

Workforce One

Application & Enrollment User Guide

Adult/Dislocated Worker (DW)

October 2019



This training guide indicates the WF1 process that will be completed by the **MIS Unit** and the **Adult/DW Employment Counselor**

Refer to the following policies for additional information:

- **Enrollment**
- **Internal Case File Monitoring**

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PERSON SEARCH

A **Person Search** must be completed on all participants by participant's **name and then by social security number**. Searching by both the name & SSN will hopefully prevent duplicate records from being entered in WF1.

The assigned **Employment Counselor** will submit a completed **WF1 Adult & DW Enrollment Form** to the **MIS Unit** within 10 days of the **Employment Counselor** and the participant completing intake, and the **Employment Counselor** determining program eligibility. The **MIS Unit** will enter the enrollment in WF1 within 2 days of receiving the complete **WF1 Adult & DW Enrollment Form**.

Home Search **Person** My Tasks Recent Work Manage Case Manage Program Reports References Resources

Person
 Dashbo: Saved Searches
 My Info: Advanced Search
 15 Tickle User
 No Tickle Agency
 No Appoi Common ID

From the top navigation:
Click on **Search**, then **click Person**

Person Search

▼ Hide Search Criteria

Last Name: Oz
 First Name: W*
 Middle Initial:
 SSN:
 Record ID:
 MAXIS Case:
 MAXIS PMI:
 E-mail:
 Staff Assigned: All Values

Run Search Show Additional Criteria

▼ Hide Search Results

Show 25 100 200 500
 Displaying 1 to 1 of 1

Name: Birth Date	SSN	Record ID	MAXIS Case	MAXIS PMI	City	Current Staff Assigned
Oz, Wizard O 03/01/1974	0114	100000968			Emerald City	Doheny, Laurie J

New Search Refine Search Add New Person

Enter the **search criteria**.

The Last Name and First Name fields each allow a single wildcard character (an asterisk *) in the search. For example, searching a Last Name with John* will return all customers with a last name that begins with John (e.g. John, Johnson, etc.).

If the person is found (review the DOB & last 4-digits of the SSN), **click** on the appropriate person's **name** to access the record.

If the person is not found, click **Add New Person**

ADD NEW PERSON

The **Add New Person** will only be used when an existing record for the person is not found in WF1. If the participant already has an existing record in WF1, proceed to page 3.

The information highlighted below must be completed on the **WF1 Adult & DW Enrollment Form** that the **Employment Counselor** submits to the **MIS Unit**, as it is used to enter a record in WF1.

Person Add

SSN **SSN Verified**
***Last Name** ***First Name** **MI**
Birth Date
***Address 1**
Address 2
***City** ***State** ***Zip**
***County** ***Country**

Phone	Ext.	Phone Type	If other, please specify:
<input type="text"/>	<input type="text"/>	<input type="text" value="None Selected"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text" value="None Selected"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text" value="None Selected"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text" value="None Selected"/>	<input type="text"/>

Primary E-mail
Secondary E-mail
MAXIS PMI
Confirm MAXIS PMI
MAXIS Case
Confirm MAXIS Case
***Veteran Status**
***Citizen/Right to Work**

The **MIS Unit** will create a WF1 record, or locate an existing record, by entering the required information.

A record may not be completed in WF1 if the **WF1 Adult & DW Enrollment Form** is missing information.

The **MIS Unit** will request the missing items from the assigned **Employment Counselor** via email.

NOTE: A person's refusal or inability to show an item that verifies SSN cannot be used to deny service if the person is otherwise eligible to receive services. The **MIS Unit** will create a proxy (fake) SSN for the participant's WF1 record.

PERSON AT-A-GLANCE

The panel below appears after adding a new person record or by clicking on the person's name, if a WF1 record already exists.

General

At-A-Glance

Contact

Tickler

Demographics

Work Preferences

MN Works Resume

Case Note

Add Case Note

Case Note Quick

Case Note Search

Cases

Program/New App

Eligibility/Enrollment

Activity

TAA

Plan

Credential

Reporting Collection

Youth Performance

Person At-A-Glance

Wizard O Oz
Birth Date 03/01/1974
Record ID 100000968

Name and Mailing Address

Wizard O Oz
123 Castle Rd
Emerald City MN 55101

The geo-coding search was unable to verify this address. The address is not valid for Work Preferences or Talent Pool Search.

