

In-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"/> Employment Records <input type="checkbox"/> W-2 Form <input type="checkbox"/> Selective Service Registration	<input type="checkbox"/> DD -214 <input type="checkbox"/> Social Service Agency Records <input type="checkbox"/> Social Security Benefits <input type="checkbox"/> Proof of UI eligibility/unemployment records
Date of Birth (Choose One Below)	
<input type="checkbox"/> Driver's License <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Passport <input type="checkbox"/> School records or ID cards <input type="checkbox"/> Work Permit <input type="checkbox"/> Baptismal Record <input type="checkbox"/> Report of Transfer or Discharge Paper <input type="checkbox"/> Justice System Records <input type="checkbox"/> Signed Letter from a parent or guardian <input type="checkbox"/> Self-attestation (last resort method)	<input type="checkbox"/> Federal, State, Local or Tribal ID card <input type="checkbox"/> DD-214 <input type="checkbox"/> Public Assistance/Social Services Records <input type="checkbox"/> Hospital Record of Birth <input type="checkbox"/> Proof of UI eligibility/unemployment wage records <input type="checkbox"/> Family Bible <input type="checkbox"/> Selective Service Registration <input type="checkbox"/> Medical Records
Citizen/Eligible to Work in US (Choose one below)	
<input type="checkbox"/> DD-214 <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Foreign Passport (stamped eligible to work) <input type="checkbox"/> Hospital Record of Birth <input type="checkbox"/> Proof of UI eligibility/unemployment wage records	<input type="checkbox"/> Alien Registration Card/Work Permit <input type="checkbox"/> I-9 Supporting Documentation <input type="checkbox"/> Naturalization Certification <input type="checkbox"/> US Passport
EO Complaint and Grievance Notice (Signed, dated, language indicated)	
Selective Service Registration (Males born after 1959) Put the SS Registration # into the MoJobs application.	
Eligible Veteran (Choose one below if applicable)	
<input type="checkbox"/> DD-214 <input type="checkbox"/> Cross-Match with Department of Defense Records	<input type="checkbox"/> Letter from Veterans Administration <input type="checkbox"/> Cross-Match with Veterans Services Database <input type="checkbox"/> Self-Attestation
In-School Youth	
<input type="checkbox"/> Attending any school <input type="checkbox"/> Applicable records from education institution: GED certificate, diploma, attendance record, transcripts, drop out letter, or school documentation <input type="checkbox"/> Signed WIOA Application	
<input type="checkbox"/> Self-Attestation Form	
<input type="checkbox"/> 14-21 Years Old (See date of birth above)	
<input type="checkbox"/> Low Income	
<input type="checkbox"/> Homeless (automatic low income indicator) <input type="checkbox"/> Self-Attestation <input type="checkbox"/> Case Notes <input type="checkbox"/> Needs assessment	<input type="checkbox"/> Signed WIOA Intake/Application <input type="checkbox"/> Letter from caseworker or support provider <input type="checkbox"/> Individual Service Strategy

<input type="checkbox"/> Written statement or referral transmittal from a shelter or social service agency	
<input type="checkbox"/> SNAP (automatic low income indicator) <ul style="list-style-type: none"> <input type="checkbox"/> Cross-match w/public assistance records <input type="checkbox"/> MO Dept. of Social Services' MO Benefits Center website printout <input type="checkbox"/> Other state Social Services' Benefits Center website printout <input type="checkbox"/> Referral Transmittal from SNAP <input type="checkbox"/> OWD's statewide electronic case management indicator for SNAP (must print out & file) 	
<input type="checkbox"/> TANF (automatic low income indicator) <ul style="list-style-type: none"> <input type="checkbox"/> Cross-match w/public assistance records <input type="checkbox"/> MO Dept. of Social Services' MO Benefits Center website printout <input type="checkbox"/> Referral Transmittal from TANF <input type="checkbox"/> OWD's statewide electronic case management indicator for TANF (must print out & file) 	
<input type="checkbox"/> SSI/SSDI (automatic low income indicator) <ul style="list-style-type: none"> <input type="checkbox"/> SSI/SSDI Receipt of Benefits Verification <input type="checkbox"/> SSI/SSDI Eligibility Verification <input type="checkbox"/> Referral Transmittal from SSA <input type="checkbox"/> Cross-match with SSA Database 	
<input type="checkbox"/> Receiving Free or Reduced Lunch (automatic low income indicator) <ul style="list-style-type: none"> <input type="checkbox"/> Case note indicating info obtained from school <input type="checkbox"/> School records 	
<input type="checkbox"/> Foster Child (automatic low income indicator) <ul style="list-style-type: none"> <input type="checkbox"/> Case notes <input type="checkbox"/> Intake Application or Enrollment Form <input type="checkbox"/> Individual Service Strategy <input type="checkbox"/> Foster Care Agency Referral Transmittal <input type="checkbox"/> Needs Assessment 	
<input type="checkbox"/> Other Public Assistance Recipient (GA or RCA in the past 6 months) <ul style="list-style-type: none"> <input type="checkbox"/> Copy of Authorization to Receive GA <input type="checkbox"/> Medical Card Showing Cash Grant Status <input type="checkbox"/> Cross-Match with Refugee Assistance Records <input type="checkbox"/> Cross-Match with State MIS Database <input type="checkbox"/> Copy of Public Assistance Check <input type="checkbox"/> Public Assistance Eligibility Verification <input type="checkbox"/> Cross-Match with Public Assistance Records 	
<input type="checkbox"/> Living in a High Poverty Area (automatic low income indicator) See TAG for directions	
<input type="checkbox"/> Family Size & Income <p>Income:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Applicant Statement <input type="checkbox"/> Award Letter from Veterans Admin <input type="checkbox"/> Court Documentation (alimony agreement, court award letter) <input type="checkbox"/> Employer statement/contact <input type="checkbox"/> Social Security Benefits <input type="checkbox"/> Pay stubs <input type="checkbox"/> Compensation Award Letter <input type="checkbox"/> Housing Authority Verification <input type="checkbox"/> UI Documents <p>If Income is \$0, participant must complete an app statement and explain how they are able to support themselves.</p> <p>Size (2 or more):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Birth certificates for children <input type="checkbox"/> Lease/Landlord Statement (all family listed) <input type="checkbox"/> Medical Records <input type="checkbox"/> Statement from a Public Care Facility <input type="checkbox"/> Verification of non-filing <input type="checkbox"/> Public Assistance Records (all members listed) <input type="checkbox"/> Marriage Records <input type="checkbox"/> Housing Authority Verification <input type="checkbox"/> Most recent tax return <input type="checkbox"/> Last resort: Applicant Statement <p><input type="checkbox"/> Family-of-One (must be low income AND choose one):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Most Recent Tax Return or Verification of IRS non-filing <input type="checkbox"/> Medical Records or Disability Documentation <input type="checkbox"/> Lease/Landlord Statement <input type="checkbox"/> Public Assistance Records <input type="checkbox"/> Vocational Rehabilitation Record <input type="checkbox"/> Court Records (Decree of Court) <input type="checkbox"/> Last resort: Applicant Statement 	

