OMB Control Number 1205-0521
Expiration Date: 03-31-2027
ETA- 9172

**REQUIREMENTS BY PROGRAM OF PARTICIPATION[1]**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual[2] | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

**SECTION A - INDIVIDUAL INFORMATION**
**SECTION A.01 - IDENTIFYING DATA**

| N/A | OBS Number | IN 9 | Record a unique nine integer number for each record.to support processing | 000000000 (No hyphens) | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R | R | R |
| 100 | Unique Individual Identifier (WIOA) | AN 12 | Record the unique identification number assigned to the participant. At a minimum, this identifier for a person must be the same for each program entry and exit (i.e., "period of participation") that an participant has during a program year so that a unique count of participants may be calculated for the program year. NOTE: For Titles I, II, and III, unless specifically directed in program guidance, this field cannot contain a social security number. | XXXXXXXXXXXX | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R |
| 101 | State Code of Residence (WIOA) | AN 2 | Record the 2-letter FIPS alpha code of the state of the primary domicile of the participant. For example, the State of Alabama would be represented as "AL." Primary domicile is that location established or claimed as the permanent residence or "home" of the participant.  If primary domicile is outside the United States, use the following numeric codes: 77 = All Other Countries 88 = Mexico 99 = Canada  For persons on active military duty, states should record the two-letter Air/Army Post Office (APO) or Fleet Post Office (FPO) as defined by the Military Postal Service Agency. AE (ZIPs 09xxx) for Armed Forces Europe which includes Canada, Middle East, and Africa AP (ZIPs 962xx - 966xx) for Armed Forces Pacific AA (ZIPs 340xx) for Armed Forces (Central and South) Americas | XX | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R |
| 102 | County Code of Residence | IN 3 | Record the 3-digit FIPS Code of the County of the primary domicile of the participant. Primary domicile is that location established or claimed as the permanent residence or "home" of the participant.  If primary domicile is outside the United States, use the following codes: 777 = All Other Countries 888 = Mexico 999 = Canada | 000 | R | R | R | R | R | R | R | R | R | R | R | | R | | R | | R | R | R |
| 103 | Zip Code of Residence | IN 5 | Record the 5-digit zip code of the primary domicile of the participant. Primary domicile is that location established or claimed as the permanent residence or "home" of the participant.  If primary domicile is outside the United States, use the following codes: 77777 = All Other Countries 88888 = Mexico 99999 = Canada  For persons on active military duty, states should record the zip code associated with the APO or FPO as defined by the Military Postal Service Agency. | 00000 | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | | R | R | R |
| 104 | Economic/Labor Market Area and Physical Location Code | IN 9 | Record the code (maximum of 9-digits) of the economic/labor market area and physical location in which the participant received his/her first service with significant staff involvement and is financially assisted by the program. Grantees have the flexibility to use the first 5-digits of this field for identifying the economic region or labor market area in which the participant began receiving services with significant staff involvement. The next 4-digits of this field should be used to identify the physical location in which the participant began receiving services with significant staff involvement. Unless otherwise specified by ETA, codes contained within this field are determined by the grantee.  Record 999999999 to indicate "statewide/virtual office" if the participant only received remote or virtual self-service or informational activities. Record 000000000 if not known.  A physical location means a designated One-Stop Career Center, an affiliated One-Stop partner site, or other specialized centers and sites designed to address special customer needs, such as a company work site for dislocated workers. | 000000000 | | | | | | | | R | | | | | | | | | | | R |
| 105 | Special Project ID - 1 | AN 7 | Record the 7-digit alpha-numeric ID assigned by DOL for Special Projects or populations served under this program. Refer to ETA guidance for instructions on its use. | XXXXXXX | | R | R | R | R | R | R | | | R | R | R | R | R | R | | R | R | R |
| 106 | Special Project ID - 2 | AN 7 | Record the 7-digit alpha-numeric ID assigned by DOL for Special Projects or populations served under this program. Refer to ETA guidance for instructions on its use. Use this second Project ID in the event that a participant falls under more than one Special Project category. | XXXXXXX | | R | R | R | R | R | R | | | R | R | R | R | R | R | | R | R | R |
| 107 | Special Project ID - 3 | AN 7 | Record the 7-digit alpha-numeric ID assigned by DOL for Special Projects or populations served under this program. Refer to ETA guidance for instructions on its use. Use this third Project ID in the event that a participant falls under more than two Special Project categories.  NOTE: If Data Element 930 (Pay-for-Performance) = 1, Record Pay-for-Performance Provider ID in this field. | XXXXXXXX | | R | R | R | R | R | R | | | R | R | R | R | R | R | | R | R | R |
| 108 - A | ETA-Assigned 1st Local Workforce Board Code | IN 5 | Record the 5-digit ETA assigned Local Board/Statewide code where the participant was determined eligible to participate in the program and received his/her first service financially assisted by the program. If the participant was served by the local area and also by other non-local funds (e.g., statewide funds or a Dislocated Worker Grant), record the code for the Local Board. If participant record is a liable state record, record 99999.  This Is the primary ETA Assigned Local Workforce Board Code. It triggers inclusion in state reports as well as the identified Local Area reports. | 00000 | | R | R | R | R | R | R | | | | | | R | | | R | | | R |
| 108 - B | ETA-Assigned 2nd Local Workforce Board Code | IN 5 | Record the 5-digit ETA assigned Local Board where the participant was determined eligible to participate in the program and received his/her first service financially assisted by the program. If the participant was served by the local area and also by other non-local funds (e.g., statewide funds or a Dislocated Worker Grant), record the code for the Local Board. If participant record is a liable state record, record 99999.  This Is the secondary ETA Assigned Local Workforce Board Code. It triggers inclusion in the reports for the identified Local Area only | 00000 | | R | R | R | R | R | R | | | | | | R | | | R | | | R |
| 108 - C | ETA-Assigned 3rd Local Workforce Board Code | IN 5 | Record the 5-digit ETA assigned Local Board where the participant was determined eligible to participate in the program and received his/her first service financially assisted by the program. If the participant was served by the local area and also by other non-local funds (e.g., statewide funds or a Dislocated Worker Grant), record the code for the Local Board. If participant record is a liable state record, record 99999.  This Is the tertiary ETA Assigned Local Workforce Board Code. It triggers inclusion in the reports for the identified Local Area only. | 00000 | | R | R | R | R | R | R | | | | | | R | | | R | | | R |

