

***Workforce Investment Act Adult/DW Program
Review
Program Year 2013***

Issued to:

**Pittsylvania County Community Action
Virginia Workforce Center – Martinsville/Henry Co.
Comprehensive**

June 23, 2014

Prepared by:

**Kathy Barton, Regional Program Manager
West Piedmont Workforce Investment Board**

OVERVIEW

The Henry County and Martinsville City Area is a moderate geographic area that is comprised of rural communities in addition to suburban and city communities with limited employment opportunities. Many of the residents seek employment and training opportunities outside of a 30 mile radius from their communities in order to expand their opportunities for self sustainability and skill enhancements. The community receives workforce development services through the Comprehensive Virginia Workforce Center-Martinsville location. The Martinsville Center location collaborates with other state and non-profit agencies with representatives from each of the agencies available in one location for the convenience of the citizens within the various communities. Pittsylvania County Community Action operates the Workforce Investment Act Adult, Dislocated Worker, and Out-of-school Youth programs within the Comprehensive Center. The community also receives personalized Business Services for the area employers from representatives within the center in addition to the Martinsville/Henry County Chamber of Commerce and the West Piedmont Workforce Investment Board. The Martinsville/Henry County Virginia Workforce Center averages 1,940 visitors monthly.

Purpose of the Review

On May 13 through May 16, 2014 The Programming Team of the West Piedmont Workforce Investment Board (WPWIB) conducted the required annual compliance review of the Adult/Dislocated Worker WIA program operated by Pittsylvania County Community Action for Program Year 2013. The purpose of the review was to determine whether procedures are in place to ensure compliance with the Workforce Investment Act, and to identify areas in which technical assistance is needed to ensure continuous improvement.

As part of the review, the team covered three major areas: eligibility, provided services, and outcomes. Good practices are included to highlight activities the review team commends the local area for providing.

The following pages include detailed information on the findings in the three major areas from the annual compliance review. For each area, the report may include findings, concerns, and considerations. If the review team identified a finding or concern, then a detailed description and required action/recommendation is provided. For the purpose of this report the following describes the difference between findings that require action and concerns with recommendations.

- Finding: Findings indicate that the area is out of compliance with current federal laws/regulations or state and local policies. To ensure compliance, each finding has a required action. Local areas must provide a corrective action plan for all findings.
- Concern: Concerns identify a potential risk to the local area and may result in a future finding if the issue is not addressed. Although this does not indicate that the local area is out of compliance, recommendations are provided to improve services to the local area.
- Consideration: Considerations indicate an area identified that would be a benefit to the local area.

Summary of Review

Adult

General Eligibility	Income Eligibility	Case Management	Assessments	Individual Employment Plan	VaWC	Supportive Services
96.43%	66.67%	85%	100%	95.71%	83.33%	100%

Pass Rate by Review Category

Occupational Skills Training	Work Experience Internship OJT	Closure Exit
95.12%	90.91%	100%

Pass Rate by Review Category

Dislocated Worker

General Eligibility	DW Eligibility	Case Management	Assessments	Individual Employment Plan	VaWC	Supportive Services
100%	100%	88%	100%	100%	50%	100%

Pass Rate by Review Category

Occupational Skills Training	Work Experience Internship OJT	Closure Exit
	50%	100%

Pass Rate by Review Category

1. Good Practices

- 1.1 WPWIB commends the Pittsylvania County Community Action Martinsville/Henry County Case Managers for working diligently to reduce a large number of client files that were in followup and maintaining the appropriate documentation to contribute to successful outcomes and passing common measure goals.

2. Programmatic

2.1 Explanation of Area of Review

VCCS recommends that local area monitors attempt to review twelve files from each funding stream in order to recognize any patterns and possible issues. Ten adult participant files and 12 dislocated worker participant files were reviewed to ensure compliance with provisions of the WIA and other applicable laws and regulations.

Case Managers were given the flexibility to select the participant files that were reviewed for each program.

2.2 Findings

2.2.1 Eligibility

Thirteen participant files reviewed were found with insufficient documentation to verify required income, general eligibility items and/or youth barriers.

- 3 revealed insufficient documentation to verify birth date and citizenship.
- 3 revealed income/family size were incorrectly calculated and documented due to missing or incomplete information.
- 3 revealed insufficient documentation to verify dislocation status.

(See Attachment B: Explanation of Findings and Concerns for specifics on these findings.)

WIA and 20 CFR Part 652 establish general and specific eligibility criteria for participants. Local workforce investment areas are required to verify and document the eligibility of all participants served with WIA funds. In instances where inconsistency in documentation is eligibility related, the local workforce investment area is subject to the increased potential of questioned and/or disallowed costs. It is imperative for case managers to

adhere to LWIA policy or guidance on eligibility and adequately document all determinations with LWIA accepted documentation. Acceptable documentation relating to income eligibility can be found on the VCCS Workforce Services website under "Virginia WIA Eligibility Guidelines" (http://www.vccs.edu/Portals/0/ContentAreas/Workforce/VWN/Eligibility_verify%20documentation.pdf).

Required Action:

The PCCA must obtain the necessary documentation to support the identified eligibility requirements. Eligibility documentation must be submitted to the WPWIB by Friday **August 22, 2014**.

If the documentation cannot be obtained and the participant is found to be in-eligible, the local area must notify the VCCS and take the necessary steps to reimburse the WIA program for any funds incurred on the participant.

2.2.2 Missing and/or Incomplete Documentation

Examples of missing and/or incomplete documentation noted during the participant file review were:

- File checklist to be signed by management staff.
- Income calculations
- Social Services documentation
- Incomplete TABE tests
- Incorrect Worksite Agreement

(See Attachment B: Explanation of Findings and Concerns for specifics on this finding.)

Required Action:

Ensuring that the participant files contain the necessary documents is essential towards maximum case management and positive performance outcomes. Case managers and management must take care to ensure that all program documentation is completed and signed as required prior to eligibility determination and any dispensation of services.

2.2.3 VaWC Discrepancies

Fourteen participant files revealed VaWC discrepancies and failure to appropriately align the VaWC client record with program delivery. Examples of this are as follows:

- Activities extending beyond the limitations noted in VWL 11-02. Service codes need to reflect VWL limitations. If services are still being provided beyond activity time limit, the activity dates may be

extended but the extensions to projected end dates need to be documented through VOS case notes.

- Missing service activity codes in VaWC (ex., Supportive Service, Work Experience, Assessments). VOS activities must align with program services provided.
- Placement of participants into VaWC activities that are not supported by documentation in the file.
- System closed activities due to lack of case manager activity in VaWC and timely management of the file.

(See Attachment B: Explanation of Findings and Concerns, for specifics on these findings.)

As stated in **VWL 10-02**, "it is important that service providers are held accountable for aligning program delivery with program results, i.e. common measures. Data entry and tracking in VaWC related to participant's services and reports must be timely, relevant, accurate and consistent. Entering participant data in VaWC is critical to ensure that performance is reported accurately."

Required Action:

PCCA must review the application of VWL #11-02, WIA Service Code Definitions and Limitations with service provider management and case managers to ensure that service codes are appropriately entered into the system and accurately reflect participant activities and services received. PCCA must review these participant cases and make or delegate to WPWIB the appropriate corrections to be updated in VaWC by Friday **August 22, 2014**.

2.2.4 Assessments

Seven participant files reviewed demonstrated an inconsistency in the administration of assessments and the supporting documentation in both the file and the VaWC system.

- Dates on Activity Services do not match the file record that is placed in the participants file.
- Missing copies of assessments in participants file.

(See Attachment B: Explanation of Findings and Concerns, for specifics on these findings)

As stated in **VWL 10-02**, "it is important that service providers are held accountable for aligning program delivery with program results, i.e. common measures. Data entry and tracking in VaWC related to participant's services and reports must be timely, relevant, accurate and consistent. Entering participant data in VaWC is critical to ensure that performance is reported accurately."

Required Action:

PCCA Mart/HC Adult/DW Program must review the application of VWL #11-02, WIA Service Code Definitions and Limitations with service provider management and case managers to ensure that service codes are appropriately entered into the system and accurately reflect participant activities and services received.