Phone	Ext.	Phone Type	TTY	Video
651-555-9878		Primary	No	No
651-555-8789		Cell	No	No

Birth Date 03/01/1974

Primary E-mail

Secondary E-mail

Record ID 100000968 **Last 4 SSN** 0114

Program	Status	Application Date	Enroll Date	Exit Date	Closed from App Date	Last Follow-up Date	COFFR
Adult Seq 1	Exited	05/01/2014	05/13/2014	10/01/2014			Ramsey Cty (15)

The **Person-at-a-Glance** panel provides a list of all programs in WF1 for persons with an existing record, indicating their Program and the Program Status.

ADD NEW APPLICATION

A new **Application** is added in WF1 indicating the Program once an existing record is found or a new person record has been created.

General

- At-A-Glance
- Contact
- Tickler
- Demographics
- Work Preferences
- MN Works Resume

Case Note

- Add Case Note
- Case Note Quick
- Case Note Search

Cases

- Program/New App**

Program Summary

Wizard O Oz
Birth Date 03/01/1974
Record ID 1

Add New Application

Show Adult Seq 1 - Exited

New Application

Wizard O Oz
Birth Date 03/01/1974
Record ID 100000968

Step: **1. Application** 2. Eligibility 3. Enrollment

*Program: None Selected

*Application Date: [Date Picker]

Agency: Ramsey County Workforce Solutions

Display Funding Stream Options

COFFR: Ramsey Cty Workforce Solutions - LWDA 15

*Location: North St. Paul

Service Model: None Selected

Primary Staff: None Selected

Support Staff: None Selected

Send Tickler:

Show Case Note

Show User Defined Fields

Continue to Eligibility Save and Exit Wizard Cancel

This panel provides a summary of all programs and related information found in WF1 for which a person has an application, eligibility determination, enrollment, and/or exit.

Click **Add New Application** to continue.

The **New Application** panel will appear.

Program = the Program that is listed on the **WF1 Adult & DW Enrollment Form**

Application Date = the Date the participant completed the **WF1 Adult & DW Enrollment Form**

Location = North St. Paul

Primary Staff = the assigned staff's name that is listed on the **WF1 Adult & DW Enrollment Form**

Click **Continue to Eligibility**.

ELIGIBILITY

The **Eligibility** panel is completed in WF1 following the WF1 Application. The items below are required to determine if the participant is eligible for the selected Program.

Eligibility cannot be determined if the **WF1 Adult & DW Enrollment Form** is missing information.

In the event of missing information, the Program Status will be listed as 'Pending' and the **MIS Unit** will request the missing items from the assigned **Employment Counselor** via email.

Dislocated Worker Eligibility

Wizard O Oz
Birth Date 03/01/1974 Record

Step: **1. Application** **2. Eligibility** 3. Enrollment

Program Seq 1
Agency: Location Ramsey County Workforce Solutions: North St. Paul
Entered by Laurie J Doheny
Application Date 07/01/2019

*Decision Date

*SSN 810-03-0114

*Birth Date 03/01/1974 Age 45

*Gender Male

*Citizen/Right to Work Citizen

*Selective Service Registration None Selected [Register for Selective Service](#)

*Basis for Eligibility Separated from Employment

Decision Date = the **Date** the **Employment Counselor** determined the participant eligible for the program, as listed on the **WF1 Adult & DW Enrollment Form**

NOTE: The Decision Date cannot be prior to the Application Date.

The **Selective Service Number** is required if **Selective Service Registration** is listed as **Registered**

Basis for Eligibility* = **Separated from Employment** for most participants

*Other options that may be used when approved by the supervisor/manager:

- At Risk of Layoff-Incumbent Worker Training
- Displaced Homemaker
- Military Service

Click **Next**, and the panel on the next page will appear

ELIGIBILITY continued

The following information is required for the DW Program and must be completed on the **WF1 Adult & DW Enrollment Form**.

In the event of missing information, the Program Status will be listed as 'Pending' and the **MIS Unit** will request the missing items from the assigned **Employment Counselor** via email.

