

Adult 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/Soc. Svcs. 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 |
| <input type="checkbox"/> Self-Attestation (last resort) | |

Citizen/Eligible to Work in US (Choose One Below)

- | | |
|--|--|
| <input type="checkbox"/> DD-214 | <input type="checkbox"/> Alien Registration Card/Work Permit |
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Foreign Passport (stamped eligible to work) |
| <input type="checkbox"/> Naturalization Certification | <input type="checkbox"/> I-9 Supporting Documentation |
| <input type="checkbox"/> Hospital Record of Birth | <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 w/Department of Defense Records | <input type="checkbox"/> Cross-Match w/Veterans Services Database |
| <input type="checkbox"/> NGB-22 documenting Title 10 federal active duty service | |
| <input type="checkbox"/> Self-attestation | |

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. |

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Updated 6/05/2023

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TRAINING/FUNDED

Low Income

- ☐ Homeless (automatic low income indicator)
 - ☐ Signed WIOA application
 - ☐ Written statement or referral transmittal from a shelter or social service agency
 - ☐ A letter from caseworker or support provider
- ☐ SNAP (automatic low income indicator)
 - ☐ Cross-match w/public assistance records
 - ☐ MO Dept. of Social Services' MO Benefits Center website printout
 - ☐ OWD's statewide electronic case management indicator for SNAP (print out & file)
- ☐ TANF (automatic low income indicator)
 - ☐ Cross-match w/public assistance records
 - ☐ MO Dept. of Social Services' MO Benefits Center website printout
 - ☐ OWD's statewide electronic case management indicator for TANF (print out & file)
- ☐ Supplemental Social Security/SSI (automatic low income indicator)
 - ☐ SSI/SSDI Receipt of Benefits Verification
 - ☐ SSI/SSDI Eligibility Verification
 - ☐ Referral Transmittal from SSA
 - ☐ Cross-Match with SSA Database
- ☐ Family Size & Income

Income:

 - ☐ Pay stubs
 - ☐ Applicant Statement
 - ☐ Employer statement/contact
 - ☐ Court Documentation (alimony agreement, court award letter)
 - ☐ Housing Authority Verification
 - ☐ Compensation Award Letter
 - ☐ Award Letter from Veterans Admin
 - ☐ Social Security Benefits
 - ☐ UI Documents

If Income is \$0, participant must complete an app statement and explain how they are able to support themselves.

Size:

 - ☐ Applicant Statement **OR** birth certificates for children
 - ☐ Public Assistance Records (if all family members are listed)
 - ☐ Lease or Landlord Statement (if all family members are listed)
 - ☐ Marriage Records
 - ☐ Housing Authority Verification
 - ☐ Statement from a Public Care Facility (mental, hospital, prison)
 - ☐ Verification of Non-filing (formerly IRS 1722)
 - ☐ Medical Records
 - ☐ Most Recent Tax Return

☐ Family-of-One:

 - ☐ Most Recent Tax Return or Verification of IRS non-filing
 - ☐ Medical Records or Disability Documentation
 - ☐ Vocational Rehabilitation Record
 - ☐ Court Records (Decree of Court)
 - ☐ Applicant statement (last resort)
 - ☐ Lease or Landlord Statement
 - ☐ Public Assistance Records