PCCA Mart/HC Adult/DW Program must review these participant cases and make or delegate to WPWIB the appropriate corrections to be updated in VaWC by Friday, **August 22, 2014**.

3.3 Concerns

3.3.1 IEP Goals

Ten participant files reviewed demonstrated Individual Service Strategy goals and objectives that did not always align with the participant's needs or the services they actually received. In some cases, the goal descriptions entered into VaWC ISS read more like an objective assessment of the client's situation and not a description of the client's goals and steps for achieving those goals.

(See Attachment B: Explanation of Findings and Concerns for specifics on these findings.)

The IEP should serve to document participants' needs and goals, as well as the services provided to help them to attain their goals and allow an individual to be more employable. For those participants who have been identified as basic skills deficient, the Individual Service Strategies should include a goal and outline specific activities to help them improve those skills.

Recommendation:

Case managers should clearly identify goals with objectives and related activities in the IEP/ISS and align them with activities and services to improve outcomes for the individual.

3.3.2 Case Notes

Fourteen of the youth files reviewed were found to have concerns with case notes.

- Participant contact and notes were not always monthly, per local policy.
- Notes did not provide sufficient information to follow participant activities and progress.

- Case notes showed a delay in entry of notes into VaWC with more than 14 days between the Contact date and Create date.

(See Attachment B: Explanation of Findings and Concerns for specifics on these findings.)

Recommendation:

Keeping well documented case notes is an essential part of case management. This demonstrates that participants are receiving adequate contact and assistance in successfully achieving their goals. In addition, it provides a written record of services and work with an individual should the case manager change or if the individual returns to the program at another time.

3. Next Steps

Complete as directed information listed in Findings and Concerns in the previously written documentation.

Attachment A: Sample Corrective Action Plan

The corrective action plan must be submitted within 30 days of receipt of the findings report provided by VCCS. The plan must be signed and dated by the local area Executive Director.

Required Actions	Corrective Action	Expected Completion Date
Programmatic		
2.2.1 Eligibility	Eligibility will be checked closely by Supervisors at the time of enrollment to catch any errors.	Immediately
2.2.2 Missing and/or Incomplete Documentation	Documentation will be checked closely by Supervisors at the time of enrollment to catch any errors.	Immediately
2.2.3 VaWC Discrepancies	Supervisors will discuss quality of work at monthly meetings.	August meetings
2.2.4 Assessments	Supervisors will discuss quality of work at monthly meetings.	August meetings

Concerns	Corrective Action	Expected Completion Date
Programmatic		
3.3.1 ISS goals	Supervisors will discuss quality of work at monthly meetings.	August meetings
3.3.2 Case Notes	Supervisors will discuss quality of work at monthly meetings.	August meetings

Name of Contracted Provider Representative (print):

Everlena Ross

Signature of Contracted Provider Representative:

Everlena Ross *jel*

Date:

8-19-14

ATTACHMENT B:

Martinsville Henry County Adult and Dislocated Worker

Martinsville Henry County Adult

USER NAME		PERFORMANCE OUTCOME REVIEW	CORRECTED ?	
306345	Danielle Pritchett	<p><i>Documentation for SNAP indicates Family of 2, VaWC reflects family of 1</i></p> <p><i>Documentation for TB Testing, Background Check and Drug Test are in file, however there are no service code activity in the VaWC that support these Services. Missing information of Services in the ISS</i></p> <p><i>Case Notes state that participant obtained employment and never states that participant is no longer employed when beginning the internship leading to believe participant was provided work experience while employed. Participant did not obtain employment from work experience.</i></p>	<p><i>Corrected in vawc</i></p> <p><i>Added service code to vawc updated IEP sent in vos correction</i></p> <p><i>Called customer at her # and also called her contact and left a message</i></p>	<p><i>Information will be added going forward</i></p> <p><i>Customer came in office and said she is still employed at Rock Tenn as needed.</i></p>
32987	Jevona Waller	<p><i>Case Notes entered outside the timely data entry (14 days) between the contact date and the creation date</i></p> <p><i>Documentation for TB Testing, Background Check and Drug Test are in file, however there are no service code activity in the VaWC that support these Services. Missing information of Services in the ISS</i></p>	<p><i>1st case note customer did not show for appointment</i></p> <p><i>Added service codes and IEP and sent in VOS correction</i></p>	
1380121	Ariel Gravely	<p><i>Proof of participants Snap Benefits. Snap Insurance history is in file</i></p>	<p><i>Contacted Social Services</i></p>	

		<p><i>however questioning the note regarding client being including on family members case. Signature is included on form however title is unclear and date is missing.</i></p> <p><i>Lapse of more than 30 days from October 2013 to December 2013, November 2013 case note is missing</i></p>	<p><i>to obtain information. Left message to return call.</i></p> <p><i>Customer was not enrolled until Dec. Customer did not have all documentation to be enrolled in October and did not call back until Dec. when obtained all documentation to be enrolled.</i></p>	
647452	Tyriese Hairston	<p><i>Client received an NCRC. No Service Code to reflect this activity.</i></p> <p><i>Groundsman Training has only been proved for students that are also enrolled in the HOPE Grant program not for the general public.</i></p>	<p><i>Customer obtained his NCRC on his own at the college. Not part of paid training he received. See email that training was approved for customer in file.</i></p>	
1495555	Shelley Hamlet	<p><i>Customer received training and that should have been listed as a separate goal and not as an objective under the employment goal.</i></p> <p><i>Customer also received a CRC which should have been listed as a separate goal.</i></p>	<p><i>IEP was updated to reflect this. VOS correction was made.</i></p>	

Martinsville Henry County Adult

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USER NAME	NAME	PERFORMANCE OUTCOME REVIEW	CORRECTED ?
351792	William Chappell	No Findings	
626738	Rebecca Dalton	Documentation in file is completed incorrectly for 6 months of wages and not one year and it is also entered into VOS with the 6 month amount. Skills to be gained from Internship are not listed in the IEP. Participant dropped out of service.	File is in Case closure. Going forward this will be done.
702579	Makeshia Preston	Checklist in file is not completed or signed by management staff. Case Note entered outside the timely data entry rule (14 days) Case note titled "Processed payment" Client received an NCRC and it is not listed as a goal in the IEP. Cost Estimate from Training Provider is dated 01/23/13 through 03/20/13 and client wasn't enrolled until 10/2013. Customer dropped out of training.	Checklist was signed and dated, see attached Case notes will be entered going forward with in the 14 days The dates should have been 01/23/14 to 03/20/14 on the cost estimate and the Funding authorization. The date was changed and initialed
271708	Tasha McKenzie	CM used Social Services printout to verify citizenship and that information is not on the verification documentation in file. Social Services benefit printout is not signed and dated by DSS case worker and does not indicate individuals covered on order. Case note titled "Follow-up" is dated 01/10/2013 and the previous case note titled "Services codes and IEP" is dated 11/02/2012, more than 30 days. Activity code #205 Develop IEP, extended more than 3 times and this service is only for development and should not be extended past 30 days.	Driver's License and SS Card in file, VOS correction sent to WIB to correct verification Called customer left message. Not able to get print out from social services Contact is now made every 30 days Code 205 is now opened and closed the same day
615882	Marva Thomas	Case Note entered outside the timely data entry rule (14 days) Contact date 12/20/2013 has 14 day	Payment processed will have case notes made

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		<p>gap with creation date being 1/13/2014. There are 2 case notes created on this date 3840211 and 3840055.</p> <p>Service Code 226 Reading and/or Math Testing shows date of 10/10/2013 in VaWC, documentation has date of 10/9/2013</p> <p>Not all services are reflected by a code. Documentation for TB Testing, Background Check and Drug Test are in file, however there are no service code activity in the VaWC that support these Services. ISS does not document the service either. Case notes also document service being provided.</p>	<p>at time it is processed</p> <p>Corrected the date in the VAWC</p> <p>The services codes have been update and the IEP has been updated and a VOS correction sent to the WIB</p>
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Martinsville Henry County DLW