<input type="checkbox"/> Barrier (Select All Below That Apply, Must Have at Least 1 Barrier)	
<input type="checkbox"/> Basic Skills Deficient <div> <input type="checkbox"/> Standardized Assessment Test <input type="checkbox"/> Applicable Records from Education Institution </div>	
<input type="checkbox"/> English Language Learner <div> <input type="checkbox"/> Self-Attestation <input type="checkbox"/> Assessment Test Results </div> <div> <input type="checkbox"/> Applicable Records from Education Institution <input type="checkbox"/> Intake Application or Enrollment Form </div> <div> <input type="checkbox"/> Individual Service Strategy <input type="checkbox"/> Case Notes </div>	
<input type="checkbox"/> Offender (<i>Select one below</i>) <div> <input type="checkbox"/> Self-Attestation/Signed Intake Application <input type="checkbox"/> Documentation from the Criminal Justice System </div> <div> <input type="checkbox"/> Written Statement or Referral Document from a Court or Probation Officer </div> <div> <input type="checkbox"/> Referral Transmittal from Reintegration Agency <input type="checkbox"/> Case notes </div> <div> <input type="checkbox"/> Needs assessment <input type="checkbox"/> Individual Service Strategy </div> <div> <input type="checkbox"/> Federal Bonding Program Application </div>	
<input type="checkbox"/> Homeless or Runaway <div> <input type="checkbox"/> Self-Attestation/Signed Intake Application <input type="checkbox"/> Needs Assessment </div> <div> <input type="checkbox"/> Written Statement or Referral Transmittal from a Shelter or Social Service Agency </div> <div> <input type="checkbox"/> Case notes <input type="checkbox"/> Individual Service Strategy </div> <div> <input type="checkbox"/> A letter from caseworker or support provider </div>	
<input type="checkbox"/> Foster Child or Aged out of the Foster System (<i>Choose One Below</i>) <div> <input type="checkbox"/> Self-Attestation/Signed Intake Application <input type="checkbox"/> Written Confirmation from Social Service Agency </div> <div> <input type="checkbox"/> Foster Care Agency Referral Transmittal <input type="checkbox"/> Intake Application or Enrollment Form </div> <div> <input type="checkbox"/> Needs assessment <input type="checkbox"/> Individual Service Strategy </div> <div> <input type="checkbox"/> Case notes </div>	
<input type="checkbox"/> Pregnant or Parenting (<i>Males do not qualify until birth of child-- Choose one below</i>) <div> <input type="checkbox"/> Self-Attestation/Signed Intake Application <input type="checkbox"/> Needs Assessment </div> <div> <input type="checkbox"/> WIC Eligibility Verification <input type="checkbox"/> TANF Single Parent Eligibility Verification </div> <div> <input type="checkbox"/> Intake Application or Enrollment Form <input type="checkbox"/> Individual Service Strategy </div> <div> <input type="checkbox"/> Case notes <input type="checkbox"/> Case notes </div>	
<input type="checkbox"/> Individual with a Disability (<i>Choose one below</i>) <div> <input type="checkbox"/> Self-Attestation/Signed Intake Application <input type="checkbox"/> School 504 records </div> <div> <input type="checkbox"/> Assessment test results <input type="checkbox"/> School IEP record </div>	
<input type="checkbox"/> Youth Who Needs Additional Assistance (locally-defined barrier) Board Approval Required <div> <input type="checkbox"/> Self-Attestation/Signed Intake Application <input type="checkbox"/> Individual Service Strategy </div> <div> <input type="checkbox"/> Case Notes </div> <div> <input type="checkbox"/> Other documentation that reasonably supports the defined barrier in the WDB Local Plan (P-8) </div> <div> <input type="checkbox"/> Fired/Terminated <input type="checkbox"/> At risk of drop-out </div> <div> <input type="checkbox"/> Attending an alternative school <input type="checkbox"/> Behavioral Problems at School </div> <div> <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Incarcerated Parent(s) </div> <div> <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Migrant Youth </div>	