



WIOA Eligibility Policy: Adult & Dislocated Worker

Effective March 1, 2017 / Updated December 1, 2017

The Purpose

To provide guidance to staff when determining the eligibility of individuals for funding through the Workforce Innovation and Opportunity Act (WIOA) Adult and Dislocated Worker Programs.

The Background

Under WIOA, in order for an individual to receive WIOA funded services, other than basic career services, they must be determined eligible and enrolled. For an individual to be enrolled into the WIOA program, they must:

- have been determined, by an Employment & Training Counselor (ETC), to need services and have the ability to benefit from those services; **and**
- successfully complete the application/eligibility determination process; including providing the necessary documentation required to substantiate his/her eligibility **and**
- have a CalJOBS record - an ETC will enter the appropriate data into the CalJOBS system (see [WIOA Application](#) procedure for system details)

The Policy

WIOA staff are to ensure that all participants meet the WIOA eligibility criteria, provided within this policy, prior to enrollment and receipt of WIOA funded services.



Q: Can an individual receive training funds before being determined WIOA eligible?

A: No, an individual must be determined eligible and provide all documentation before receiving training funds.

Determining Eligibility

ETCs should conduct a full eligibility of a client to determine **BOTH** their WIOA Adult and/or Dislocated Worker eligibility **AND** if they also qualify for any of the Priority of Service categories. Customers may be enrolled after successfully completing the WIOA eligibility, regardless of their Priority of Service standing, unless otherwise directed by a supervisor.

If a participant meets the eligibility criteria for Dislocated Worker AND Priority of Service this should be noted in the case file, and the customer should be enrolled into the Dislocated Worker program. **A participant must be enrolled within 90 days of the application date; otherwise, they must repeat the application, documentation, and verification process.**

Eligibility Verification Procedure

Before individuals can be determined eligible to receive WIOA funded services a review of the WIOA Application, provided documentation and system entries will be conducted by a Reviewer, usually the team Coordinator or Supervisor.

The Reviewer shall utilize the completed Adult Eligibility Review and Verification Form or Dislocated Worker Eligibility Worksheet to ensure that all documentation are included in the file and reflected correctly in the system.

The Reviewer will case note the completed review and any adjustments and/or additions needed prior to returning the file to the ETC of record.

The [Eligibility Review Checklist](#) is used by the Reviewer to ensure consistency and completeness in carrying out

The Reviewer must sign off at the bottom of the completed form/worksheet.

The Reviewer shall verify the calculations on the signed Income Calculation Form for the six months prior to the date of application.

Documentation

Documentation is the maintaining of either hard copy or electronic on-file evidence obtained to confirm an eligibility requirement . To minimize the burden on individuals only one documentation source is required for each eligibility data element. All general eligibility information and paperwork (i.e. Participant Release/Complaint/Grievance Form **HSD 1490**) will be placed in the individual's eligibility file.

Types of Documentation

1. Hard copies of evidence kept in a file.
2. Scanned documents stored electronically.
3. Cross-Match - detailed supporting evidence for the data element in a database (i.e. CalWIN printout with individual's Social Security Number verifying the date and services received).
4. CalJOBS - detailed information in the Local case management system is an acceptable source of data validation for State required items, such as the date of first training service.
5. Self-Attestation or Certification (applicant statement) - when a individual states his/her status for a particular data element. The key elements for self-attestation are:
 - a. The individual identifying his/her status for permitted elements, and
 - b. Signing and dating a form attesting to this status, and
 - c. The signature of a witness that is aware of the individual's status (an ETC may not sign as a witness).
6. While a self-attestation is not considered a primary documentation source, self-attestation may be used when an item is unverifiable or it is unreasonably difficult to obtain, as allowed in the Acceptable Documentation Sources table section of this policy. The individuals' difficulty in obtaining documentation does not need to entail hardship or suffering to justify using an applicant statement.
7. Case Notes - statement by the ETC that identifies the individuals status on a specific date and how determined, see [Case Note Policy](#) for details.

Documentation Retention Requirements

Participant case files must be retained for a minimum of three years. This three year retention clock begins when: (1) the participant is no longer included in any reportable outcome, and (2) any issues (e.g. audit/monitoring findings, unresolved costs, etc.) have been resolved.