USER NAME	NAME	PERFORMANCE OUTCOME REVIEW	CORRECTED ?
631099	Sherry Krantz	<p>Client list with 14 enrolled individual names with state IDs filed behind Management Approval form with corrections that need to be corrected in files.</p> <p>Activity code #205 Develop IEP, extended more than 1 time and this service is only for development and should not be extended past 30</p>	<p>List removed</p> <p>IEP is now opened and closed the same day at enrollment File in case closure. CRC will be added to</p>

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		<p>days.</p> <p>CRC goal is not listed in IEP.</p> <p>Client completed GED program while enrolled and is also starting Occupational Skills training on 05/21/14.</p>	<p>file going forward Customer is a Trade customer for GED and training</p>
142393	Yulanda Ingram	<p>Activity code #205 Develop IEP, extended more than 1 time and this service is only for development and should not be extended past 30 days.</p> <p>TABE test is not dated and does not list administrator of test.</p> <p>CRC goal is not listed in IEP.</p> <p>IEP does not list skills and competencies that are to be gained from Internships. Client did not complete Internship and dropped out of activity.</p>	<p>Code 205 is now opened and closed at enrollment</p> <p>TABE test is now signed and dated. Yellow sheet added to file about TABE The IEP lists the duties of the customer, the customer quit internship because she found full time employment</p>
1751669	Christopher Martin	<p>Documentation in file including case notes stating client's enrollment with PHCC but this is not listed in the ISS and there is no self-sufficient analysis in the file. Unsure if Trade will be assisting with training.</p>	<p>Customer is trade and WIA has not paid any money on him</p>
1460280	Brittany Campbell	No Findings.	
1278248	Mary Collins	<p>Activity code #205 Develop IEP, extended more than 1 time and this service is only for development and should not be extended past 30 days.</p> <p>TABE test is not dated and does not list administrator of test.</p>	<p>Code 205 is now opened and closed at enrollment</p> <p>Note in folder about TABE test being signed and dated from training 03/06/2013</p>
1447839	Ginger Jones	Activity code #205 Develop IEP, extended more	Code 205 is now

		<p><i>than 1 time and this service is only for development and should not be extended past 30 days.</i></p> <p><i>TABE test is not dated and does not list administrator of test.</i></p> <p><i>CRC goal is not listed in IEP.</i></p>	<p><i>opened and closed at enrollment</i></p> <p><i>TABE test has a note in folder stating that going forward the TABE test will be signed and dated</i></p> <p><i>File in case closure. CRC will be added going forward</i></p>
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Martinsville Henry County DLW

USER NAME	NAME	PERFORMANCE OUTCOME REVIEW	CORRECTED ?
662390	Tanya Bartha	<p><i>CONCERN: VaWC shows 2 Warn Notifications: High Education TAB: Warning: This individuals Current Highest School Grade completed and the Federally Reported Highest School Grade Completed are different. If this is accurate please click the NEXT or SAVE buttons. If this is not the case please select appropriate values from the pull downs. Individual Employment TAB: Projected Layoff Date must be greater than the Core Eligibility Date</i></p> <p><i>The date for Dislocation on the Employer letter does not match what was entered into VaWC. A date of 2/15/2012 is not located on any of the documentations. VaWC shows 2 Warn Notifications: High Education TAB: Warning: This individual Current Highest School Grade completed and the Federally Reported Highest School Grade Completed are different. If this is accurate please click the NEXT or SAVE buttons. If this is not the case please select appropriate values from the pull downs. Individual Employment TAB: Projected Layoff Date must be greater than the Core Eligibility Date</i></p> <p><i>30 day lapse in case notes for May and August 2012</i></p> <p><i>Worksite Agreement was developed by Job Developer but with incorrect equipment/tools that will be used by participant along with incorrect work activity that will be performed at the worksite. The job title reflects the correct description along and the statement of work has the correct job description along with correct skills to be learned. Correct equipment/tool usage along with work</i></p>	<p><i>Customer enrolled with High School diploma. Updated AAS Degree on 7/22/14 when completed 5/17/14. Cannot access pull-down.</i></p> <p><i>Updated lay off list with 2/15/12 lay off date. Removed projected lay off date.</i></p> <p><i>Going forward case notes will not go over 30 day lapse</i></p> <p><i>08/14/2014 Job developer brought in corrected Worksite agreement</i></p>

		<i>activity should be documented on the worksite agreement and case note entered documenting the reason for the change and correction were made.</i>	
1759658	Stacey Cline	<p><i>Participant obtained their GED April 9, 2014. This is noted in the case notes, however, ISS does not reflect Certificate obtained. Service provided is not entered into the VaWC.</i></p> <p><i>Service code 214 Adult Literacy, Basic skills or GED Preparation was not established</i></p>	<i>WIA/PCCA did not pay for the training therefore it was not entered. Training was through Adult Education Center.</i>
1751669	Brandi Dillard	<i>Documentation in file including case notes stating client's enrollment with PHCC but this is not listed in the ISS and there is no self-sufficient analysis in the file. Unsure if Trade will be assisting with training.</i>	<i>IEP Goal #2 states WIA is providing training and she will attend PHCC.</i>
131417	Donald Bennett	<p><i>30 day lapse in case notes for the months of 12/2010,1/2011,3/2011,4/2011,5/2011,2/2012,5/2012</i></p> <p><i>Interest and aptitudes are not listed from the Career scope, TABE scores are not listed. Activities with participant have not been updated in the IEP for example referral to the SYCEP program.</i></p> <p><i>IEP/ISS has been established 3 times in the VaWC system. Service was sit up prior to time limitation letter 11-02. Service codes such as 200 Individual Counseling does not have documentation in file to support this. Case notes do not note a lot of activities with the participant but are noting telephone calls inquiring on job progress, referrals or asking participant to come in to update IEP/ISS.</i></p> <p><i>Supportive Service Code used for Background check, Drug Test and work readiness class. 131 is the appropriate code that should have been used. This service was entered 02/23/2011.</i></p>	<p><i>Files are currently being contacted every 30 days</i></p> <p><i>IEP & case notes now list interest and the TABE</i></p> <p><i>Plan was closed by error and reopened case note stated 1/31/13</i></p> <p><i>Service code 200 is no longer used.</i></p> <p><i>VOS correction was made to add service code 131 for background and drug test.</i></p>

1304637	Sylvia Niblett	<p><i>Date in Employer dislocated letter does not match the date entered into the VaWC. System has 3/25/2011 with documentation dated 1/31/2011. Case note for 5/31/2011 documents this however no documentation from employer was placed in file to support this.</i></p> <p><i>No case notes for 10/2011,11/2011, 1/2012,3/2012,5/2012,7/2012, 2/2013, 5/2013. 7/25/2013 case note states that there is an amended TAA received but cannot find documentation in file.</i></p> <p><i>IEP/ISS does not list the Interest and aptitudes from Career Scope or TABE scores. Occupational Training through Trade, Supportive services provided is not documented in the IEP.</i></p> <p><i>IEP/ISS has been established 2 times in the VaWC system. Service was sit up prior to time limitation letter 11-02.</i></p>	<p><i>Date changed in VAWC to 01/31/2014</i></p> <p><i>Amended copy in file see attached</i></p> <p><i>Case notes now list interest and the TABE test</i></p> <p><i>The first plan was closed 05/31/11 and a new one was opened 12/21/2011 by the new case manager</i></p>
	Cateama Jean-Baptiste	<p><i>Missing layoff date from documentation in file.</i></p> <p><i>Activity code #205 Develop IEP, extended more than 1 time and this service is only for development and should not be extended past 30 days.</i></p> <p><i>TABE test is not dated and does not list administrator of test.</i></p> <p><i>CRC goal is not listed in IEP.</i></p>	<p><i>Lay off list in file from Star Tek See attached</i></p> <p><i>Activity code 205 now opened and closed at enrollment</i></p> <p><i>Note in folder about TABE test being signed and dated from training 03/06/2013</i></p> <p><i>File in case closure. CRC will be added to IEP going forward.</i></p>

West Piedmont Workforce Investment Board Annual Program Audit Review

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WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 08/12/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Tasha McKenzie State ID 271708
Please change the change the proof of citizenship to Driver's license and SS card

Why is the request needed? _____

Needs to be corrected for the audit review.