**SECTION A.02 - EQUAL OPPORTUNITY INFORMATION**

| 200 | Date of Birth (WIOA) | DT 8 | Record the participant's date of birth. | YYYYMMDD | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 201 | Sex (WIOA) | IN 1 | Record 1 if the participant indicates that he is male. Record 2 if the participant indicates that she is female. Record 9 if the participant did not self-identify their sex. | 1 = Male 2 = Female 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 202 | Individual with a Disability (WIOA) | IN 1 | Record 1 if the participant indicates that he/she has any "disability", as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities. Record 0 if the participant indicates that he/she does not have a disability that meets the definition. Record 9 if the participant did not self-identify. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 203 | Category Of Disability | IN 9 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the impairment is primarily physical, due to a chronic health condition. Record 2 if the impairment is primarily physical, including mobility. Record 3 if, because of a mental illness, psychiatric disability, or emotional condition, the participant has serious difficulty concentrating, remembering, or making decisions. Record 4 if the participant is blind or has serious difficulty seeing. Record 5 if the participant is deaf or has serious difficulty hearing. Record 6 if the participant has a learning disability. Record 7 if the participant has a cognitive or intellectual disability. Record 9 if the participant does not wish to disclose his/her category of disability. Record 0 if the participant has no disability. Record all that apply if the participant has more than one impairment. | 1 = Physical/Chronic Health Condition 2 = Physical/Mobility Impairment 3 = Mental or Psychiatric Disability 4 = Vision-related disability 5 = Hearing-related disability 6 = Learning Disability 7 = Cognitive/Intellectual disability 9 = Participant did not disclose type of disability 0 = No disability | | R | R | R | R | R | R | R | | | R | R | R | | | R | | | R |
| 204 | Individual With A Disability SDDA Services | IN 1 | For those participants where Individual With A Disability (WIOA) = 1 : Record 1 if the participant has received services funded by the State Developmental Disabilities Agency (SDDA). Record 0 if the participant does not meet any of the conditions described above. Leave blank if this data element does not apply to this participant. | 1 = SDDA 0 = No | | R | R | R | R | R | | | | R | R | R | R | | R | | R | | R |
| 205 | Individual With A Disability LSMHA Services | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has received services funded by a local or state mental health agency (LSMHA). Record 0 if the participant does not meet any of the conditions described above. Leave blank if this data element does not apply to this participant. | 1 = LSMHA 0 = No | | R | R | R | R | R | | | | R | R | R | R | | R | | | | R |
| 206 | Individual With A Disability Medicaid HCBS Services | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has received services funded via a state Medicaid HCBS waiver. Record 0 if the participant does not meet any of the conditions described above. Leave blank if this data element does not apply to this participant. | 1 = HCBS waiver 0 = No | | R | R | R | R | R | | | | R | R | R | R | | R | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**REQUIREMENTS BY PROGRAM OF PARTICIPATION[1]**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual[2] | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 207 | Individual With A Disability Work Setting | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant is working in competitive, integrated employment (CIE). Record 2 if the participant was formerly employed in supported employment (e.g. use of job coach, with integrated placement at competitive wages). Record 3 if the participant is working in group supported employment (i.e., work crews, enclaves, etc.). Record 4 if the participant is working in a sheltered workshop (i.e., center- or facility-based employment). Record 5 if the participant is working in two or more of the above listed settings. Record 0 if the participant is not currently employed. Leave blank if this data element does not apply to this participant. | 1 = Competitive Integrated Employment 2 = Individual Supported Employment 3 = Group Supported Employment 4 = Sheltered workshop 5 = Combination of two or more settings 0 = Not Employed | | R | R | R | R | R | | | | R | R | R | R | | R | | | | R |
| 208 | Individual With A Disability Type of Customized Employment Services Received | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: If the participant received customized employment services (CES) to attain most recent employment or current employment: Record 1 if the participant received discovery assessment services. Record 2 if the participant developed a customized employment search plan. Record 3 if the participant received employer negotiation services. Record 4 if the participant received secure employment as a result of receiving customized employment services and received extended support services. Record 0 if the participant does not meet the condition described above. Leave blank if this data element does not apply to this participant. | 1 = Discovery assessment services 2 = Developed a customized employment search plan 3 = Employer negotiation services 4 = Secured employment as a result of receiving customized employment services and received extended support services 0 = No CES services | | R | R | R | R | R | | | | R | R | R | R | | R | | | | R |
| 209 | Individual With A Disability Financial Capability | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has a receipt and has received benefit planning services. Record 2 if participant has a receipt and has received financial capability/asset development services. Record 3 if participant has a receipt and has received both benefit planning services and financial capability/asset development services. Record 0 if the participant has not received the services described above. Leave blank if this data element does not apply to this participant. | 1 = Benefit planning services 2 = Financial capability/asset development services 3 = Benefit planning services and financial capability/asset development services 0 = No | | R | R | R | R | R | | | | R | R | R | R | | R | | | | R |
| 210 | Ethnicity: Hispanic / Latino (WIOA) | IN 1 | Record 1 if the participant indicates that he/she is a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant did not self-identify his/her ethnicity. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | | R | R | R | R | R | R | | R | R | R |
| 211 | American Indian / Alaska Native (WIOA) | IN 1 | Record 1 if the participant indicates that he/she is a member of an Indian tribe, band, nation, or other organized group or community, including any Alaska Native village or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) [43 U.S.C. 1601 et seq.], which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant did not self-identify his/her race. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 212 | Asian (WIOA) | IN 1 | Record 1 if the participant indicates that he/she is a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent (e.g., India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant did not self-identify his/her race. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | | R | R | R | R | R | R | | R | R | R |
| 213 | Black / African American (WIOA) | IN 1 | Record 1 if the participant indicates that he/she is a person having origins in any of the black racial groups of Africa. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant did not self-identify his/her race. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | | R | R | R | R | R | R | | R | R | R |
| 214 | Native Hawaiian / Other Pacific Islander (WIOA) | IN 1 | Record 1 if the participant indicates that he/she is a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant did not self-identify his/her race. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 215 | White (WIOA) | IN 1 | Record 1 if the participant indicates that he/she is a person having origins in any of the original peoples of Europe, the Middle East, or North Africa. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant did not self-identify his/her race. | 1 = Yes 0 = No 9 = Participant did not self-identify | R | R | R | R | R | R | R | R | | R | R | R | R | R | R | | R | R | R |

