

Dislocated Worker 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"/> Naturalization Certification |
| <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"/> US Passport |
| <input type="checkbox"/> Proof of UI eligibility/unemployment wage records | <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/Vet Services Database |
| <input type="checkbox"/> NGB-22 documenting Title 10 federal active duty servi Database | |
| <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. |

Select the Appropriate Dislocated Worker Eligibility Category Below

Category 1--Permanent Layoff--Eligible for UI *(Choose one below)*

Any **one** of the following three elements adequately document Category 1 eligibility:

1. Copy DD-214, form 4 with any discharge reason **except dishonorable or retired**.

2. RESEA and RJS Eligible:

☐ Case note in OWD'S statewide electronic case management system.

3. Trade Eligible

☐ Case note in OWD'S statewide electronic case management system.

OR documentation from **all three** of the categories below:

☐ Lay-off status:

☐ Proof of UI eligibility; or

☐ Employer lay-off letter or notice; or

☐ Employer phone contact (see TAG for CN requirements)

☐ Unemployment Insurance status:

☐ Unemployment benefits print out of bank deposit record indicating UI deposit; or

☐ Unemployment Verification Letter from DES Online Claim Filing System

☐ Unlikely to return to previous occupation or industry:

☐ Is a separated service member, under conditions other than dishonorable provided they provide a notice of separation (i.e. DD-214);

☐ Is a military spouse required to leave employment due to a result of a military member's transfer and circumstances prevent the spouse from immediately returning to their previous industry or occupation;

☐ Worked in a declining industry or occupation, as documented based on LMI such as O*NET or MERIC;

☐ Was laid off and has exhausted UI benefits;

☐ Is unemployed due to a plant closing or permanent layoff (10+ workers) within a 12-month period;

☐ Has had a lack of job offers as documented by the local Job Center, rejection letters from employers in the area, or other documentation of unsuccessful efforts to obtain employment in the priory industry or occupation;

☐ Is insufficiently educated and/or does not have the necessary skills for reentry into the former industry or occupation;

☐ Has a physical limitation or an injury which would preclude reentry into the former industry or occupation;

☐ Has a poor employment history indicating a reduced capacity or ability to be re-employed in the former industry or occupation;

☐ Individual has circumstances that cause significant barriers to employment, such as:

* Justice Involved

* Homeless

* BSD

* LEP

* Older worker (age 55+)

* Lack of necessary skills to become re-employed due to current requirements of the industry or occupation.

- ☐ The individual's previous industry or occupation is unlikely to provide self-sufficiency;
- ☐ Has been unemployed 12 weeks within the last 20 months and has been unable to find a job in their former industry or occupation;
- ☐ Current documentation from the statewide electronic case management system that there appears to be an excess of applicants based on the total number of job openings for a job order for the O*NET code from which the applicant is laid off. This must be used as a last resort.
- ☐ Any other documentation approved by OWD.

Category 2--Permanent Layoff--NOT UI Eligible *(Choose one below)*

- ☐ Insufficient Earnings:
 - ☐ Documentation from DES Indicating ineligibility due to earnings
 - ☐ Paystubs showing employment for at least 30 hours a week for the 6 months in the industry or occupation from which dislocated from and that the termination or layoff was no fault of the individual.
- ☐ Employer not covered.
 - ☐ Evidence that the employer was not covered under a State unemployment compensation law.
- ☐ Unlikely to return to previous occupation or industry:
 - ☐ Is a separated service member, under conditions other than dishonorable provided they provide a notice of separation (i.e. DD-214);
 - ☐ Is a military spouse required to leave employment due to a result of a military member's transfer and circumstances prevent the spouse from immediately returning to their previous industry or occupation;
 - ☐ Worked in a declining industry or occupation, as documented based on LMI such as O*NET or MERIC;
 - ☐ Was laid off and has exhausted UI benefits;
 - ☐ Is unemployed due to a plant closing or permanent layoff (10+ workers) within a 12-month period;
 - ☐ Has had a lack of job offers as documented by the local Job Center, rejection letters from employers in the area, or other documentation of unsuccessful efforts to obtain employment in the priory industry or occupation;
 - ☐ Is insufficiently educated and/or does not have the necessary skills for reentry into the former industry or occupation;
 - ☐ Has a physical limitation or an injury which would preclude reentry into the former industry or occupation;
 - ☐ Has a poor employment history indicating a reduced capacity or ability to be re-employed in the former industry or occupation;
 - ☐ Individual has circumstances that cause significant barriers to employment, such as:
 - * Justice Involved
 - * Homeless
 - * BSD
 - * LEP
 - * Older worker (age 55+)
 - * Lack of necessary skills to become re-employed due to current requirements of the industry or occupation.