Request approved by manager: Yes or No

Manager Signature or printed name: Elizabeth J. Mull

Date: 8/12/14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

- Governor

Individual Income	Miscellaneous	Application Eligibility	Grants
Individual Employment	Highest Education	Individual Barriers	Public Assistance
Start Page	Contact Information	Demographic Information	Veteran Information

Demographic Information

- * Date of Birth:
- * Verify Date Of Birth: [\[Verify | Scan | Upload | Link | View \]](#)
☒ Driver's License
- * Age: 28 (Today's Age: 31)
- * Gender: ☐ Male ☒ Female
- * Have you registered for the Selective Service?
[\[Selective Services Web Site\]](#)
- Verify Selective Service Registration: [\[Verify | Scan | Upload | Link | View \]](#)
☒ Not Applicable
- * Re-Verify Selective Service: [\[Re-Verify Selective Service\]](#)
- Selective Service Registration Number:
- Selective Service Registration Date:
- * Citizenship:
- * Verify Citizenship: [\[Verify | Scan | Upload | Link | View \]](#)
☒ Food Stamp Records
- * Do you consider yourself to be of Hispanic Heritage? ☐ Yes ☒ No ☐ Information Not Provided
- * Race: (Select 1 or more) ☒ African American/Black ☐ American Indian/Alaskan Native ☐ Asian ☐ Hawaiian/Other Pacific Islander ☐ White ☐ I do not wish to answer.

Liscense
SS CARD & Driver's Lisc

From:

08/12/2014 00:55

#158 P.004/005

From: Work Force Center

2766381190

08/11/2014 12:56

#669 P.002/007

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 07/25/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Marva Thomas State ID 615882 Please
correct the date for customers IEP for the objective for drug test to 11/07/2013 and the
TB test to 11/19/2013

Why is the request needed? _____

Objective was not added to the IEP for drug test/background check and the TB test.

Request approved by manager: Yes or No

Manager Signature or printed name: Elizabeth J. Miller

Date: 8-11-14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

- Governor

Plan

Goals

Objectives

Services

General Information

User Name VAI615839
User ID VAI615839
Name THOMAS, MARVA

Objective Information

Goal Description	Objective	Date Established	Review Date	Program(s)	Staff	Status	action
To obtain Employment	To obtain employment	09/30/2013	06/30/2014	WIA	Belcher, Diannia	Open	Edit Delete
To obtain Employment	Pass Drug test and Background check	08/04/2014	08/04/2014	WIA	Cassada, Sheila	Closed	Edit Delete
To obtain Employment	To Pss TB test	08/04/2014	08/18/2014	WIA	Cassada, Sheila	Closed	Edit Delete

[Add new objective](#)

[Select pre-defined objectives](#)

[Exit Wizard](#)

From:

08/12/2014 00:55

#158 P.005/005

From: Work Force Center

2766381190

08/11/2014 12:57

#669 P.004/007

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville Date of Request: 08/01/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Marva Thomas State ID 615882
Please Change service codes for code 131 to the date as shown on attached sheet.

Why is the request needed? _____

To correct date with information in folder.

Request approved by manager: Yes or No

Manager Signature or printed name: Elizabeth J. Muller

Date: 8-11-14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No



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+ [Wagner-Peyser - 9 Applications](#)

+ [Trade Adjustment Assistance \(TAA\) Program - 0 Applications](#)

- [Workforce Investment Act Program - 2 Applications](#)

[Create Workforce Investment Act Program](#)



[Workforce Investment Act Program #261415, App Date 9/30/2013, Eligibility Date 9/30/2013, Intensive Date 9/30/2013, LWIA 17 \(Complete\) - Adult](#)

Case Manager: Cassada, Sheila



















Temp Assigned: None Assigned

[Create Participation](#)

[Edit Participation for WIA #261415 Participation Date 9/30/2013](#)

[Create Activity](#)

Status	Activity / Provider	WZ	Funding / Grant	Projected Begin Date	Actual Begin Date	Projected End Date	Actual End Date
	131 - Testing/ background check as required by employer WIA OneStop Provider		Adult	08/01/14 11/19/14	08/01/14	08/01/14	08/01/14 Successful Completion

	<u>131 - Testing/ background check as required by employer</u> WIA OneStop Provider		Adult	08/01/14 11/7/14	08/01/14	08/01/14	08/01/14 Successful Completion
	<u>241 - Career Readiness Certificate - CRC Silver</u> WIA OneStop Provider		Adult	11/10/13	11/10/13	11/10/13	11/15/13 Successful Completion
	<u>226 - Reading and/or Math Testing</u> WIA OneStop Provider		Adult	10/10/13	10/10/13	10/10/13	10/10/13 Successful Completion
	<u>153 - Job Search/Placement Assistance, including Career Coaching</u> WIA OneStop Provider		Adult	09/30/13	09/30/13	08/16/14	Close
	<u>101 - Orientation</u> WIA OneStop Provider		Adult	09/30/13	09/30/13	09/30/13	09/30/13 Successful Completion
	<u>102 - Initial Assessment</u> WIA OneStop Provider		Adult	09/30/13	09/30/13	09/30/13	09/30/13 Successful Completion
	<u>204 - Interest And Aptitude Testing</u> WIA OneStop Provider		Adult	09/30/13	09/30/13	09/30/13	09/30/13 Successful Completion
	<u>205 - Develop Service Strategies (IEP/ISS/EDP)</u> WIA OneStop Provider		Adult	09/30/13	09/30/13	09/30/13	09/30/13 Successful Completion
	<u>204 - Interest And Aptitude Testing</u> No Provider Information		Adult	10/10/13		10/10/13	10/10/13 Void

Create Closure

Create Outcome



Workforce Investment Act Program #16025, App Date 11/17/2006, Eligibility Date 11/17/2006, Intensive Date 11/17/2006, LWIA 17 (Case Closed) - Adult
Case Manager: None Assigned

+ Generic Programs - 0 Applications

Activity Status:  = Open,  = Closed,  = System Closed,  = Voided

[ Print All]

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 08/01/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Marva Thomas State ID 615882
Please Change service codes for code 131 to the date as shown on attached sheet.

Why is the request needed? _____

To correct date with information in folder.

Request approved by manager: Yes or No

Manager Signature or printed name: _____

Date: _____

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 07/25/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Marva Thomas State ID 615882 Please
correct the date for customers IEP for the objective for drug test to 11/07/2013 and the
TB test to 11/19/2013

Why is the request needed? _____

Objective was not added to the IEP for drug test/background check and the TB test.

Request approved by manager: Yes or No

Manager Signature or printed name: _____

Date: _____

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

**Basic Skills Assessment
VA VOS**

General Information

Name: **MARVA THOMAS**
User ID: **VAI615839**

Assessment Date: **10/09/2013**
LWIA: **17 - West Piedmont**
Office: **192 - Martinsville/Henry County**
- **Virginia Workforce Ctr**

Reading Assessment Result

Test Given: **14 - Test of Adult Basic Education (TABE)** Version: **9M**
Assessment Result: **09.9 - Grade Equivalent**
Other Info: **Not Reported**

Math Assessment Result

Test Given: **14 - Test of Adult Basic Education (TABE)** Version: **9M**
Assessment Result: **09.4 - Grade Equivalent**
Other Info: **Not Reported**

Language Assessment Result

Test Given: **-** Version:
Assessment Result: **0 - Not Applicable**
Other Info: **Not Reported**

Meets definition of Basic Skills Deficient: **No**

Staff Information

Date Created: **10/10/2013** Created by Staff: **VASNXXVII184 - Diannia Belcher**
Date Last Edited: **08/01/2014** Last Edited by Staff: **VASNXXVII087 - Sheila Cassada**

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 07/25/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Jevona Waller – State ID 32987 Please
correct the date for customer for her IEP for the objective for the drug test and
background check to start date 11 /15/13 and end date 11/15/13
The TB test needs to be changed to 11/19/2013 start and end date .