General Eligibility Criteria

The following information outlines the general requirements, which an individual must meet before consideration for enrollment into the program:

- U.S. citizen or otherwise legally entitled to work in the U.S.; **and**
- Age 18 or older; **and**
- Selective Service Registration (males who are 18 or older and born on or after January 1, 1960), unless an exception is justified (see [Selective Service Policy](#) for details).

Eligibility Criteria (Verify each data element)	Acceptable Documentation General Eligibility (One document per eligibility criterion is required.)
Birth Date/Age	<ul style="list-style-type: none"> • Baptismal record • Birth certificate • Form DD-214 "Report of Separation" • Driver's license • Federal, state or local government issued identification card • Hospital record of birth • Passport • Public assistance/social service records • School records or identification card • Work permit • Cross match with Department of Public Health vital records • Tribal records
Right to Work (see I-9 Acceptable Documents List for details)	<ul style="list-style-type: none"> • Verification document (s) that satisfy List A of the Form I-9 • Verification document (s) that satisfy List B and C of the Form I-9
Selective Service Registration	<ul style="list-style-type: none"> • Selective Service acknowledgement letter • Form DD-214 "Report of Separation" • Screen printout of the Selective Service verification internet site: https://www.sss.gov/RegVer/wfVerification.aspx • Selective Service registration card • Selective Service verification form (Form 3A) • Stamped post office receipt of registration • Selective Service status information letter (see Selective Service Policy for details)

Dislocated Worker Eligibility Criteria

Under WIOA, Dislocated Workers are individuals with significant attachment to the workforce (see [WIOA Definitions](#) for details) but who have lost their employment or income from employment for one or more of the following circumstances:

1. The individual meets (A), (B) and (C) below:
 - a. Has been terminated or laid off, or received a notice of termination or layoff from employment; **and**
 - b. There are two options for meeting (B), either:
 - i. Is eligible for or has exhausted UI or
 - ii. Is not eligible for UI due to insufficient earnings or having performed work for a non-covered employer, but has been employed for duration to show attachment to the workforce; **and**
 - c. Is unlikely to return (see [WIOA Definitions](#) for details) to previous occupation without additional services or training.
2. Has been terminated or laid off, or received a notice of termination or layoff from employment as a result of any permanent closure of, or any substantial layoff at a plant, facility or enterprise.
3. Is employed at a facility at which the employer has made a general announcement that such facility will close within 180 days. For the purposes of eligibility to receive services other than training or supportive services, is employed at a facility at which the employer has made a general announcement that such facility will close.
4. Previously self-employed (including employment as a farmer, a rancher, or a fisherman) and unemployed due to natural disaster or general economic conditions.
5. The individual qualifies as a displaced homemaker (see [WIOA Definitions](#) for details).
6. After layoff, have become reemployed in an income maintenance position (stopgap) making less than their former wages, and/or is in employment that uses significantly less skills or abilities than the job of dislocation and the individual's current employment and job of dislocation is not in the same field.

Veterans discharged (under conditions other than dishonorable) either voluntarily or involuntarily from the military and unlikely to return to a previous industry or occupation meets the criteria of being "terminated" for establishing dislocated worker eligibility..

A military spouse is considered a dislocated worker if they leave a job to follow his/her spouse when:

- Spouse is unable to continue employment because of the service member's duty reassignment or discharge from the military, or
- Spouse meets the definition of a displaced homemaker.

A completed Dislocated Worker Eligibility Worksheet ([HSD 1084](#)) must indicate the eligibility element and the verification used to document the requirement the individual met.

A dislocated worker must meet with WIOA general eligibility criteria and one of the seven eligibility criteria below. One document per eligibility criterion is required.