Specific Eligibility Criteria: Separated from Employment

*Trade Adjustment Assistance Co-Enrollment Yes No

*Separated from Permanent Employment Yes No

*Actual/Projected Separation Date

*Received Layoff Notice Yes No

Date Received Layoff Notice

*Mass Layoff Yes No

*Permanent Plant Closure Yes No

*Public Announcement of Closure Yes No

*Separated from Self-Employment Yes No

*Resident of MN at Employment Separation Yes No

*Working in MN at Employment Separation Yes No

*Long Attachment to Workforce Yes No

*Limited Reemployment Opportunities Yes No

*Unlikely to Return to Previous Occupation Yes No

*Weeks Unemployed in Last 52

*Unemployed for the Last 27 Consecutive Weeks

Specific Eligibility Criteria: Priority of Service

Meets Local Priority of Service

Justification for Meeting Local Priority of Service

Spell Check

Determine Results

Save and Exit Wizard Cancel

Meets Local Priority of Service* = Yes or No

*If **Yes**, the Justification is required. Refer to the **Adult & DW Enrollment Form Field Descriptions** for information

Click **Determine Results** - A person is determined eligible or ineligible based on the laws and policies governing the specific program

If **No** is appearing, the participant has been determined **Ineligible**. The **MIS Unit** will select **Cancel** and will inform the **Employment Counselor**.

Click **Save and Continue to Enrollment**, only if **Yes** is appearing for the program selected on the **WF1 Adult & DW Enrollment Form**

ENROLLMENT

Shown below is a sampling of items required for **Enrollment** into Adult or DW.

The **Enrollment** cannot be completed if the **WF1 Adult & DW Enrollment Form** is missing information.

In the event of missing information, the Program Status will be listed as 'Eligible, Not Enrolled' and the **MIS Unit** will request the missing items from the assigned **Employment Counselor** via email.

The **Enrollment** panel is populated from the information listed on the **WF1 Adult & DW Enrollment Form**, so the form must be complete

Enrollment Date* = **Date** the participant is officially enrolled in the Program, usually the date of Intake

*This date cannot be prior to the Decision Date or **Application Date**

ENROLLMENT continued

The participant is officially **Enrolled** once the following Activities are opened:

1. Staff Assisted Assessment
2. Career Counseling
3. Individual Plan Development

Open Initial Activity

***Activity Type** Staff Assisted Assessment

Activity Subtype

***Funding Stream** Ramsey WDA-15 PY18 WIOA Adult Formula

Estimated End Date

Estimated Hours

Case Note

Activity Type = Staff Assisted Assessment for the 1st activity

Funding Stream = the current Funding Stream for staff costs

Estimated End Date – is optional; however, a Tickler will be created if a date within 90-days of the Activity Start Date is entered on the **WF1 Adult & DW Enrollment Form**, allowing the enrollment to be deleted if no funds have been spent

Click Enroll and Add Another Activity to add the **Career Counseling** and **Individual Plan Development** activities

The **MIS Unit** will notify the **Employment Counselor**, via email, that the enrollment is complete. Below is an example of a completed enrollment for **WIOA Adult**.

Activity Summary				
Wizard O Oz		Record ID 10000968		
Birth Date 03/01/1974				
▼ Hide Adult Seq 2 - Enrolled				
Enrollment Date: 07/10/2019 Exit Date:				
Activity: Subtype: Work Exp Type	Funding Stream	Start Date/End Date	Staff: Agency	Action
Indv Plan Dvpmnt	Ramsey WDA-15 PY18 WIOA Adult Formula	07/10/2019 Open	Laurie J Doheny WF Solutions	Edit Delete Copy
Career Counseling	Ramsey WDA-15 PY18 WIOA Adult Formula	07/10/2019 Open	Laurie J Doheny WF Solutions	Edit Delete Copy
Staff Assist Assess	Ramsey WDA-15 PY18 WIOA Adult Formula	07/10/2019 Open	Laurie J Doheny WF Solutions	Edit Delete Copy

DELETE ENROLLED PROGRAM SEQUENCE

Instead of having a negative termination, a WF1 Program Sequence that has been enrolled, may be deleted within 90 calendar days of the **Enrollment** date, by Workforce Solutions' MIS Unit, with Supervisor approval.

NOTE: Program Sequence deletion is not allowed if Support Services have been provided to the participant.

Email the following information to your Supervisor and copy the MIS Unit:

- Participant First and Last Name
- WF1 Record ID Number
- Program Name to Delete

The MIS Unit will delete the Program Sequence and enter a Case Note regarding the deletion, once the Supervisor has approved the deletion, via email.