Why is the request needed? _____

To update IEP in VOS

Request approved by manager: Yes or No

Manager Signature or printed name: Elizabeth J. Mule

Date: 8-1-14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

• Governor

Plan

Goals

Objectives

Services

General Information

User Name VAI187818
User ID VAI187818
Name Waller, Jevona

Objective Information

Goal Description	Objective	Date Established	Review Date	Program(s)	Staff	Status	action
Employment	Employment	11/08/2013	05/26/2014	WIA	Belcher, Diannia	Open	Edit Delete
Employment	Pass drug/background	07/25/2014 11/15/13	09/08/2014	WIA	Cassada, Sheila	Closed	Edit Delete
Employment	Pass TB test	07/25/2014 11/19/13	09/08/2014	WIA	Cassada, Sheila	Closed	Edit Delete

[Add new objective](#)

[Select pre-defined objectives](#)

[Exit Wizard](#)

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 07/25/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Jevona Waller – State ID 32987 Please correct service code 182 as follows : the first one needs to be 11/15/2013 and the next code 182 needs to be dated 11/19/2013 .

Why is the request needed? _____

Service Codes were not added to the VOS

Request approved by manager: Yes or No

Manager Signature or printed name: Elizabeth J. Miller

Date: 8-1-14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

- Governor

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+ [Wagner-Peyser - 7 Applications](#)

+ [Trade Adjustment Assistance \(TAA\) Program - 0 Applications](#)

- [Workforce Investment Act Program - 1 Application](#)

[Create Workforce Investment Act Program](#)



[Workforce Investment Act Program #262175, App Date 11/8/2013, Eligibility Date 11/8/2013, Intensive Date 11/8/2013, LWIA 17 \(Complete\) - Adult](#)

Case Manager: Cassada, Sheila










Temp Assigned: None Assigned

[Create Participation](#)

[Edit Participation for WIA #262175 Participation Date 11/8/2013](#)

[Create Activity](#)





Status	Activity / Provider	WZ	Funding / Grant	Projected Begin Date	Actual Begin Date	Projected End Date	Actual End Date
	131 - Testing/ background check as required by employer WIA OneStop Provider		Adult	07/25/14 n hrs/ing	07/25/14	07/25/14	07/25/14 Successful Completion

	<u>131 - Testing/ background check as required by employer</u> WIA OneStop Provider		Adult	07/25/14 11/19/14	07/25/14	07/25/14	07/25/14 Successful Completion
	<u>226 - Reading and/or Math Testing</u> WIA OneStop Provider		Adult	11/15/13	11/15/13	11/15/13	11/15/13 Successful Completion
	<u>153 - Job Search/Placement Assistance, including Career Coaching</u> WIA OneStop Provider		Adult	11/08/13	11/08/13	08/16/14	Close
	<u>204 - Interest And Aptitude Testing</u> WIA OneStop Provider		Adult	11/08/13	11/08/13	11/08/13	11/08/13 Successful Completion
	<u>205 - Develop Service Strategies (IEP/ISS/EDP)</u> WIA OneStop Provider		Adult	11/08/13	11/08/13	11/08/13	11/08/13 Successful Completion
	<u>101 - Orientation</u> WIA OneStop Provider		Adult	11/08/13	11/08/13	11/08/13	11/08/13 Successful Completion
	<u>102 - Initial Assessment</u> WIA OneStop Provider		Adult	11/08/13	11/08/13	11/08/13	11/08/13 Successful Completion

Create Closure

Create Outcome

+ Generic Programs - 0 Applications

Activity Status:  = Open,  = Closed,  = System Closed,  = Voided

WIA Application for Adult/Dislocated Worker Intensive and Training Services Virginia

General Information

Name: Pritchett, Danielle N		SSN: 228-37-3242 Verified
App ID: 261065	State ID: 306345	User ID: VAI306525
LWIA: 17 - West Piedmont	One-Stop: 171009 - Martinsville/Henry County - Virginia Workforce Ctr	Assigned Case Manager: Sheila Cassada
Date Of Application: 9/11/2013	Core Eligibility Date: 9/11/2013	Intensive Eligibility Date: 9/11/2013

Contact Information

Current Address: 1112 Roundabout RD., Martinsville, VA 24112	County: 5104000690-Martinsville, City of	Ward:
Primary Phone: (276) 734-9390	Alternate Phone:	Email: daniellepritchett@ymail.com
Eligibility Address: 878 Katherine Street, Martinsville, VA 24112	County: 690-Martinsville, City of	Ward:

Demographic Information

Date of Birth: 3/21/1986 Verified	Age: 27	Gender: 0-Female
Selective Service: 4-Not applicable Verified	Citizenship: 1-Citizen of U.S. or U.S. Territory Verified	
Hispanic: 0-No	Race: 2 -African American/Black	
Considered to have a Disability: 0-No	Type of Disability: -	
Farmworker Status: -	Type of Qualifying Farm Worker: -	

Veteran Information

Transitioning Service Member: 0-No	Type of Transitioning Service Member: 0-Not Applicable	
Estimated Discharge Date: Not Applicable	Attended a TAP workshop in the last 3 years: 0-No	
Veteran Status: 3-No	Disabled Veteran: 3-No	Campaign Veteran: 3-No
Recently Separated Veteran: 0-No	Veteran Separation Date: Not Applicable	

Employment Information

Employment Status: 2-Not Employed Verified	If employed, under-employed: 0-No	Current or most recent Hourly Wage: \$0.00
Occupation of Most Recent Employment Prior to WIA Participation: Not Available		Receiving Unemployment Compensation: 4-Neither claimant or exhaustee

Termination/Layoff Information

Received a termination or layoff notice from last job or job of dislocation: 0-No	Actual Layoff Date:	Projected Layoff Date:
Reason for Layoff: None of the above. Termination/layoff does not qualify individual for Dislocated Worker program.		
Dislocation Employer Name:	Employer Address:	
Dislocation Hourly Wage: \$0.00	Attended Group Orientation: 0-No	
Most Recent Date Attended Rapid Response Service: Not Applicable	Dislocation Event:	

Barriers

Displaced Homemaker: 3-No	Has limited English or difficulties with reading, speaking, writing or understanding of English: 0-No	
Single Parent: 1-Yes	Homeless: 0-No	Offender: 1-Yes Verified

Education

Highest Grade Completed: 87-Attained High School Diploma Verified
School Status: 5-Not attending school,HS Graduate

Public Assistance

Receiving TANF: 0-No	Receiving SSI: 0-No	Receiving SSDI: 0-No
Receiving Refugee Assistance: 0-No	Receiving Food Stamps: 1-Yes Verified	Receiving General Assistance: 0-No
Receiving or been notified will receive any Pell Grant Monies: 0-No		

Income Information

Due to disability, qualifies as Family of One: 0-No	Family Size: 2 Verified
Family Income: \$0.00	Low Income: 1-Yes

Eligibility

LWIA Priority for Service Policy in effect: 1-Yes	Meets the LWIA Adult Priority for Service definition: 1-Yes	Determined to need intensive services to become self-sufficient: 0-Not Applicable (Not an employed adult or dislocated worker)
--	--	---

WIA Formula Program Eligibility

Adult: 1-Yes	Dislocated Worker: 2-No
---------------------	--------------------------------

ARRA (Stimulus) Program Eligibility

Adult ARRA: 1-Yes	Dislocated Worker ARRA: 2-No
--------------------------	-------------------------------------

Statewide Program Eligibility

Displaced Homemaker ♦ Adult: 0-Not Applicable	Displaced Homemaker ♦ Dislocated Worker: 0-Not Applicable
Other ♦ Adult: 0-Not Applicable	Other ♦ Dislocated Worker: 0-Not Applicable
Incumbent Worker: 0-Not Applicable	Rapid Response Additional Assistance: 0-Not Applicable

Eligibility Contractor Information

Contractor:	Contract #:	Staff: VASNXXVII087 Sheila Cassada
--------------------	--------------------	---

Signatures

I certify that the information on this application is accurate to the best of my knowledge. I understand that my willful misstatement of the facts may cause my forfeiture of rights in the WIA Program and may result in criminal action. I give permission for outside sources to be contacted and for them to disclose any information necessary to verify my eligibility for WIA. I further understand and agree that my social security number and other information on this application will be provided to other government agencies if required by law.