**SECTION A.03 - VETERAN CHARACTERISTICS**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 300 | Veteran Status | IN 1 | Record 1 if the participant is a person who served on active duty in the armed forces and who was discharged or released from such service under conditions other than dishonorable. Record 0 if the participant does not meet the condition described above. Record 9 if participant does not disclose veteran status. | 1 = Yes 0 = No 9 = Status not known | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | | R | R | R |
| 301 | Eligible Veteran Status | IN 1 | Record 1 if the participant is a person who served in the active U.S. military, naval, or air service for a period of less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable. Record 2 if the participant served on active duty for a period of more than 180 days and was discharged or released with other than a dishonorable discharge; or was discharged or released because of a service connected disability; or as a member of a reserve component under an order to active duty pursuant to section 167(a), (d), or (g), 673 (a) of Title 10, U.S.C., served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized and was discharged or released from such duty with other than a dishonorable discharge. Record 3 if the participant is: (a) the spouse of any person who died on active duty or of a service connected disability, (b) the spouse of any member of the Armed Forces serving on active duty who at the time of application for assistance under this part, is listed, pursuant to 38 U.S.C 101 and the regulations issued there under, by the Secretary concerned, in one or more of the following categories and has been so listed for more than 90 days: (i) missing in action; (ii) captured in the line of duty by a hostile force; or (iii) forcibly detained or interned in the line of duty by a foreign government or power; or (c) the spouse of any person who has a total disability permanent in nature resulting from a service connected disability or the spouse of a veteran who died while a disability so evaluated was in existence. Record 0 if the participant does not meet any one of the conditions described above. Leave "blank" if the data is not available. | 1 = Yes <=180 days. 2 = Yes, Eligible Veteran 3 = Yes, Other Eligible Person 0 = No | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | | R |
| 302 | Campaign Veteran | IN 1 | Record 1 if the participant is an eligible veteran (i.e., coding value 1 in Element #301) who served on active duty in the U.S. armed forces during a war or in a campaign or expedition for which a campaign badge or expeditionary medal has been authorized as identified and listed by the Office of Personnel Management (OPM). A current listing of the campaigns can be found at OPM's website http://www.opm.gov/policy-data-oversight/veterans-services/vet-guide. Record 0 if the participant does not meet the condition described above. Leave blank if data element does not apply to the participant. | 1 = Yes 0 = No | | R | | | | | R | | | | | | R | | | | | | R |
| 303 | Disabled Veteran | IN 1 | Record 1 if the participant is a veteran who served on active duty in the U.S. armed forces and who is entitled to compensation regardless of rating (including those rated at 0%); or who but for the receipt of military retirement pay would be entitled to compensation, under laws administered by the Department of Veterans Affairs (DVA); or was discharged or released from activity duty because of a service-connected disability. Record 2 if the participant is a veteran who served on active duty in the U.S. armed forces and who is entitled to compensation (or who, but for the receipt of military retirement pay would be entitled to compensation) under laws administered by the DVA for a disability, (i) rated at 30 percent or more or, (ii) rated at 10 or 20 percent in the case of a veteran who has been determined by DVA to have a serious employment handicap. Record 0 if the participant does not meet any one of the conditions described above. Leave blank if data element does not apply to the participant. | 1 = Yes 2 = Yes, special disabled 0 = No | | R | R | R | R | R | R | | | | | | R | | | | | | R |
| 304 | Date of Actual Military Separation | DT 8 | Record the date on which the participant separated from active duty with the U.S. armed forces. Leave blank if data element does not apply to the participant. | YYYYMMDD | | R | R | R | R | R | R | | | | | | R | | | | | | R |
| 305 | Transitioning Service Member | IN 1 | Record 1 if the participant is a person who is on active military duty status (including separation leave) with the U.S. armed forces and within 24 months of retirement or 12 months of separation from the armed forces. Record 0 if the participant does not meet the condition described above. Leave blank if data element does not apply to the participant. | 1 = Yes 0 = No | | R | R | R | R | R | R | | | | | | R | | | | | | R |
| 306 | Covered Person Entry Date | DT 8 | Record the date on which the Covered Person first made contact with the workforce system, either at a physical location or through an electronic resource. Leave blank if this data element does not apply to the participant | YYYYMMDD | R | R | R | R | R | R | | | | | | | R | | R | | | | R |
| 307 | TAP Workshop in 3 Prior Years | IN 1 | Record 1 if the Veteran or TSM attended a TAP Workshop in 3 year period prior to Date of Participation. | 1 = Yes 0 = No | | R | | | | | | | | | | | R | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 308 | Homeless Veteran | IN 1 | A participant who served in the active military, naval, or air service, and who was discharged or released from such service under conditions other than dishonorable, and who lacks a fixed, regular, and adequate night time residence.  This definition includes any participant who has a primary night time residence that is a publicly or privately operated shelter for temporary accommodation; an institution providing temporary residence for participants intended to be institutionalized; or a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings. This definition does not include an participant imprisoned or detained under an Act of Congress or State law. An participant who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be recorded as homeless. Record 1 if the participant meets the conditions described above. Record 0 if the participant does not meet the conditions described above. Leave blank if this data element does not apply to the participant | 1 = Yes  0 = No | | | | | | | | | | | | | | | | | | | |
| 309 | Homeless Veterans' Reintegration Program Participant | IN 1 | Record 1 if the participant is a veteran who is enrolled in the Homeless Veterans' Reintegration Program (HVRP), Incarcerated Veterans Transition Program (IVTP), or Homeless Female Veterans and Veterans with Families (HFVVWF) Reintegration Program in their area. Record 0 if the participant does not meet the condition described above. Leave blank if data element does not apply to the participant. | 1 = Yes  0 = No | | R | R | R | R | | | | | R | R | | R | | | | | | R |
| 310 | Homeless Veterans' Reintegration Program Grantee | IN 5 | Record the first five numbers of the DOL Grant number for the corresponding program in PIRL 309. (Should be provided by the local grantee/service provider making the referral.) Leave blank if data element does not apply to the participant. | 00000 | | R | R | R | R | | | | | R | R | | R | | | | | | R |
| 311 | Homeless Veterans' Reintegration Program Grantee #2 | IN 5 | If the participant is receiving services from a second HVRP grantee, record the first five numbers of the DOL Grant number. (Should be provided by the local HVRP grantee/service provider making the referral.) Leave blank if data element does not apply to the participant. | 00000 | | R | | | | | | | | | | | R | | | | | | R |
| 312 | Reason the participant is being served by a second HVRP grantee | IN 2 | Record 1 if the participant stated the grantee is no longer a DOL grantee. Record 2 if the participant stated the services provided were not capable to her or his needs. Record 3 if the participant left the service area of grantee #1. Record 4 if the participant lost touch with the HVRP counselor #1 and recruited by HVRP grantee #2 | 01= If the participant stated the grantee is no longer a DOL grantee. 02= If the participant stated the services provided were not capable to her or his needs. 03= If the participant left the service area of grantee #1. 04= If the participant lost touch with the HVRP counselor #1 and recruited by HVRP grantee #2 | | R | | | | | | | | | | | R | | | | | | R |
| 313 | Homeless Veterans' Reintegration Program Grantee #3 | IN 5 | If the participant is receiving services from a third HVRP grantee, Record the first five numbers of the DOL Grant number. (Should be provided by the local HVRP grantee/service provider making the referral.) Leave blank if data element does not apply to the participant. | 00000 | | R | | | | | | | | | | | R | | | | | | R |
| 314 | Reason the participant is being served by a third HVRP grantee | IN 2 | Record 1 if the participant stated the grantee is no longer a DOL grantee. Record 2 if the participant stated the services provided were not capable to his needs. Record 3 if the participant left the service area of grantee #2. Record 4 if the participant lost touch with the HVRP counselor #2 and recruited by HVRP grantee #3 | 01= If the participant stated the grantee is no longer a DOL grantee. 02= If the participant stated the services provided were not capable to his needs. 03= If the participant left the service area of grantee #2. 04=If the participant lost touch with the HVRP counselor #2 and recruited by HVRP grantee #3 | | R | | | | | | | | | | | R | | | | | | R |
| 315 | Other Significant Barrier to Employment | IN 1 | Record 1 if the veteran or eligible person has a significant barrier to employment not captured elsewhere. Record 0 if there is no other significant barrier to employment. NOTE:  The rationale for this data element is that certain significant barriers to employment are captured in other data elements.  For instance, "special disabled" or "disabled veteran" is captured in #303, "homeless veterans" is captured in #308, "recently separated" is captured in #304, "ex-offender" is captured in #801, "no secondary school diploma…" is captured in #408, and "low income" is captured in #802. Leave blank if this data element does not apply to the participant | 1 = Yes, Other  0 = No | | R | | | | | | | R | | | | R | | | | R | | R |

