

Grid for Social Security Number

1. SOCIAL SECURITY NUMBER

2. LAST NAME

3. FIRST NAME

M.I.

4. ADDRESS LINE 1

5. ADDRESS LINE 2, include apt #

6. CITY

7. STATE

8. ZIP + 4

9. COUNTY

U S

10. COUNTRY

11. CITIZEN/RIGHT TO WORK:

___ CITIZEN

___ RIGHT TO WORK

___ NO

12. PRIMARY PHONE:

Area Code

13. ALTERNATE PHONE:

Area Code

14. EMAIL:

15. ALIEN REGISTRATION CARD NUMBER

Must complete #15a or #15b along with #15

16. VETERAN STATUS - if Veteran, complete #41 a, b, c, d, e

___ Not a Veteran

___ Transitioning Service Member

___ Spouse of Veteran

___ Veteran, <180 days of Active Service

___ Veteran

15a. EXPIRATION DATE

MM/DD/YYYY grid

15b. PERMANENT

PROGRAM APPLICATION

ELIGIBILITY CRITERIA Continued

ENROLLMENT

17. MM/DD/YYYY grid

APPLICATION DATE

Staff Use

18. PROGRAM TYPE/PROJECT

___ State Formula (MN DW)

___ Federal Formula (WIOA DW)

___ WIOA Adult

___ Project Name: _____

19. MM/DD/YYYY grid

DECISION DATE

20. [Y] [N] MEETS LOCAL PRIORITY OF SERVICE

If Yes, Justification is _____

Staff Name: _____

Please Print

25. [Y] [N]

SEPARATED FROM PERMANENT EMPLOYMENT

25a.

MM/DD/YYYY grid
ACTUAL/PROJECTED SEPARATION DATE

26. [Y] [N]

RECEIVED NOTICE OF PENDING LAYOFF if yes, #29 must be no

26a.

MM/DD/YYYY grid
DATE RECEIVED LAYOFF NOTICE

27. [Y] [N]

MASS LAYOFF

28. [Y] [N]

PERMANENT PLANT CLOSURE

29. [Y] [N]

PUBLIC ANNOUNCEMENT OF CLOSURE

30. [Y] [N]

SEPARATED FROM SELF EMPLOYMENT

31. [Y] [N]

RESIDENT OF MN AT EMPLOYMENT SEPARATION

32. [Y] [N]

WORKING IN MN AT EMPLOYMENT SEPARATION

33. [Y]

LONG ATTACHMENT TO WORKFORCE

34. [Y]

LIMITED REEMPLOYMENT OPPORTUNITIES

35. [Y]

UNLIKELY TO RETURN TO PREVIOUS OCCUPATION

36. [] []

NUMBER OF WEEKS UNEMPLOYED OUT OF LAST 52

36a. [Y] [N]

UNEMPLOYED LAST 27 CONSECUTIVE WEEKS if yes, #36 must be 27 or greater

37. ETHNICITY - HISPANIC OR LATINO

___ A Person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish Cultural in origin, regardless of race.

___ Not a Person of Cuban, Mexican, Puerto Rican South or Central American, or other Spanish Cultural in origin, regardless of race.

38. RACE

___ American Indian or Alaska Native

___ Asian

___ Black or African American

___ Hawaiian Native or Other Pacific Islander

___ White

39. [Y] [N] REFERRED FROM WAGNER PEYSER

40. [Y] [N] LIMITED ENGLISH LANGUAGE PROFICIENCY

41. IF #16 is VETERAN, complete a, b, c, d, e below

41a. MM/DD/YYYY grid
ACTUAL MILITARY SEPARATION DATE

41b. SERVICE RELATED DISABILITY

___ No (No Service-Related Disability)

___ Yes, (0% to 20% Disabled)

___ Yes, Special Disabled (30% + Disabled)

41c. [Y] [N] VET SEPARATED IN LAST 4 YRS

41d. [Y] [N] CAMPAIGN VETERAN

41e. CAMPAIGN/GROUP:

___ Gold Card (Post 9/11)

___ Operation Enduring Freedom (OEF)

___ Operation Iraqi Freedom (OIF)

___ Red Bull

___ Vietnam

ELIGIBILITY CRITERIA

21. MM/DD/YYYY grid

DATE OF BIRTH

AGE

22. GENDER

___ Male ___ Female

23. SELECTIVE SERVICE REGISTRATION

___ N/A ___ Not Registered

___ Registered - must list registration number below

SELECTIVE SERVICE NUMBER grid

SELECTIVE SERVICE NUMBER

24. [Y] [N] TRADE ADJUSTMENT ASSISTANCE CO-ENROLLMENT