Applicant Signature <i>See original</i>	Date
<i>Sheila B. Cassada</i>	<i>7/25/14</i>
Staff Signature	Date

Print Date: 7/25/2014

Record Create Date: 9/11/2013

Record Edit Date: 7/25/2014

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 07/25/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Danielle Pritchett State ID 306345

Please correct the date for customers IEP for the objective for drug test to 01/22/2014 n

Why is the request needed? _____

Objective was not added to the IEP for drug test/background check

Request approved by manager: Yes or No

Manager Signature or printed name: Elizabeth J. Miller

Date: 8-1-14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

[Plan](#)[Goals](#)[Objectives](#)[Services](#)**General Information**

User Name VAI306525

User ID VAI306525

Name Pritchett, Danielle

Objective Information

Goal Description	Objective	Date Established	Review Date	Program(s)	Staff	Status	action
Employment	Assessments, IEP, Job Search Assistance	09/11/2013	11/11/2013	WIA	Cassada, Sheila	Open	Edit Delete
Employment	Complete Internship	01/27/2014	04/27/2014	WIA	Cassada, Sheila	Closed	Edit Delete
Employment	Pass Drug test and Background check	07/25/2014	09/08/2014	WIA	Cassada, Sheila	Closed	Edit Delete

[Add new objective](#)[Select pre-defined objectives](#)[Exit Wizard](#)

WEST PIEDMONT WORKFORCE INVESTMENT BOARD
VOS CORRECTION REQUEST SHEET

Agency Name: WIA Martinsville

Date of Request: 07/25/2014

Person making the request: Sheila Cassada

VOS Correction Request: (Explain the request) Danielle Pritchett State ID 306345
Please correct the date for service code service code 182 to cover the drug testing and
background check for customer. 131 to 01/22/2014 in each column

Why is the request needed? _____

Code not entered in VOS at the time of service _____

Request approved by manager: Yes or No

Manager Signature or printed name: _____

Date: 8-1-14

Date systems administrator received request: _____

Date request was sent to the state: _____

Date request was corrected: _____

Date agency was notified: _____

Request completed: Yes or No

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+ [Wagner-Peyser - 7 Applications](#)

+ [Trade Adjustment Assistance \(TAA\) Program - 0 Applications](#)

- [Workforce Investment Act Program - 1 Application](#)

[Create Workforce Investment Act Program](#)



Workforce Investment Act Program #261065, App Date 9/11/2013, Eligibility Date 9/11/2013, Intensive Date 9/11/2013, LWIA 17 (Complete) - Adult

Case Manager: Cassada, Sheila

Temp Assigned: None Assigned

[Create Participation](#)

[Edit Participation for WIA #261065 Participation Date 9/11/2013](#)

[Create Activity](#)

Status	Activity / Provider	WZ	Funding / Grant	Projected Begin Date	Actual Begin Date	Projected End Date	Actual End Date
	131 - Testing/ background check as required by employer WIA OneStop Provider		Adult	07/25/14 01/22/14	07/25/14 01/22/14	07/25/14	07/25/14 Successful Completion

01/22/14

I: Amendment - in ~~re~~ in cost

TAA Enrollment
Virginia Workforce Connection

VEC-Martinsville
233 West Commonwealth Blvd
Martinsville, VA 24112

Participant Name	SSN	AppID
Sylvia M Nibblett	XXX-XX-7231	2302586
Funding Source	Case Manager	
TAA-TAA Petition: 72861-Stanley Furniture Company, Inc.	Monica Hylton	
Activity/Service: 346 - TAA- Approved Occupational Training	Break in Training (weeks): 0	
Authorization Begin Date	Authorization End Date	
Projected Begin: 8/27/2011 Actual Begin: 7/13/2011	Projected End: 5/31/2013 8/31/13 Actual End: N/A	
Comments: Criminal Justice		

Enrollment Provider Information

Entity	FEIN#
Old Dominion University Program/Service: Criminal Justice, BS	546000884
Training Site Address	Telephone Number
Old Dominion University Patrick Henry Community College Campus 645 Patriots Avenue Martinsville, VA 24112	N/A

Scheduled Service Cost:	- \$17,965.03	Current Funded Costs:	\$0.00
\$ 18,454.03			
Total Training Costs			
\$17,965.03			
Tuition/Fee	\$14,828.50		
Books	\$2,400.00		
Tools	\$0.00		
Other Costs	\$736.53		

Record ID: 557759
Last Edited By: VAS525
Last Edit Date: 7/13/2011 4:56:00 PM

Star Tek

LOCATION	NAME	JOB TITLE	HIRE DATE	TERM DATE	TERM RE	SSN	BIRTHDATE	ADDR1	CITY
Collinsville, VA	Jean-Baptiste, Gateama	Customer Care Rep I	02/09/09	02/15/12	Laid Off	054-58-5200	01/05/73	1337 Rivermont Hghts.	Martinsville

WEST PIEDMONT WORKFORCE INVESTMENT BOARD

WIA Adult, Dislocated Worker and Youth Eligibility Verification Checklist

Client Name: MAKESHIA PRESTON

Social Security Number: 223-24-3631 Phone Number: (276) 252-8809

Adult, Dislocated Worker or Youth Program (check one):

- ☒ Adult
- ☐ Dislocated Worker
- ☐ Youth

By checking appropriate boxes and providing a signature at the end of this checklist, the Program Manager is verifying on behalf of the Contractor that all acceptable verifications and documentations are included in the client's file prior to acceptance into the WIA program.

Adult, Dislocated Worker or Youth General Eligibility (all must be checked):

- ☒ Social Security Number
- ☒ Citizenship or Eligible to Work
- ☒ Age / Birth Date
- ☐ Selective Service Registrant (if applicable)

Adult or Youth Income Eligibility:

- ☐ Individual / Family Income Verification (if on public assistance, this does not need verification)
- ☐ Individual Status / Family Size (if on public assistance as an individual without others in the household, this does not need verification)
- ☒ Low-Income Verification based on one of the following (check one):
 - ☐ TANF
 - ☒ Food Stamps
 - ☐ SSI
 - ☐ Homeless
 - ☐ Supported Foster Child
 - ☐ Individual with Disability (income eligibility criteria may be waived based on board's priority as a low income adult)

Youth Barriers (check one or more):

- ☐ Basic Skills Deficient
- ☐ Pregnant or Parenting
- ☐ School Drop Out
- ☐ Offender
- ☐ Homeless / Runaway Youth
- ☐ Foster Child
- ☐ Requires Additional Assistance

Exceptions Youth Special Rule (5 Percent Window) – Income Eligibility is waived, but one or more of the following has been confirmed:

Please note: Prior to using this 5 percent rule, board staff approval must be obtained.

- ☐ School Dropout
- ☐ Basic Skill Deficient
- ☐ Behind a Grade Level
- ☐ Pregnant or Parenting Youth
- ☐ Individual with Disability (including learning disability)
- ☐ Homeless / Runaway Youth
- ☐ Offender
- ☐ Serious barriers to employment as identified by board: _____
- ☐ Self Certification Form (for youth 18 to 21 years old only)

Dislocated Worker Eligibility (check one):

- ☐ Terminated / Laid off / Received Notice of Termination or Layoff (both boxes must be checked)
 - ☐ Proof of separation from employer
 - ☐ Eligible for UI
 - ☐ Unlikely to Return (Reemployment opportunity is poor)
- ☐ Permanent Closure of Plant, Facility, Enterprise or Substantial Layoff
- ☐ General Announcement of Closure
- ☐ Formerly Self-Employed / Currently Employed
- ☐ Displaced Homemaker (both boxes must be checked)
 - ☐ Dependent on income of another family member
 - ☐ Unemployed or underemployed

For additional information pertaining to this check list, such as what is considered acceptable verification and documentation, click here to reference “Acceptable Verification and Documentation for WIA Eligibility.”