Requirements by Program of Participation column order: Reportable Individual (RI), Wagner-Peyser (WP), WIOA Adults, WIOA Dislocated Workers (DW), WIOA Youth, Dislocated Worker Grants (DWG), TAA, National Farmworker Jobs Program (NFJP), Indian and Native American Program (INA), Reentry Employment Opportunities (REO) (Adult), Reentry Employment Opportunities (REO) (Youth), YouthBuild (YB), Jobs for Veterans' State Grants (JVSG), H1B, Job Corps, Incumbent Worker (Adult/DW Funded), SCSEP, Apprenticeship, Demonstration Grants (Demo)

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | RI | WP | WIOA Adults | DW | WIOA Youth | DWG | TAA | NFJP | INA | REO (Adult) | REO (Youth) | YB | JVSG | H1B | Job Corps | Incumbent Worker | SCSEP | Apprenticeship | Demo |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 316 | Active Duty Military Spouse | IN 1 | Record 1 if participant is the spouse of a member of the Armed Forces on active duty (as defined in section 101(d)(1) of title 10, United States Code). Record 0 if the participant does not meet any one of the conditions described above. | 1 = Yes<br>0= No |  | R | R | R | R | R | R |  |  |  |  |  | R |  |  |  |  |  | R |

**SECTION A.04 - EMPLOYMENT AND EDUCATION INFORMATION**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | RI | WP | WIOA Adults | DW | WIOA Youth | DWG | TAA | NFJP | INA | REO (Adult) | REO (Youth) | YB | JVSG | H1B | Job Corps | Incumbent Worker | SCSEP | Apprenticeship | Demo |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 400 | Employment Status at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, (a) is currently performing any work at all as a paid employee, (b) is currently performing any work at all in his or her own business, profession, or farm, (c) is currently performing any work as an unpaid worker in an enterprise operated by a member of the family, or (d) is one who is not working, but currently has a job or business from which he or she is temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time-off, and whether or not seeking another job. Record 2 if the participant, at program entry, is a person who, although employed, either (a) has received a notice of termination of employment or the employer has issued a Worker Adjustment and Retraining Notification (WARN) or other notice that the facility or enterprise will close, or (b) is a transitioning service member (i.e., within 12 months of separation or 24 months of retirement). Record 3 if the participant, at program entry, is not in the labor force (i.e., those who are not employed and are not actively looking for work, including those who are incarcerated). Record 0 if the participant, at program entry, is not employed but is seeking employment, makes specific effort to find a job, and is available for work. | 1 = Employed<br>2 = Employed, but Received Notice of Termination of Employment or Military Separation is pending<br>3 = Not in labor force<br>0 = Unemployed |  | R | R | R | R | R | R | R | R | R | R | R | R | R |  |  | R | R | R |
| 401 | UC Eligible Status | IN 1 | Record 1 if the participant is a person who (a) filed a claim and has been determined eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights, and (b) received staff-assisted services provided by the Reemployment Services and Eligibility Assessment (RESEA) program. Record 2 if the participant is a person who (a) filed a claim and has been determined eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights, and (b) was referred to service through the state's Worker Profiling and Reemployment Services (WPRS) system. Record 3 if the participant is a person who meets condition 2 (a) described above, but was not referred to service through the state's WPRS system or did not receive a RESEA provided staff assisted service. Record 4 if the participant meets condition 2(a), but has exhausted all UC benefit rights for which he/she has been determined eligible, including extended supplemental benefit rights. Record 5 if the participant is claimant who is exempt from normal work search requirements according state law, and does not have to perform work search activities. Record 0 if the participant was neither a UC Claimant nor an Exhaustee. Leave blank if this data element does not apply to the participant. | 1 = Claimant Referred by RESEA<br>2 = Claimant Referred by WPRS<br>3 = Claimant Not Referred by RESEA or WPRS<br>4 = Exhaustee<br>5 = Claimant is Exempt<br>0 = Neither Claimant nor Exhaustee |  | R | R | R | R | R | R | R | R | R | R | R |  | R |  |  | R |  | R |
| 402 | Long-Term Unemployed at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, has been unemployed for 27 or more consecutive weeks. Record 0 if the participant does not meet the condition described above. | 1 = Yes, Unemployed ≥ 27 consecutive weeks<br>0 = No |  | R | R | R | R | R |  | R | R | R | R | R | R | R |  |  |  | R | R |
| 403 | Occupational Code of Most Recent Employment Prior to Participation (if available) | AN 8 | Record the 8-digit occupational code that best describes the participant's employment using the O*Net Version 4.0 (or later versions) classification system. This information is based on the most recent job held before participating in the program. Leave blank if occupational code is not available or not known, or the data element does not apply. Additional Notes: This information must be based on the most recent job held prior to participating in the program and only applies to adults, and dislocated workers. If all 8 digits of the occupational skills code are not collected, record as many digits as are available. If the participant had multiple jobs, use the occupational skills code of the job where the participant earned the highest gross wage. | 00000000 |  | R | R | R |  | R |  | R |  | R | R |  | R |  |  | R |  |  | R |
| 404 | Industry Code of Employment 1st Quarter Prior to Participation | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If the participant had multiple jobs, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 1st Quarter Prior to Participation Quarter exist and NAICS Code is not known. Leave blank if this data element does not apply to the person. | 000000 |  | R | R | R |  | R |  | R |  |  |  |  | R |  |  | R |  |  | R |
| 405 | Industry Code of Employment 2nd Quarter Prior to Participation | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If the participant had multiple jobs, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 2nd Quarter Prior to Participation Quarter exist and NAICS Code is not known. Leave blank if this data element does not apply to the person. | 000000 |  | R | R | R |  | R |  | R |  |  |  |  | R |  |  |  |  |  | R |
| 406 | Industry Code of Employment 3rd Quarter Prior to Participation | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If the participant had multiple jobs, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 3rd Quarter Prior to Participation Quarter exist and NAICS Code is not known. Leave blank if this data element does not apply to the person. | 000000 |  | R | R | R |  | R |  | R |  |  |  |  | R |  |  |  |  |  | R |