- ☐ The individual's previous industry or occupation is unlikely to provide self-sufficiency;
- ☐ Has been unemployed 12 weeks within the last 20 months and has been unable to find a job in their former industry or occupation;
- ☐ Current documentation from the statewide electronic case management system that there appears to be an excess of applicants based on the total number of job openings for a job order for the O*NET code from which the applicant is laid off. This must be used as a last resort.
- ☐ Any other documentation approved by OWD.

Category 3--Permanent Closure or Substantial Layoff (Participant is not eligible for training, career services, or supportive services until actual lay-off)

Closure

- ☐ Documentation of employment at company; **and**
- ☐ Letter or notice of closure from the company; or
- ☐ Employer phone contact (casenote contact); or
- ☐ News article; or
- ☐ Other documentation approved by OWD

Employed at time of closure:

- ☐ Documentation of employment at company; **and**
- ☐ Employer lay-off letter or notice; or
- ☐ Employer phone contact (case note contact); or
- ☐ Other documentation approved by OWD.

Permanently laid off due to Substantial layoff:

- ☐ Documentation of employment at company; **and**
- ☐ Employer lay-off letter or notice; or
- ☐ Employer phone contact (case note contact); or
- ☐ Other documentation approved by OWD.

Category 4--General Announcement that the Facility Will Close (If the facility's closure is not within 180 days, the participant is eligible for Dislocated Worker services with the exception of training.)

Employed at time of closure:

- ☐ Documentation of employment at company; **and**
- ☐ Employer letter or notice; or
- ☐ Employer phone contact (case note contact)

Category 5--Self-Employed Dislocation

1. Evidence of Self-Employment (*Choose one below*)

- ☐ Business tax return
- ☐ Business license
- ☐ Any other legal document which shows self-employment and which could be verified by phone

2. Evidence of Business Failure

- ☐ Due to natural disasters (insurance records, disaster declaration, etc.)
- ☐ Due to bankruptcy or foreclosure
- ☐ Due to inability to secure capital necessary to continue a farm operation or other

business

- ☐ Due to general economic conditions. In some instances, a self-employed person has not filed bankruptcy or other official evidence of business failure, but it willing to attest that he/she is no longer in business. In those instances additional documentation may be necessary.

NOTE: One item under "2. Evidence of business failure" must be documented to prove business failure. If failure was due to general economic conditions, the documentation must include evidence of the following:

- ☐ Failure of one or more businesses to which the self-employed individual supplied a sub proportion of products or services;
- ☐ Failure of one or more businesses from which the self-employed individual obtained a substantial proportion of products or services;
- ☐ Substantial layoff(s) from or permanent closure(s) of one or more plants or facilities that support a significant portion of the State or local economy; and/or
- ☐ Depressed price(s) or market(s) for the article(s) produced by the self-employed individual.

Allowable Documentation:

- ☐ Applicant statement (see TAG, pg 14 for requirements)
- ☐ Bank Loan Denial Letter (inability to secure capital)
- ☐ Bankruptcy or foreclosure records
- ☐ Disaster Declaration, if due to natural disaster
- ☐ Insurance Records

Category 6--Displaced Homemaker (Choose one below)

Has been dependent on the oncome of another family member, but is no longer supported by that income

- ☐ Applicant statement
- ☐ Social services agency or shelter referral
- ☐ Tax records
- ☐ Divorce or separation decree

Military deployment of spouse

- ☐ Military record of deployment

☐ Unemployed or under-employed

- ☐ Applicant statement
- ☐ Pay stubs
- ☐ Public assistance records
- ☐ UI records w/an applicant statement

Category 7--Spouse of an Armed Forces Member - Relocation

- ☐ Copy of the Permanent Change Station orders
- ☐ DD-214
- ☐ Applicant statement
- ☐ Pay stubs
- ☐ Public assistance records
- ☐ UI records w/an applicant statement

Category 8--Spouse of an Armed Forces Member Difficulty with Employment

- ☐ Copy of the permanent change station orders
- ☐ DD-214
- ☐ Pay stubs
- ☐ Applicant statement
- ☐ Public assistance records
- ☐ UI records w/an applicant statement

6/5/2023