Contractor: PCCA/WIA

Program Manager (Print): Diannia Belcher

Program Manager (Signature): Diannia Belcher

Date: 10-4-13 Contact Number: _____ Email: dbelcher@pccainc.org

Please retain this form in the client's file.

General Information:

* Plan ID: 20877
 * User ID: 3664416
 * Name: DILLARD, BRANDI
 * Plan was started on: 02/11/2014
 * Plan started in office
 * location:
 * Plan closed on:

Goals and Objectives Established:

Goal #	Program Affiliation (s)	Type Of Goal	Term Of Goal	Date Established	Estimated Completion Date	Actual Completion Date	Status
1	WIA	Employment	Long Term	2/11/2014	2/11/2015		Open

Goal Description: To Obtain Unsubsidized Employment - The participant will be provided a staff assisted job search along with career counseling, resume/interviewing assistance, development of an Individual Employment Plan, and assessments. The intensive services will be on going and the hope is that these services will result in full time employment for participant.

Customer has been laid off from Verizon Wireless as of November 15, 2013. Customer is interested in training in Accounting field. Customer completed the Career Scope with an interest and aptitude in humanitarian, artistic and mechanical. Customer is scheduled to take the TABE test.

Customer completed the TABE test today, February 28, 2014 with the following scores: Reading 12.9, version 9D and math 9.9, version 9M.

Objective(s) to Goal #:

Objective	Date Established	Review Date	Program	Staff	Status
Employment/Training	2/11/2014	8/11/2014	WIA	Gilley , Mitzi	Open

Comments: The participant will complete the required assessment (career scope & tabe test). An IEP is developed with the participate with a goal of finding full time employment through training.

Goals and Objectives Established:

Goal #	Program Affiliation (s)	Type Of Goal	Term Of Goal	Date Established	Estimated Completion Date	Actual Completion Date	Status
2	WIA	Schooling	Short Term	5/26/2014	8/20/2014		Open

Goal Description: Complete Occupational Skills Training - The participant will receive Accounting at PHCC. This training will be provided by WIA. Based on the CareerScope assessment, it appears that the participant has both the interest and the abilities, if properly trained, to be quite successful in the occupation selected.

Based on the occupation selected, labor market information found in the Virginia Workforce Connect system clearly indicates that this training should lead to a position that has both growth potential and should lead to a self-sufficient wage. See LMI Printout attached.

Objective(s) to Goal #:

Objective	Date Established	Review Date	Program	Staff	Status
-----------	------------------	-------------	---------	-------	--------

Training	5/26/2014	8/20/2014	WIA	Gilley , Mitzi	Open
----------	-----------	-----------	-----	----------------	------

Comments: To successful complete training in Accounting at PHCC.

Services Provided Against Plan:

Service/Activity	App # - Program	Begin Date	End Date	Program	Staff
153 - Job Search/Placement Assistance, including Career Coaching	263671 - WIA	A - 02/11/2014	P - 06/11/2014	WIA OneStop Provider	VASNXXVII159
204 - Interest And Aptitude Testing	263671 - WIA	A - 02/11/2014	A - 02/11/2014	WIA OneStop Provider	VASNXXVII159
205 - Develop Service Strategies (IEP/ISS/EDP)	263671 - WIA	A - 02/11/2014	A - 02/11/2014	Employment Service	VASNXXVII159
205 - Develop Service Strategies (IEP/ISS/EDP)	263671 - WIA	A - 02/11/2014	A - 02/11/2014	WIA OneStop Provider	VASNXXVII159
101 - Orientation	263671 - WIA	A - 02/11/2014	A - 02/11/2014	WIA OneStop Provider	VASNXXVII159
102 - Initial Assessment	263671 - WIA	A - 02/11/2014	A - 02/11/2014	WIA OneStop Provider	VASNXXVII159
226 - Reading and/or Math Testing	263671 - WIA	A - 02/28/2014	A - 02/28/2014	WIA OneStop Provider	VASNXXVII159
131 - Testing/ background check as required by employer	263671 - WIA	A - 04/08/2014	A - 04/08/2014	WIA OneStop Provider	VASNXXVII159
300 - Occupational Skills Training - Approved Provider (ITA)	263671 - WIA	A - 05/26/2014	P - 08/20/2014	Patrick Henry Community College	VASNXXVII159

Dillard, Brandi,
N

Brandi Dillard

Date: 5-26-14

Gilley, Mitzi

Mitzi I Gilley

Date: 5-26-14

Date: _____

(For Minors: Parent/Guardian)

INFSH1
CASE: 1485104 CSLD: 6059
CASE NAME: TYRA M MITCHELL

ROLL:+ -ENTER Y BESIDE THE ISSUANCE NUMBER FOR MORE DETAIL- C
S VACIS ISSUE EBT PAYMENT ISS PRG HH NEED ISS RECON T L C
ISSUE NUM METHOD ISSUE NUM MONTH FIP CAT SZ DESC AMT DISP FIP I M R
EBT-CR 043202518 12/2013 690 NPA 03 99 327 N N 2
EBT-CR 043022472 11/2013 690 NPA 03 35 327 N N 2
EBT-CR 043022473 10/2013 690 NPA 03 32 154 N N 2
EBT-CR 041330845 08/2013 690 NPA 03 99 526 N N 2
EBT-CR 040860110 07/2013 690 NPA 03 99 526 N N 2
EBT-CR 040395269 06/2013 690 NPA 03 99 526 N N 2
EBT-CR 039927011 05/2013 690 NPA 03 99 526 N N 2
EBT-CR 039461279 04/2013 690 NPA 03 99 526 N N 2
EBT-CR 039263722 03/2013 690 NPA 03 33 526 N N 2
EBT-CR 038529932 02/2013 690 NPA 03 99 526 N N 2
EBT-CR 038066137 01/2013 690 NPA 03 99 526 N N 2
EBT-CR 037604452 12/2012 690 NPA 03 99 526 N N 2
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NEXT SCREEN: XMIT:
1ADAPT 2INMENU 3 4 5 6 7DspPer 8ScrHlp 9 10

Ariel Gravely is included in
her mother's SNAP Benefit Case.

Dale Clarke
O. A. III

Henry-Martinsville
20 Progress
PO Box
Martinsville,
(276) 656-43
(276) 656-4303 - fax

Social
Worker

FIPS 089 HENRY - M13PR2
 SNAF ISSUANCE HISTORY INQUIRY

09/05/2012
 WRKR: 2434

BIFSH1
 CASE: 0661023 CSLD: 6060
 CASE NAME: TASHA L MCKENZIE

ROLL: + -ENTER Y BESIDE THE ISSUANCE NUMBER FOR MORE DETAIL- C
 S VACIS ISSUE EBT PAYMENT ISS PRG HH NEED ISS RECON T L C
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 EBT-CR 036409477 09/2012 089 NPA 05 99 699 N N 2
 EBT-CR 035948164 08/2012 089 NPA 05 99 699 N N 2
 EBT-CR 035484974 07/2012 089 NPA 05 99 699 N N 2
 EBT-CR 035035242 06/2012 089 NPA 05 99 699 N N 2
 EBT-CR 034584121 05/2012 089 NPA 05 99 699 N N 2
 EBT-CR 034137400 04/2012 089 NPA 05 99 699 N N 2
 EBT-CR 033686556 03/2012 089 NPA 05 99 699 N N 2
 EBT-CR 033236646 02/2012 089 NPA 05 99 699 N N 2
 EBT-CR 032787407 01/2012 089 NPA 05 99 699 N N 2
 EBT-CR 032336972 12/2011 089 NPA 05 99 701 N N 2
 EBT-CR 031890504 11/2011 089 NPA 05 99 701 N N 2
 EBT-CR 031448739 10/2011 089 NPA 04 99 668 N N 2

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NEXT SCREEN: XMIT:
 1ADAPT 2BIMENU 3 4 5 6 7DspPer 8ScrHlp 9 10

EBT
 V. Canty
 9/16/12

Henry-Martinsville Social Services
 20 Progress Drive
 PO Box 4946
 Martinsville, VA 24115
 (276) 656-4300 - phone
 (276) 656-4303 - fax

WORKSITE AGREEMENT

A Worksite Agreement is hereby executed between

Virginia Workforce Center (Martinsville, VA)

and

European Home Design

(hereinafter referred to as the Worksite), pursuant to the Workforce Investment act of 1998.

