a positive for the WIOA credential performance metric.

Nationally recognized refers to a credential that will be accepted as a qualification for the career position sought in any state or area, not just Kentucky. It is typically seen as one of the base requirements for the position across the board.

STATE OF KENTUCKY GUIDANCE

Since 2005, when Kentucky implemented Common Measures, the attainment of Degree/Credential measure has not been a required measure. However, the Department of Labor Guidance 16-001Eff 4/1/2016 has continued the effort in analyzing this data for reporting purposes. **Under WIOA, the credential is now a required measure; therefore, the collection of this data is mandatory.** When documenting the credential for a participant, the collection of the credential/attainment or degree MUST include:

• A copy of the credential document must be uploaded into the Case Management System of Record, OR

• A case note documenting that the participant received a credential and the type of credential

attained and date attained, as verified by school

AND

• Documentation of the credential on the Outcomes Tab in Case Management System of Record (KEESuite).

The credential must be a nationally recognized credential. Please note that OJT/NCRC/Workkeys certificates DO NOT count as a credential.

REFERENCES: WIOA Section 116 (29 USC Section 3141)

WIOA GUIDANCE

29 USC 3141: Performance accountability system

Text contains those laws in effect on February 24, 2026

(IV) the percentage of program participants who obtain a **recognized** postsecondary credential, or a secondary school diploma or its recognized equivalent (subject to clause (iii)), during participation in or within 1 year after exit from the program;

(V) the percentage of program participants who, during a program year, are in an education or training program that leads to a **recognized** postsecondary credential or employment and who are achieving measurable skill gains toward such a credential or employment

(4) Definitions of indicators of performance

(A) In general

In order to ensure nationwide comparability of performance data, **the Secretary of Labor and the Secretary of Education, after consultation with representatives described in subparagraph (B), shall issue definitions for the indicators described in paragraph (2).**

(B) Representatives

The representatives referred to in subparagraph (A) are representatives of States and political subdivisions, business and industry, employees, eligible providers of activities carried out through the core programs, educators, researchers, participants, the lead State agency officials with responsibility for the programs carried out through the core programs, individuals with expertise in serving individuals with barriers to employment, and other interested parties.

ACCEPTABLE CREDENTIALS

Program	Accepted Credentials
Nursing/Healthcare	State license, AAS degree, BSN, NCLEX passing score
Lineman	CDL permit/license, Drone Pilot license, Utility Worker Certificate
CDL	CDL permit/license
HVAC, Electrical Tech, Plumbing	AAS, Diploma, Industry Certificate, Commonwealth Apprentice Registration, Journeyman license
Welding	Industry certificate, AAS, AWS Certified Welder Card or NCCER Certification Card (KWI preferred)
Education	Industry Certificate (ECE only), AAS

** Please note – completion certificates are not the same or considered as industry certificates in most situations*

UNACCEPTABLE CREDENTIALS

The following are examples of credentials from common programs within TENCO that will not be accepted as a positive credential outcome

- Completion certificates
- Diplomas (This does not apply to degrees)
- General safety/health certifications (OSHA, CPR, Hazmat, etc.)
- Work readiness/soft skill certificates (ACT, Workeys, basic computer or software literacy certificates)
- Preparatory program certificates (GED, HSE, etc.)
- Pre-Apprenticeship/Apprenticeship programs that do NOT result in a recognized occupational certificate

MSG VS. CREDENTIAL

Measurable Skill Gains do not follow the same guidance as credentials. The guidance outlined in this presentation is solely for the credential performance metric.

MSGs will continue to follow the most recent guidance sent out via email and provided by the state for that performance indicator. If you do not have the most recent guidance (sent out 9/3/2025 via email), please reach out to Natasha Cloum (ncloum@btadd.com) to receive the material.

IN-SCHOOL YOUTH

This credential guidance does not apply to in-school youth participants who are enrolled in a high school or equivalent schooling. The same guidance will be followed in that high school diplomas are an acceptable credential and will count as a positive in the WIOA performance metric, provided the participant enters employment or post-secondary education during their time in the program or within one year after exit.

If an in-school youth attends a training program, we can utilize their high school diploma OR a nationally recognized credential obtained during their time in the program, if they are marked as "in school" at the time of their enrollment. In that situation, only **<u>one</u>** credential is required to meet the WIOA standards for a positive outcome.

SUMMARY

If you have any questions or concerns regarding this guidance, please reach out to Natasha Cloum. If you encounter a credential that is in a program not listed on the "acceptable credentials" slide, or a credential that you are unsure if it is nationally recognized, please send the credential and any related information to Natasha Cloum for guidance before entering a positive outcome.

Thank you.

Post Secondary Credential Attainment Tool

https://www.dol.gov/agencies/eta/Performance/resources/credential-attainment

WIOA Program Follow-Up Services

Kentucky Career Center
Career Training Employer
TENCO
A proud partner of the americanjobcenter network

Purpose and Importance of Follow-Up Services

Support After Program Completion
WIOA follow-up services provide ongoing support to participants transitioning into employment or education after program exit.

Addressing Post-Completion Challenges
Follow-up services help overcome obstacles like job retention, transportation, childcare, and evolving career goals.

Enhancing Program Outcomes
Consistent follow-up improves employment stability and helps meet workforce program performance measures.

Continuous Improvement and Integration
Feedback from follow-up informs program enhancements and integrates into broader career services strategies.