| 407 | Highest School Grade Completed at Program Entry (WIOA) | IN 2 | Use the appropriate code to record the highest school grade completed by the participant at program entry. Record 1 – 12 for the number of school grades completed by the participant. Record 0 if no school grades were completed. | 1 – 12 = Number of school grades completed<br>0 = No school grades completed |  | R | R | R | R | R | R | R | R | R | R | R | R | R | R |  |  | R | R | R |
| 408 | Highest Educational Level Completed at Program Entry (WIOA) | IN 1 | Use the appropriate code to record the highest educational level completed by the participant at program entry. Record 1 if the participant attained a secondary school diploma. Record 2 if the participant attained a secondary school equivalency. Record 3 if the participant has a disability and attained a certificate of attendance/completion as a result of successfully completing an Individualized Education Program (IEP). Record 4 if the participant completed one of more years of postsecondary education. Record 5 if the participant attained a postsecondary certification, license, or educational certificate (non-degree). Record 6 if the participant attained an Associate's degree. Record 7 if the participant attained a Bachelor's degree. Record 8 if the participant attained a degree beyond a Bachelor's degree. Record 0 if no educational level was completed. | 1 = Attained secondary school diploma<br>2 = Attained a secondary school equivalency<br>3 = The participant with a disability receives a certificate of attendance/completion as a result of successfully completing an Individualized Education Program (IEP)<br>4 = Completed one of more years of postsecondary education<br>5 = Attained a postsecondary technical or vocational certificate (non-degree)<br>6 = Attained an Associate's degree<br>7 = Attained a Bachelor's degree<br>8 = Attained a degree beyond a Bachelor's degree<br>0 = No Educational Level Completed |  | R | R | R | R | R | R | R | R | R | R | R | R | R | R |  |  | R | R | R |
| 409 | School Status at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, has not received a secondary school diploma or its recognized equivalent and is attending any primary or secondary school (including elementary, intermediate, junior high school, whether full or part-time), or is between school terms and intends to return to school. Record 2 if the participant, at program entry, has not received a secondary school diploma or its recognized equivalent and is attending an alternative high school or an alternative course of study approved by the local educational agency whether full or part-time, or is between school terms and is enrolled to return to school. Record 3 if the participant, at program entry, has received a secondary school diploma or its recognized equivalent and is attending a postsecondary school or program (whether full or part-time), or is between school terms and is enrolled to return to school. Record 4 if the participant, at program entry, is not within the age of compulsory school attendance; and is no longer attending any school and has not received a secondary school diploma or its recognized equivalent. Record 5 if the participant, at program entry, is not attending any school and has either graduated from secondary school or has attained a secondary school equivalency. Record 6 if the participant, at program entry, is within the age of compulsory school attendance, but is not attending school and has not received a secondary school diploma or its recognized equivalent. | 1 = In-school, secondary school or less<br>2 = In-school, Alternative School<br>3 = In-school, Postsecondary school.<br>4 = Not attending school or Secondary School Dropout<br>5 = Not attending school; secondary school graduate or has a recognized equivalent<br>6 = Not attending school; within age of compulsory school attendance |  | R | R | R | R | R |  | R | R | R | R |  | R |  |  |  | R | R | R |
| 410 | Date of Actual Dislocation | DT 8 | Record the participant's date of actual dislocation from employment. This date is the last day of employment at the dislocation job. Leave blank if there is no dislocation job (e.g., displaced homemaker) or this data element does not apply to the participant. | YYYYMMDD |  | R | R | R |  | R |  |  |  |  |  |  | R |  |  |  |  |  | R |
| 411 | Most Recent Date of Qualifying Separation | DT 8 | Record the participant's most recent date of separation from trade-impacted employment that qualifies the participant to receive benefits and/or services under the Trade Act. Leave blank if there is no qualifying separation date or the separation date is the same as the Date of Actual Dislocation or this data element does not apply to the participant. | YYYYMMDD |  |  |  |  |  |  | R |  |  |  |  |  |  |  |  |  |  |  | R |
| 412 | Tenure with Employer at Separation | IN 3 | Record the total number of months that the participant was employed with the employer of record as of the participant's most recent qualifying separation. Employment of at least one day but less than one month should be recorded as "1". Leave blank if this data element does not apply to the participant. | 000 |  |  |  |  |  |  | R |  |  |  |  |  | R |  |  |  |  |  | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 413 | Migrant and Seasonal Farmworker Designation as defined at 20 CFR 651.10 | IN 1 | Record 1 if the participant is a seasonal farmworker, meaning an individual who is employed, or was employed in the past 12 months, in farmwork (as described at 20 CFR 651.10) of a seasonal or other temporary nature and is not required to be absent overnight from their permanent place of residence. Labor is performed on a seasonal basis where, ordinarily, the employment pertains to, or is of the kind exclusively performed at certain seasons, or periods of the year and which, from its nature, may not be continuous or carried on throughout the year. Workers, who move from one seasonal activity to another, while employed in farm work, are employed on a seasonal basis even though they may continue to be employed during a major portion of the year. Workers are employed on other temporary basis where they are employed for a limited time only or their performance is contemplated for a particular piece of work, usually of short duration. Generally, employment which is contemplated to continue indefinitely is not temporary. Record 2 if the participant is a migrant farmworker, meaning a seasonal farmworker (as defined above) who travels to the job site so that the farmworker is not reasonably able to return to their permanent residence within the same day. Record 0 if the participant does not meet the condition described above. Leave blank if this data element does not apply to the individual. | 1 = Seasonal Farmworker 2 = Migrant 0 = No | R | R | | | | | | | | | | | | | | | | | R |