- A. This agreement will entail only financial obligations as follows:
1. It is understood that WIA Work Based Learning participants will receive allowances from the WIA Program Operator for work performed at the worksite. Worker's Compensation insurance is provided by the WIA Program Operator.
 2. The worksite organization is in no way financially responsible for participants.
- B. This WIA Program Operator's Case Manager will provide program orientation to all worksite supervisors prior to commencement of work activities by participants.
- C. WIA participants will be assigned to worksites contingent upon coordination and agreement between the Case Manager and the worksite on the basis of individual participant's needs and capability and the availability of sufficient, meaningful, and well-supervised work. No participant will be permitted to work, be trained, or receive services in buildings, surroundings, or other conditions which are unsanitary, hazardous, or dangerous to his or her health.
- D. Individuals responsible for the worksite operation will insure that all work assignments are adequately and competently supervised at all times. This includes, but is not limited to the following:
1. Orientation of participants to the specific work station duties and safety rules.
 2. Assignment of participants' task(s) in relation to their ability to perform and in conjunction with the requirements of the task for which hired.
 3. Instruction, supervision, and evaluation of participants' performance.
 4. Maintaining communication with the Case Manager concerning participant progress and notifying the contractor immediately of any significant participant problems encountered.
 5. Removal from a worksite of a participant will be the prerogative of the worksite. Termination from the program will remain the prerogative of the Case Manager.
- E. The worksite will prepare and maintain a daily, accurate time sheet and attendance record, completed in ink, and report participant time and attendance to the Case Manager as required by the WIA Program Operator.
- F. The worksite will provide sufficient equipment and/or materials to conduct the program. Participants will be using the following equipment/tools:

Phone

Computer

Scanner

Microsoft Excel

Microsoft Office

Copy Machine

Revised
rac 8/14/14

- G. The worksite will comply with applicable Federal, State and local laws.
- H. The worksite will ensure that their program is not in violation of the Maintenance of Effort Provisions.
- I. The worksite will not engage in prohibited sectarian activities.
- J. Participants are not allowed to engage in political activities during the hours in which they are being paid or employed in a position involving political activities in the office of an elected official.
- K. No participant is required to join a union as a condition for enrollment in WIA.
- L. The average number of participants to be enrolled at this worksite is 10.
The supervisor-to-participant ratio average is 1:10.
- M. The average number of hours of work per week per participant is 40.
No participant can be paid overtime with WIA funds.
- N. Listed below are the type(s) of work activity at this worksite:

Loading and unloading packaging

Moving, labeling, and scanning boxes

Directing shipments to the correct location

Directing phone calls to the correct location

- O. The WIA Program Operator or his or her designee will have the right to visit for monitoring and evaluating the worksite participant operations at any reasonable time during normal worksite operating hours.
- P. Adherence to the rules and regulations governing the program will be the responsibility of the worksite. The Case Manager will be responsible for providing such rules and/or changes to the worksite.

The Worksite Agreement is effective on ^{12th} ~~11th~~ day of May, 2014, and will remain in effect until the ^{14th} 20th day of June, 2014, unless terminated sooner by written notice by either party to the other.

As Case Manager, I certify that the worksite has been checked for safety regulations and the worksite appears to meet safety standards and no apparent hazardous conditions exist.

By: [Signature]
Signature

Date: 5/7/14

WORKSITE - ORGANIZATION

European Home Design

I certify that the worksite has been provided a copy of this Agreement.

By: [Signature] ^{IF}
Signature

Date: 5/7/14

**WORK BASED LEARNING
STATEMENT OF ENTITLEMENT**

- A. This statement describes the terms and conditions agreed to by the participant and the contractor (training agency). The contractor will fully explain the following information and will not sign this statement until the information in Part B is completed. The participant will not sign this statement until the information in Part B is completed by the Contractor.

This statement is not a guarantee that the participant will work or train for the maximum allowable number of hours, even though the participant has not obtained unsubsidized employment or transferred to another WIA activity.

If the training agency's contract with the WIA Program Operator ends before the participant has completed the maximum allowable hours, the participant may be terminated unless the contract is continued.

If the contract is continued and the participant's enrollment is also continued, this statement can be changed in ink and changes initialed by the participant and the contractor.

- B. The participant has been accepted into the contractor's Work Based Learning program and is entitled to the following, as applicable:

HOURLY ALLOWANCE	
Hourly ALLOWANCE	\$7.25
Maximum Work Hour/Week	40
Not to exceed Total Hours** of Or Total Weeks ** of	240
	6
Training Site Start Date	5/12/14
Projected Ending Date	6/20/14

* Whichever applies.

Work will be performed for the following training site (if applicable):

Name (Training Site): European Home Design

Address (Job Site): 2258 River Rd. Fieldale, VA 24089

Job Title: Receptionist

- C: I certify that Parts A and B above have been fully explained to the participant.


Signature of Program Operator

5/17/14
Date

I certify that I fully understand Parts A and B as explained by the contractor.


Signature of Participant

5/17/14
Date

WORKSITE AGREEMENT ADDENDUM

Worksite: European Home Design

Address: _____ Phone: _____

Work Schedule: 8:00 ☒ AM ☐ PM To 4:00 ☐ AM ☒ PM

	<u>Participant Name</u>	<u>Birth Date</u>	<u>Date Assigned</u>	<u>Date Terminated</u>	<u>Emergency Contact/ Phone</u>
1.	<u>Tanya Benton</u>	<u>1/1/83</u>	<u>5/12/14</u>		<u>(214) 224 1456</u>
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					

Worksite Supervisor

I certify that I have received supervisory training/orientation, a copy of the worksite supervisor's manual, and a copy of the original worksite agreement.

	<u>Type Name</u>	<u>Title</u>	<u>Signature</u>	<u>Date</u>
1.	<u>Carol Sheffer</u>	<u>Operations Mgr</u>	<u>Carol Sheffer</u>	<u>5/7/14</u>
2.				
3.				
4.				
5.				
6.				

6-20-14
DATE

Workforce Investment Act One-Stop Center
CUSTOMER FOLLOW-UP SURVEY

In your Individual Employment Plan (IEP), you agreed to participate in follow-up surveys and requests for information. Law requires the WIA One-Stop Center to collect data in order to measure how well this program is working and to support future funding for customers. In addition, this information is used to measure how well your individual program goals are being met. By answering the following questions, you will provide valuable information that will help us determine the quality of service provided to you and identify, if needed, any areas requiring improvement.

SSN: 228-32-3242

NAME: Daniel Pritchett

ADDRESS: 878 Katherin St Martinsville, VA 24112

PHONE: Home: (276) 734-9522 Work: 336-661-1700

Are you working? ☒ YES ☐ NO

EMPLOYER NAME: Rock Tenn

ADDRESS: 116 Textile Dr Ridgeway, VA 24148

JOB DUTIES: Packer

STARTING DATE: 9/13/13 STARTING SALARY: 7.25

PER: ☒ HR ☐ WK ☐ MO ☐ YR

HOURS WORKED PER WEEK: 8-20 WORKS @ needed

Is your current job related to the WIA training you received? ☐ YES ☒ NO

If no, why? none received

COMMENTS AND/OR PROBLEMS ABOUT YOUR CURRENT JOB:

9/20/13

Star Tek

LOCATION	NAME	JOB TITLE	HIRE DATE	TERM DATE	TERM RESSN	BIRTHDATE	ADDR1	CITY
Collinsville, VA	Jean-Baptiste, Cateama	Customer Care Rep I	02/09/09	02/15/12	Laid Off	054-58-5200	01/05/73	1337 Rivermont Hghts. Martinsville

STATZIP	PHONE1	PHONE2
VA 24112	(276) 8069511	(276) 8069511