Kentucky Career Center
Career Training Employer
TENCO

Primary Goals of Post-Exit Engagement

Employment Retention Support

Follow-up services help participants overcome early job challenges to maintain employment and build confidence.

Career Advancement Opportunities

Programs encourage ongoing growth through training, certifications, and promotions aligned with career paths.

Barrier Resolution Assistance

Follow-up communication connects participants with resources to address transportation, housing, childcare, and workplace issues.

Ongoing Engagement and Accountability

Personalized outreach and resource sharing sustain participant confidence and measure program effectiveness.

Kentucky Career Center
Career Training Employer
TENCO

Common Follow-Up Service Activities

Career Counseling Support

Career counseling helps individuals evaluate opportunities and make informed career decisions based on personal goals.

Employment Check-Ins

Regular employment check-ins monitor job retention and workplace satisfaction to support continued success.

Supportive Service Referrals

Referrals to services like transportation, childcare, housing, or healthcare address participant barriers to employment.

Mentoring and Skill Advancement

Mentoring encourages accountability, while training referrals help participants advance skills and career opportunities.

Kentucky Career Center
Career Training Employer
TENCO

Youth Follow-Up Requirements

Twelve-Month Follow-Up Services

WIOA requires follow-up services for youth for twelve months post-exit to reinforce their progress and provide ongoing support.

Support Areas for Youth

Youth may need help with job retention, education enrollment, financial literacy, transportation, housing, and workplace readiness.

Communication and Relationship Building

Multiple communication methods and strong relationships enhance youth engagement and successful program outcomes.

Documentation and Outcomes

Documenting follow-up attempts, services, and outcomes is essential for program accountability and youth success measurement.

Kentucky Career Center
Career Training Employer
TENCO

Best Practices for Effective Follow-up

Proactive Follow-Up Planning

Creating a follow-up plan before program exit enables clear goal setting and preferred communication discussions.

Consistent Participant Communication

Regular check-ins and personalized messages keep participants engaged by addressing their specific goals and needs.

Comprehensive Documentation

Documenting interactions and outcomes ensures accountability and supports program evaluation effectively.

Collaborative Support Networks

Partnering with employers and community organizations expands resources and improves follow-up success.

Kentucky Career Center
Career Training Employer
TENCO

WIOA Follow-Up Guidance

This guidance outlines follow-up timing, documentation, and outcome-entry expectations for participants who have exited WIOA services. Follow-up is intended to support continued success after exit and to ensure required performance information is entered accurately and on time.

Performance Year Quarters

A performance year has four quarters:

- Quarter 1: July through September
- Quarter 2: October through December
- Quarter 3: January through March
- Quarter 4: April through June

When Follow-Up Begins

Follow-up begins in the quarter immediately following the quarter in which the participant exits. The exit quarter itself is not counted as the first follow-up quarter.

Example: If a participant exits on August 15, the exit occurs during Quarter 1, which runs July through September. The participant's first quarter of follow-up begins in Quarter 2, which runs October through December.

Required Follow-Up Period

Each participant must receive four quarters of follow-up. The first, second, and third follow-up quarters may be completed at any time during the associated quarter. The fourth follow-up quarter must be completed before the one-year mark from the participant's exit date.

Example: If a participant exits on August 15, the one-year mark is August 15 of the following year. Because the first follow-up quarter is October through December, the fourth follow-up quarter is July through September of the following year. The fourth-quarter follow-up must be completed before August 15, not simply by the end of the July-through-September quarter.

Documentation Requirements in KEE Suite

All contact attempts must be documented in KEE Suite with case notes. Case notes should clearly describe the date of the attempt, the method of contact, the result of the attempt, and any follow-up information received from the participant, employer, school, or other appropriate source.

An outcome must be entered for each follow-up quarter. When entering an outcome, staff must mark “start follow up” as “yes” and include the employer name, participant quarterly wages, enrolled programs, and any required training-related employment information.

Employment Outcomes and Wage Calculation

If the participant was in a training program at any point during program participation, staff must select whether the employment is training-related when entering the employment outcome.

Quarterly wages may be calculated by first determining the participant’s weekly wage, then multiplying that amount by 12. Weekly wage is calculated by multiplying the number of hours worked per week by the participant’s rate of pay.

Formula: Hours worked per week × rate of pay = weekly wage. Weekly wage × 12 = quarterly wages.

Example: If a participant works 30 hours per week at $15.00 per hour, the weekly wage is $450.00. The quarterly wage is $450.00 × 12, which equals $5,400.00.

Students Attending Education

For students attending education, the first and third quarter outcomes should be entered as employment outcomes and marked “no.” The second and fourth quarter outcomes should be entered as “Post-Exit Youth Outcome.” For the type of outcome, select either “education training activities” or “entered post-secondary education,” as appropriate.

Quick Reference Checklist

- Identify the participant’s exit date and exit quarter.
- Begin follow-up in the quarter immediately after the exit quarter.
- Complete four quarters of follow-up.
- Complete the first three follow-up quarters any time within their associated quarters.
- Complete the fourth follow-up quarter before the one-year mark from the exit date.
- Document all contact attempts in KEE Suite case notes.
- Enter an outcome for each follow-up quarter.
- For employment outcomes, include employer name, quarterly wages, enrolled programs, and “start follow up” marked “yes.”

- If the participant was ever in training during participation, indicate whether employment is training-related.
- For students attending education, enter the correct employment or Post-Exit Youth Outcome based on the follow-up quarter.