**SECTION A.05 - PUBLIC ASSISTANCE INFORMATION**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 600 | Temporary Assistance to Needy Families (TANF) | IN 1 | Record 1 if the participant is listed on the welfare grant or has received cash assistance or other support services from the TANF agency in the last six months prior to participation in the program. Record 0 if the participant does not meet the condition described above. Leave blank if this data element does not apply to the participant. | 1 = Yes 0 = No | | R | R | R | R | R | R | R | R | R | R | R | R | | R | | R | | R |
| 601 | Exhausting TANF Within 2 Years (Part A Title IV of the Social Security Act) at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, is within 2 years of exhausting lifetime eligibility under part A of Title IV of the Social Security Act (42 U.S.C. 601 et seq.), regardless of whether receiving these benefits at program entry. Record 0 if the participant does not meet the condition described above. Record 9 if the data element does not apply to the participant (i.e., the participant has never received TANF, or if the participant has already exhausted lifetime TANF eligibility). | 1 = Yes 0 = No 9 = Not Applicable | | R | R | R | R | R | | R | | R | R | R | R | | | | | | R |
| 602 | Supplemental Security Income(SSI) / Social Security Disability Insurance (SSDI) | IN 1 | Record 1 if the participant is receiving or has received SSI under Title XVI of the Social Security Act in the last six months prior to participation in the program. Record 2 if the participant is receiving or has received SSDI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the program. Record 3 if the participant is receiving or has received both SSI and SSDI in the last six months prior to participation in the program. Record 4 if the participant is receiving or has received SSI under Title XVI of the Social Security Act in the last six months prior to participation in the program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. Record 5 if the participant is receiving or has received SSDI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. Record 6 if the participant is receiving or has received both SSI and SSDI in the last six months prior to participation in the program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. Record 0 if the participant does not meet any of the conditions described above. | 1 = SSI 2 = SSDI 3 = Both SSI and SSDI 4 = SSI and Ticket Holder 5 = SSDI and Ticket Holder 6 = Both SSI and SSDI and A Ticket Holder 0 = No | | R | R | R | R | | | R | R | R | R | R | R | | R | | R | | R |
| 603 | Supplemental Nutrition Assistance Program (SNAP) | IN 1 | Record 1 if the participant is receiving assistance through the Supplemental Nutrition Assistance Program (SNAP) under the Food and Nutrition Act of 2008 (7 USC 2011 et seq.) Record 0 if the participant does not meet the above criteria. | 1 = Yes 0 = No | | R | R | R | R | | | R | R | R | R | R | R | | | | R | | R |
| 604 | Other Public Assistance Recipient | IN 1 | Record 1 if the participant is a person who is receiving or has received cash assistance or other support services from one of the following sources in the last six months prior to participation in the program: General Assistance (GA) (State/local government), or Refugee Cash Assistance (RCA). Do not include foster child payments. Record 0 if the participant does not meet the above criteria. Leave blank if this data element does not apply to the participant. | 1 = Yes 0 = No | | | R | R | R | | R | R | R | R | R | | | | R | | R | | R |

**SECTION A.06 - ADDITIONAL YOUTH CHARACTERISTICS**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 701 | Pregnant or Parenting Youth | IN 1 | Record 1 if the participant is a youth who is pregnant, or an individual (male or female) who is providing custodial care for one or more dependents under age 18. Record 0 if the participant does not meet the conditions described above. Record 0 if the data is not available. | 1 = Yes 0 = No | | | | | R | | | R | | | R | R | | | | | | | R |
| 702 | Youth Who Needs Additional Assistance | IN 1 | Record 1 if the participant is an out-of-school youth who requires additional assistance to enter or complete an educational program, or to secure and hold employment or an in-school youth who requires additional assistance to complete an educational program or to secure or hold employment as defined by State or local policy. If the State Board defines a policy, the policy must be included in the State Plan. Record 0 if the participant does not meet the conditions described above. Leave blank if this data element does not apply to the participant. | 1 = Yes 0 = No | | | | | R | | | R | | | R | | | | | | | | R |
| 704 | Foster Care Youth Status at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, is a person aged 24 or under who is currently in foster care or has aged out of the foster care system. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | R | R | R | R | R | | R | | R | R | R | R | | R | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**REQUIREMENTS BY PROGRAM OF PARTICIPATION[1]**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual[a] | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