Option #1

#1 (A) Has been terminated or laid off, or has received a notice of termination or layoff:

AND

#1 (B) Is either:
1. eligible for or exhausted entitlement to UI

OR

#1 (B) 2. Has been attached to the workforce, but is not eligible for UI due to insufficient earnings or employed by an employer not covered under state UI law;

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| <ul style="list-style-type: none"> • Worker Adjustment and Retraining Notification Act (WARN) notice • Photocopy of a printed media article or announcement describing the layoff. The photocopy must include the name of the medium in which published and the date of publication • Employer or union representative letter or statement • DE 8406 Personalized Job Search Assistance (PJSA) appointment notice form • DE 8530 Reemployment Eligibility Assistance (REA) letter • DE 1106/Z Appointment notice of referral to an Initial Assistance Workshop (IAW) • Screen print of IAW schedule • Reemployment plan generated from IAW • Invitation letter to Self-Employment Assistance (SEA) orientation • Screen print of SEA schedule. • Self-attestation |
| <ul style="list-style-type: none"> • Statement by an Unemployment Insurance (UI) representative • UI records, including the DE 1180PH Claim Status and History form, DE 4581 Continued Claim Paper form, DE 8406 PJSA appointment notice form, DE 8530 REA letter, and Employment Development Department (EDD) Web-Cert printout • DE 1106/Z Appointment notice of referral to an IAW • Screen print of IAW schedule • Reemployment plan generated from IAW • Invitation letter to SEA orientation • Screen print of SEA schedule |
| <ul style="list-style-type: none"> • Pay check stubs • W-2 and/or tax returns • UI records, including DE 429Z Notice of UI Award and DE 4581 Continued Claim paper form • Statement by the employer or union representative • Statement by a UI representative • Self-attestation |

AND

#1 (C) Is unlikely to return to a previous industry or occupation

- Screen print of IAW schedule
- Reemployment plan generated from IAW
- Invitation letter to SEA orientation
- Screen print of SEA schedule
- DE 8406 PJSA appointment notice form
- Internet site, such as CalJOBS that indicates lack of industry/occupation availability
- Screen print of Labor Market Information Division screens that indicates lack of industry/occupation availability
- Doctor statement indicating applicant's inability to return to previous industry/occupation due to physical limitations
- Vocational rehabilitation counselor's statement indicating applicant's inability to return to previous industry/occupation due to physical limitations
- Employment Specialist's determination
- Self-attestation

Option # 2

#2 Has been terminated or laid off, or has received a notice of termination or layoff, from employment as a result of an permanent closure of, or any substantial layoff at, a plant, facility, or enterprise.

Note: In the case of downsizing or workforce reduction when it is unclear which employees will be affected, a layoff notice is appropriate.

Closure or substantial layoff:

- Bankruptcy documents, if declared under Chapter 7, Title 11 U.S.C. Notice of foreclosure or a similar document provided by a financial institution when such document clearly shows that a closure or mass layoff will occur as a result of its issuance
- Copy of a printed media article/announcement describing the closure/mass layoff; the copy must include the name of the medium in which published and the date of publication
- Statement from the employer or union representative
- Statement from the employer's bank official, attorney, supplier, accountant, or another knowledgeable individual
- WARN notice
- Telephone verification
- Self-attestation

Notice of Layoff or Laid off:

- WARN notice
- Copy of other specific notice to employee of intent to layoff
- UI Form 501 (Separation Statement), when completed on both sides and signed by an employer representative
- Employer or union representative letter or statement
- Telephone verification
- Self-attestation

#3 Is employed at a facility at which the employer has made a general announcement that such facility will close within 180 days;

OR

#3 For purposes of eligibility to receive basic services only, is employed at a facility at which the employer has made a general announcement that such facility will close.

#4 Was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters.

#6 Is an eligible dislocated worker who, since dislocation and prior to application, has not been employed in a job that paid a wage either:

(a) a self-sufficient dislocated worker wage;
(b) leading to self-sufficiency; **or**
(c) providing more than stopgap employment.

