

Out-Of-School Youth Enrollment Checklist

Must Complete the Wagner Peyser Application in MoJobs, add a Participation Activity, and Refer to WIOA

GENERAL/BASIC

Social Security Number (*Choose one below--documentation must show SSN*)

- | | |
|---|--|
| <input type="checkbox"/> Social Security Card | <input type="checkbox"/> DD -214 |
| <input type="checkbox"/> Employment Records | <input type="checkbox"/> Social Service Agency Records |
| <input type="checkbox"/> Public Assistance Records | <input type="checkbox"/> Social Security Benefits |
| <input type="checkbox"/> W-2 Form | <input type="checkbox"/> Proof of UI eligibility/unemployment wage records |
| <input type="checkbox"/> Selective Service Registration | |

Date of Birth (*Choose One Below*)

- | | |
|---|--|
| <input type="checkbox"/> Driver's License | <input type="checkbox"/> Federal, State, or Local ID card |
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> DD-214 |
| <input type="checkbox"/> Passport | <input type="checkbox"/> Public Assistance/Social Services Records |
| <input type="checkbox"/> School records or ID cards | <input type="checkbox"/> Hospital Record of Birth |
| <input type="checkbox"/> Work Permit | <input type="checkbox"/> Proof of UI eligibility/unemployment wage records |

Citizen/Eligible to Work in US (*Choose one below*)

- | | |
|--|---|
| <input type="checkbox"/> DD-214/Report of Transfer or Discharge | <input type="checkbox"/> Alien Registration Car/Work Permit |
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Food stamp records |
| <input type="checkbox"/> Foreign Passport (stamped eligible to work) | <input type="checkbox"/> I-9 Supporting Documentation |
| <input type="checkbox"/> Hospital Record of Birth | <input type="checkbox"/> Naturalization Certification |
| <input type="checkbox"/> Public Assistance Records | <input type="checkbox"/> US Passport |
| <input type="checkbox"/> Proof of UI eligibility/unemployment wage records | |

EO Complaint and Grievance Notice

Selective Service Registration (Males born after 1959)

Eligible Veteran (*Choose one below if applicable*)

- | | |
|---|--|
| <input type="checkbox"/> DD-214 | <input type="checkbox"/> Letter from Veterans Administration |
| <input type="checkbox"/> Cross-Match with Department of Defense Records | <input type="checkbox"/> Cross-Match with Veterans Services Database |

Employment Status at Participation (*Choose one below*)

- | | |
|--|---|
| <input type="checkbox"/> Pay Stub | <input type="checkbox"/> Employer letter |
| <input type="checkbox"/> Signed WIOA Intake form or signed Self-Attestation Form | <input type="checkbox"/> Case notes recording the information collected from participant. |

Out-of-School Youth

- Not attending school**
- Applicable records from education institution: GED certificate, diploma, attendance record, transcripts, drop out letter, or school documentation
 - Signed WIOA Intake/Application
 - Self-Attestation Form

16-24 Years Old (*See date of birth above*)

Barrier (*Select all that apply below*)

- School Dropout (*Select one below*)
 - Applicable records from education institution

<input type="checkbox"/> Attendance records, transcripts, dropout letter, or school documentation <input type="checkbox"/> Signed WIOA application <input type="checkbox"/> Self-attestation form
<input type="checkbox"/> Supposed to be in school but did not attend last quarter--Compulsory Attendance <i>(Select one below)</i> <input type="checkbox"/> Applicable records from education institution <input type="checkbox"/> Attendance records, transcripts, dropout letter, or school documentation <input type="checkbox"/> Signed WIOA intake/application <input type="checkbox"/> Self-attestation form
<input type="checkbox"/> Low income high school graduate who is basic skills deficient or English language learner <i>(Select one below)</i> <input type="checkbox"/> Standardized test <input type="checkbox"/> School record <input type="checkbox"/> Other documentation approved by OWD (WorkKeys Bronze level or lower) <input type="checkbox"/> Documentation of English language learner
<input type="checkbox"/> Offender <i>(Select one below)</i> <input type="checkbox"/> Documentation from juvenile or adult criminal justice system <input type="checkbox"/> Written statement or referral document from a court or probation officer <input type="checkbox"/> Referral transmittal from a Reintegration Agency <input type="checkbox"/> Signed WIOA intake/application <input type="checkbox"/> Self-attestation form <input type="checkbox"/> Signed ISS <input type="checkbox"/> Federal bonding application
<input type="checkbox"/> Homeless or runaway <input type="checkbox"/> Self-attestation form <input type="checkbox"/> Signed WIOA intake/application <input type="checkbox"/> Written statement from individual providing shelter or social service agency <input type="checkbox"/> Case notes <input type="checkbox"/> Signed ISS <input type="checkbox"/> Letter from caseworker or support provider
<input type="checkbox"/> Foster child or aged out of foster system <i>(choose one below)</i> <input type="checkbox"/> Social service agency confirmation <input type="checkbox"/> Case notes <input type="checkbox"/> Self-attestation form <input type="checkbox"/> Foster care referral transmittal <input type="checkbox"/> Signed WIOA intake/application <input type="checkbox"/> Needs Assessment <input type="checkbox"/> Signed ISS
<input type="checkbox"/> Pregnant or Parenting <i>(Males do not qualify until birth of child-- Choose one below)</i> <input type="checkbox"/> Signed WIOA intake/application <input type="checkbox"/> Self-attestation form <input type="checkbox"/> WIC eligibility verification <input type="checkbox"/> Case notes <input type="checkbox"/> Individual with a disability <i>(Choose one below)</i> <input type="checkbox"/> Self-attestation form <input type="checkbox"/> School 504 records <input type="checkbox"/> Assessment test results
<input type="checkbox"/> Local Barrier (last resort) must verify both income and one local barrier below Board Approval and Applicant Statement Required <input type="checkbox"/> Fired/terminated <input type="checkbox"/> At Risk of Drop Out (Letter From School Official) <input type="checkbox"/> Behavioral Problems at School <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Incarcerated parents <input type="checkbox"/> Domestic violence