**SECTION A.07 - ADDITIONAL REPORTABLE CHARACTERISTICS**

| 800 | Homeless participant, Homeless Children and Youths, or Runaway Youth at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry: (a) Lacks a fixed, regular, and adequate nighttime residence; this includes a participant who: (i) is sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; (ii) is living in a motel, hotel, trailer park, or campground due to a lack of alternative adequate accommodations; (iii) is living in an emergency or transitional shelter; (iv) is abandoned in a hospital; or (v) is awaiting foster care placement; (b) Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, such as a car, park, abandoned building, bus or train station, airport, or camping ground; (c) Is a migratory child who in the preceding 36 months was required to move from one school district to another due to changes in the parent's or parent's spouse's seasonal employment in agriculture, dairy, or fishing work; or (d) Is under 18 years of age and absents himself or herself from home or place of legal residence without the permission of his or her family (i.e., runaway youth). This definition does not include a participant imprisoned or detained under an Act of Congress or State law. A participant who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be recorded as homeless. Record 0 if the participant does not meet the conditions described above. Note: WIOA youth who meet the definition of homeless as defined in WIOA section 681.210(c)(5) and 681.220(d)(4) are reported in this data element. | 1 = Yes 0 = No | | R | R | R | R | R | | R | R | R | R | R | | R | | R | | R | | R |

| 801 | Ex-Offender Status at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, is a person who either (a) has been subject to any stage of the criminal justice process for committing a status offense or delinquent act, or (b) requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction. Record 0 if the participant does not meet any one of the conditions described above. Record 9 if the participant did not disclose. | 1 = Yes 0 = No 9 = Did not disclose | | R | R | R | R | R | | R | R | R | R | R | R | R | R | | | | R | R |

| 802 | Low Income Status at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, is a person who: (a) Receives, or in the 6 months prior to application to the program has received, or is a member of a family that is receiving or in the past 6 months prior to application to the program has received: (i) Assistance through the supplemental nutrition assistance program (SNAP) under the Food and Nutrition Act of 2008 (7 USC 2011 et seq.); (ii) Assistance through the temporary assistance for needy families program under part A of Title IV of the Social Security Act (42 USC 601 et seq.); (iii) Assistance through the supplemental security income program under Title XVI of the Social Security Act (42 USC 1381); or (iv) State or local income-based public assistance. (b) Is in a family with total family income that does not exceed the higher of the poverty line or 70% of the lower living standard income level; (c) Is an individual who receives, or is eligible to receive a free or reduced price lunch under the Richard B. Russell National School Lunch Act (42 USC 1751 et seq.); (d) Is a foster child on behalf of whom State or local government payments are made; (e) Is an participant with a disability whose own income is the poverty line but who is a member of a family whose income does not meet this requirement; (f) Is a homeless participant or a homeless child or youth or runaway youth (see Data Element #800); or (g) Is a youth living in a high-poverty area. Record 0 if the participant does not meet the criteria presented above. | 1 = Yes 0 = No | | R | R | R | R | R | | R | R | R | R | R | R | R | R | R | | | | R |

| 803 | English Language Learner at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, is a person who has limited ability in speaking, reading, writing or understanding the English language and also meets at least one of the following two conditions (a) his or her native language is a language other than English, or (b) he or she lives in a family or community environment where a language other than English is the dominant language. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | | | R |

| 804 | Basic Skills Deficient/Low Levels of Literacy at Program Entry | IN 1 | Record 1 if the participant is, at program entry: A) a youth, who has English reading, writing, or computing skills at or below the 8th grade level on a generally accepted standardized test; or B) a youth or adult, who is unable to compute and solve problems, or read, write, or speak English at a level necessary to function on the job, in the participant's family, or in society. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | | | | R |

| 805 | Cultural Barriers at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, perceives him or herself as possessing attitudes, beliefs, customs or practices that influence a way of thinking, acting or working that may serve as a hindrance to employment. Record 0 if the participant does not meet the conditions described above. Record 9 if the participant did not self-identify. | 1 = Yes 0 = No 9 = Participant did not self-identify | | R | R | R | R | R | | | R | R | R | | | R | | R | | R | | R |

| 806 | Single Parent at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, is single, separated, divorced or a widowed individual who has primary responsibility for one or more dependent children under age 18 (including single pregnant women). Record 0 if the participant does not meet the condition described above. Record 9 if the participant did not self-identify. | 1 = Yes 0 = No 9 = Participant did not self-identify | | R | R | R | R | R | R | R | R | R | R | R | | R | | R | | | | R |

| 807 | Displaced Homemaker at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, has been providing unpaid services to family members in the home and who: (A)(i) has been dependent on the income of another family member but is no longer supported by that income; or (ii) is the dependent spouse of a member of the Armed Forces on active duty (as defined in section 101(d)(1) of title 10, United States Code) and whose family income is significantly reduced because of a deployment (as defined in section 991(b) of title 10, United States Code, or pursuant to paragraph (4) of such section), a call or order to active duty pursuant to a provision of law referred to in section 101(a)(13)(B) of title 10, United States Code, a permanent change of station, or the service-connected (as defined in section 101(16) of title 38, United States Code) death or disability of the member; and (B) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | R | R | R | R | R | | R | | R | R | | R | | | | R | | | R |

| 808 | Migrant and Seasonal Farmworker Status | IN 1 | Record 1 if the participant, at program entry, is a low-income individual (i) who for the 12 consecutive months out of the 24 months prior to application for the program involved, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment; and (ii) faces multiple barriers to economic self-sufficiency. Record 2 if the participant, at program entry, is a seasonal farmworker and whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day. Record 3 if the participant is a migrant farmworker or seasonal farmworker (as defined above) aged 14-24. Record 4 if the participant is an adult program participant and a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above. Record 5 if the participant is a youth program participant and a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above. *Note: This element is used both by the NFJP Program eligibility status type and by other programs to identify participants with this (WIOA sec. (3) defined) barrier to employment. | 1 = Seasonal Farmworker Adult 2 = Migrant Farmworker Adult 3= MSFW Youth 4= Dependent Adult 5= Dependent Youth 0 = No | | R | R | R | R | R | | R | | R | R | | R | | | | | | | R |