- Bankruptcy documents, if declared under Chapter 7, Title 11, U.S.C.
- Notice of foreclosure or a similar document provided by a financial institution when such document clearly shows that a closure or mass layoff will occur as a result of its issuance
- Copy of a printed media article/announcement describing the closure/mass layoff; the copy must include the name of the medium in which published and the date of publication
- Statement from the employer or union representative
- Statement from the employer's bank official, attorney, supplier, accountant, or another knowledgeable individual

- Bankruptcy documents listing both the name of the business and the applicant's name
- Business license
- Copy of a completed federal income tax return (Schedule SE) for the most recent tax year
- Copy of a printed media article/announcement describing the closure/mass layoff; the copy must include the name of the medium in which published and the date of publication
- Copy of articles of incorporation for the business listing the applicant as a principal
- Self-attestation

- Public assistance records
- Court records
- Divorce papers
- Bank records
- Spouse's member's layoff notice
- Spouse's death record
- Self-attestation

Acceptable documentation from one of the five dislocated worker eligibility criteria above

and

- Pay Stubs
- Bank statements (direct deposit)
- Employer statement/contact
- Family or business financial records
- Tax documents
- Self-attestation

Priority of Service Eligibility Criteria

An adult must be low-income; **OR** be receiving, or have recently received, public assistance; **OR** have a basic skills deficiency in order to be included in the Priority of Service category.

Under WIOA, Adult program funding is limited, mandatory priority groups must be prioritized when identifying individuals who will receive individualized and training services. These targeted populations must first meet the eligibility requirements for the Adult program. The Priority of Service Policy describes the order and rational for prioritization based on the requirements in WIOA. Since WIOA funding is limited, in the event that 85% of Job Links training funds have been obligated, the Sonoma County Workforce Investment Board has approved the priority also be applied to Dislocated Worker funds.

Basic Skills Deficiency Criteria

An individual with a basic skills deficiency is defined as an individual who is unable to compute or solve problems, or read, write, or speak English, at a level necessary to function on the job, in the individual's family, or in society (WIOA Section 3[5]).

Criteria used to determine whether an individual is basic skills deficient includes the following:

- Lacks a high school diploma, or high school equivalents and is not enrolled in post-secondary education.
- Enrolled in a Title II Adult Education / Literacy program
- English, reading, writing or computing skills at an 8.9 or below grade level.
- Determined to be Limited English skills proficient through staff-documented observations.
- Other objective criteria may be determined appropriate by the Local Area and documented in it's required policy.

All documentation of a basic skills deficiency, including a self-certification* must be case noted with at least the following information.

- State the participant's status for a specific data element
- State the date on which the information was obtained, and
- The Case Manager who obtained the information

Example: A case manager verifies an individual is basic skills deficient by viewing school records, specifically, enrollment in a Title II Adult Education/Literacy program. The case notes must include auditable information, such as the name of the school and the date of enrollment, which could allow an auditor/monitor to later retrieve this information. The case manager would not need to keep a hard copy of the school record in the participant's file (TEGL 06-14, Attachment A).

*Note that self-attestation is not to be used as the primary method of gathering documentation to verify data elements. Self-attestation as a documentation source is only to be used when the preferred options of paper documentation or third party corroboration are not available.

Low-Income Criteria

Individual is unemployed at the time of application OR individual is under-employed AND meets one or more of the following low-income requirements.

1. Receives / Is a member of a family that receives, or in the past six months received assistance through the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), the Supplemental Security Income program (SSI), or other local income-based public assistance.
2. Is in a family with total family income in the past six months that does not exceed the higher of:
 - a. the poverty line; or
 - b. 70 percent of the lower living standard income level;
3. Is a homeless individual (see WIOA Definitions for details);
4. Is a foster child on behalf of whom State or local government payments are made; or
5. Is an individual with a disability whose own income meets the income requirement of clause (2), but who is a member of a family whose income does not meet this requirement.

Employed adults must be determined to be in need of individualized or training services, meet the general eligibility criteria and not earning a self-sufficient wage to be eligible for WIOA funded services (see Self-Sufficiency Policy for details).

A completed Adult Eligibility Review and Verification Form ([HSD 1069](#)) must indicate the eligibility element and the verification used to document the requirement the individual met.

Determination of Low-Income Status

I. Family Size

ETCs will evaluate the individuals family circumstances and information to determine their family size. Family is defined as two or more persons related by blood, marriage (including same-sex spouses), or decree of court, who are living in a single residence, and are included in one or more of the following:

- A husband, wife, and dependent children.
- A parent or guardian and dependent children.
- A husband and wife.

Disabled individuals being viewed as a family of one (see 5 above) must meet the following, an individual who:

- Has a physical or mental impairment that substantially limits one or more of the major life activities of the individual;
- A record of such an impairment; or
- Being regarded as having such impairment.

A dependent child is an individual who is:

- Claimed as a dependent on their parent's income tax; **and**
- Under 18, not an emancipated minor, and living in a single residence with their parent/guardian; **or**
- Age 18 - 21, and living in single residence with their parent (s) or guardian

II. Income Sources

The following income sources **should** be included in an individual's income calculation:

Includable Income
• Monetary compensation for services, including wages, tips, salary, commissions, or fees before any deductions.
• Net receipts from non-farm self-employment (receipts from a person's own unincorporated business, professional enterprise, or partnership, after deductions for business expense)
• Net receipts from farm self-employment (receipts for a farm which one operates as an owner, renter, or sharecropper, after deductions for farm operating expenses)
• Regular payments from railroad retirement, strike benefits from union funds, workers compensation, and training stipends (e.g., wages from the California Conservation Corp)
• Alimony, Military family allotments, or other regular support from an absent family member or someone not living in the household.
• Private pensions, government employee pensions (including military retirement pay)
• Regular insurance or annuity payments (including state disability insurance)
• College or university scholarships (not needs-based), grants, fellowships, and assistantships
• Net gambling or lottery winnings
• Severance payments
• Terminal leave pay
• Social Security Disability Insurance payments
• Regular ongoing payments for rental income, trusts and dividends

If an applicant reports little or no includable income she/he should indicate other resources relied upon for support during the last six months on an applicant statement (HSD 1072). Such resources may include, but not limited to unpaid debts, gifts, loans, and in-kind services. The Income Calculation Form ([HSD 1068](#)) will need to indicate "no" income and see attached statement.

II. Income Sources - Continued

The following income sources should **not** be included in an individual's income calculation:

Excludable Income	
· Unemployment Insurance	
· Child support payments (including foster care child payments)	
· Need-based Public assistance payments (including TANF, Supplemental Security Income, Emergency Assistance money payments, and non-federally-funded general assistance or general relief money payments)	
· Social Security Old Age and Survivors' Insurance benefit payments	
· Financial assistance under Title N of the Higher Education Act, i.e. , Pell Grants	
· Supplemental Educational Opportunity Grants and Federal Work Study	
· Needs-based scholarship assistance	
· Loans	
· Veterans Benefits	
· Income earned while the veteran was on active military duty and certain other veterans' benefits, i.e., compensation for service-connected disability, compensation for service connected death, vocational rehabilitation, and education assistance	
· Capital gains	
· Any assets drawn down as withdrawals from a bank, the sale of property, a house or a car	
· Tax refunds, gifts, loans, IRA withdrawals, lump-sum inheritances, one-time insurance payments, or compensation for injury	
· Non-cash benefits such as employer paid or union-paid portion of health insurance or other fringe benefits, food or housing received in lieu of wages	
· The value of food and fuel produced and consumed on farms	
· The imputed value of rent from owner occupied nonfarm or farm housing	
· Medicare, Medicaid, food stamps, school meals, and housing assistance	
· Allowances, earnings and payments to individuals participating in programs under the Act (except OJT wages)	

III. Income Calculation

An Income Calculation Form ([HSD 1068](#)) must be completed and signed for all Adult Low-Income applicants. Individuals normally receive income as salary, varying, or intermittent payments. ETCs will calculate an individual's income using the following methods:

	Salary	Varying	Intermittent
How income received	Income received without variation in gross pay from pay period to pay period. Salary information may be provided in a series of pay stubs or one, cumulative pay stub.	When reported earnings vary from pay period to pay period, annualize the average of the earnings submitted.	Earnings are varied and include periods of unemployment. .
What is needed to determine 6 months of income	To determine an individual's gross income for the most recent six-month time period, multiply the individual's weekly gross pay by 26, bi-weekly pay by 13, bi-monthly pay by 12, or monthly pay by 6.	The earnings may be submitted on a number of pay stubs or on one cumulative pay stub.	The individual shall supply as many pay stubs as possible and complete an Individual Statement explaining all missing pay stubs and non-work periods during the last six (6)-months.
Example	Bi-weekly pay stubs indicate a gross amount of \$548. $\$548 \times 13 = \$7,124$, the income for the most recent six-month time period.	Six weekly pay stubs report the following gross earnings: \$534, \$475, \$398, \$534, \$498, and \$534. Add: $\$534 + \$475 + \$398 + \$534 + \$498 + \$534 = \$2,973$ Divide: $\$2,973 \div 6 = \495.50 , the average gross weekly earnings Multiply: $\$495.50 \times 26 = \$12,883$, the income for the most recent six-month time period.	Individual states received no money in the last six months, states on self certification: "My mother gifted me food and clothing for the last six months while staying at my sisters home for free. I have had no income for the past six months."

A low-income individual must meet the WIOA general eligibility criteria and the eligibility criteria below. One document per eligibility criterion is required.

#1 Receives, or is a member of a family that receives, cash payments under a federal, state, or local income-based public assistance program.

- Authorization to receive cash public assistance
- Public assistance check
- Medical card showing cash grant status
- Public assistance records
- Refugee assistance records
- Cross-match with public assistance database

#2 Received an income, or is a member of a family that received a total family income, for the six-month period prior to application for the program that, in relation to family size, does not exceed the higher of:

- (A) The poverty line for an equivalent period; or
- (B) 70 percent of the Lower Living Standard Income Level for an equivalent period.

- Alimony agreement
- Award letter from Veterans Administration
- Bank statements (direct deposit)
- Compensation award letter
- Court award letter
- Employer statement/contact
- Family or business financial records
- Housing authority verification
- Pay stubs
- Pension statement
- Public assistance records
- Quarterly estimated tax for self-employed persons (Schedule C)
- Social Security benefits records
- UI documents and/or printout
- Self-attestation

Note - documentation should be provided for each inclusive income source received by the applicant and each family member for the six-month period preceding the application date. It is necessary to verify family size when utilizing family income eligibility.

An applicant who claims little or no income must submit a statement that little or no income was received during the past six months, and that he/she was not employed for that period.

#3 The applicant is a member of a household that receives (or has been determined within the 6-month period prior to application for the program involved to be eligible to receive) Supplemental Nutrition Assistance Program benefits (aka food stamps).

- Current authorization to obtain food stamps
- Food stamp card with current date
- Current food stamp receipt
- Postmarked food stamp mailer with applicable name and address
- Statement from County Welfare Office
- Public assistance records

#4 Qualifies as a homeless individual, as defined in subsections (a) and (c) of Section 103 of the Stewart B. McKinney Homeless Assistance Act (see [WIOA definitions](#) for details).

#5 Foster child for which state or local government payments are made on his/her behalf.

#6 An individual with a disability whose own income meets the low-income requirements of #1 and #2 listed above, but is a member of a family whose income does not meet such requirements.

Note - Disability status as well as income must be verified. An individual with a disability shall be considered a family of one for eligibility purposes.

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| <ul style="list-style-type: none"> • Written statement from an individual providing temporary residence • Written statement from social service agency • Written statement from a shelter • WIA application • Self-attestation |
| <ul style="list-style-type: none"> • Written confirmation from social services agency • Case notes |
| <ul style="list-style-type: none"> • Medical records • Physician's statement • Psychiatrist or psychologist diagnosis/statement • Social Security Administration disability records • Letter from drug or alcohol rehabilitation agency • School record/official statement • Observable condition (self-attestation with the interviewer serving as the corroborating witness) • Rehabilitation evaluation • Sheltered workshop certification • Social Service records/referral • Veterans Administration letter/records • Vocational rehabilitation letter/statement • Workers compensation records/statement • Telephone verification • Other applicable, verifiable, documentation • Self-attestation |

References

EDD WSD15-14 Directive

WIOA Section 3 (15),(16),(25), (36), (49), (50)

WIOA 680.120, 680.130, 680.210

TEGL 26-13

TEGL 22-04, Change 1

The Americans with Disabilities Act of 1990, Section 3(2)(a)

29 CFR 37.4, 95.53, 97.42(b)

EDD Eligibility Technical Assistance Guide (RWSD14-4)