**SECTION B - ONE STOP CENTER PROGRAM PARTICIPATION INFORMATION**

| 900 | Date of Program Entry (WIOA) | DT 8 | Record the date on which an individual became a participant as referenced in 20 CFR 677.150 satisfying applicable programmatic requirements for the provision of services. Leave blank if this data element does not apply. | YYYYMMDD | | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R |

| 901 | Date of Program Exit (WIOA) | DT 8 | Record the last date the participant received services that are not self-service, information-only, or follow up services. Record this last date of receipt of services only if there are no future services, that are not self-service, information-only, or follow up services, planned from the program. For Titles I, II and III, record the last date of funded service(s). For Vocational Rehabilitation programs, record the date when the participant's record of service is closed pursuant to 34 CFR 361.43 or 361.56. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R |

| 902 | Date of First Case Management and Employment Service | DT 8 | Record the date on which the participant begins receiving his/her first case management and employment service funded by a program following a determination of eligibility to participate in the program. | | | | | | | | R | | | | | | R | | | | | | | R |

| 903 | Adult (WIOA) | IN 1 | Record 1 if the participant received services under WIOA section 133(b)(2)(A) as an individual who is not less than age 18 at the time of program entry. Record 2 if the participant received services under WIOA section 133(a)(1). Record 3 if the participant received services under WIOA section 133(b)(2)(A) and 133(a)(1). Record 4 if the individual has demonstrated an intent to use program services and meets one of the following criteria— (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive services under the condition described above. | 1 = Yes, Local Formula 2 = Yes, Statewide 3 = Yes, Both Local Formula and Statewide 4 = Reportable Individual 0 = No | R | R | R | R | R | R | R | R | R | | | | | R | | | | R | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**REQUIREMENTS BY PROGRAM OF PARTICIPATION**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 904 | Dislocated Worker (WIOA) | IN 1 | Record 1 if the participant received services under WIOA Section 133(b)(2)(B) as a person who— (A)(i) has been terminated or laid off, or who has received a notice of termination or layoff, from employment; (ii)(I) is eligible for or has exhausted entitlement to unemployment compensation; or (II) has been employed for a duration sufficient to demonstrate, to the appropriate entity at a one-stop center referred to in section 121(e), attachment to the workforce, but is not eligible for unemployment compensation due to insufficient earnings or having performed services for an employer that were not covered under a State unemployment compensation law; and (iii) is unlikely to return to a previous industry or occupation; (B)(i) has been terminated or laid off, or has received a notice of termination or layoff, from employment as a result of any permanent closure of, or any substantial layoff at, a plant, facility, or enterprise; (ii) is employed at a facility at which the employer has made a general announcement that such facility will close within 180 days; or (iii) for purposes of eligibility to receive services other than training services described in WIOA Sec 134(c)(3), career services described in WIOA Sec 134(c)(2)(A)(xii), or supportive services, is employed at a facility at which the employer has made a general announcement that such facility will close; (C) was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of general economic conditions in the community in which the participant resides or because of natural disasters; (D) is a displaced homemaker; or (E)(i) is the spouse of a member of the Armed Forces on active duty (as defined in section 101(d)(1) of title 10, United States Code), and who has experienced a loss of employment as a direct result of relocation to accommodate a permanent change in duty station of such member; or (ii) is the spouse of a member of the Armed Forces on active duty and who meets the criteria described in WIOA Section 3(16)(B). Record 2 if the participant received services under WIOA section 133(a). Record 3 if the participant received under WIOA sections 133(b)(2)(B) and 133(a). Record 4 if the individual has demonstrated an intent to use program services and meets one of the following criteria— (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive services under the condition described above. | 1 = Yes, Local Formula 2 = Yes, Statewide 3 = Yes, Both Local Formula and Statewide 4 = Reportable Individual 0 = No | R | R | R | R | | R | R | R | | R | R | | R | R | | | | | R |
| 905 | Youth (WIOA) | IN 1 | Record 1 if the participant received services under WIOA section 128(b). Record 2 if the participant received services under WIOA section 128(a). Record 3 if the participant received services under WIOA sections 128(b) and 128(a). Record 4 if the individual fail to complete the program requirements for eligibility or for participation. Record 0 if the participant did not receive services under the conditions described above. | 1 = Yes, Local Formula 2 = Yes, Statewide 3 = Yes, Both Local Formula and Statewide 4 = Youth Reportable Individual 0 = No | R | R | R | R | R | R | | R | | | | R | | R | | | | | R |
| 906 | Date of First WIOA Youth Service | DT 8 | Record the date on which the participant began receiving his/her first WIOA youth service (i.e. 1 of the 14 youth program elements in WIOA §129(c)(2)). Leave blank if the participant did not receive services funded by the WIOA Youth program. | YYYYMMDD | | | | | R | | | | | | | R | | | | | | | R |
| 907 | Recipient of Incumbent Worker Training | IN 1 | Record 1 if the participant received Incumbent Worker training services under WIOA section 134(a)(3)(A)(i) and/or 134(a)(2)(A)(i). Record 2 if the participant received Incumbent Worker training services by Local Formula funds under WIOA section 134(d)(4). Record 3 if the participant received Incumbent Worker training services under both Statewide funds (Governor's Reserve and/or Rapid Response) WIOA section 134(a)(3)(A)(i) and/or 134(a)(2)(A)(i) and Local Formula funds under WIOA section 134(d)(4). Record 4 if the participant received Incumbent Worker training services under H1B. Record 5 if the participant received incumbent Worker training services under a National Dislocated Worker Grant (DWG) (WIOA section 170). Record 6 if the participant received Incumbent Worker training services under a National Farmworker Job Program (NFJP)(WIOA section 167). Record 7 if the participant received Incumbent Worker training services under an grant funded through apprenticeship appropriated funds. Record 0 if the participant did not receive services under the condition described above, or received services by a local area with statewide funds passed down from the state to the local area. | 1 = Statewide 15% and/or Rapid Response 25% only 2 = Local Formula only (20%) 3 = Both Statewide and Local Formula 4 = H-1B funded grant 5 = DWG funded grant 6 = NFJP funded grant 7 = Apprenticeship appropriated funded grant 0 = No | | R | R | R | | R | | R | | R | R | | R | R | | R | | R | R |
| 908 | Rapid Response | IN 1 | Record 1 if the participant participated in rapid response activities authorized at WIOA section 134(a)(2)(A)(i)(I). Record 0 if the participant did not receive services under the condition described above. Record 9 if grantee is unable to track enrollment in the program. Leave blank if this data element does not apply to the participant. | 1 = Yes 0 = No 9 = Unknown | | R | | R | | R | R | | | | | | R | | | R | | | R |
| 909 | Rapid Response (Additional Assistance) | IN 1 | Record 1 if the individual participated in a program by WIOA section 134(a)(2)(A)(i)(II). Record 0 if the participant did not participate in a program or otherwise receive services under the condition described above or received services by a local area with statewide funds passed down from the state to the local area. Record 9 if grantee is unable to track enrollment in the program. Leave blank if this data element does not apply to the individual. | 1 = Yes 0 = No 9 = Unknown | | | | R | | R | R | | | | | | | | | | | | R |
| 910 | Adult Education (WIOA) | IN 1 | Record 1 if the participant received services under WIOA Title II defined as academic instruction and education services below the postsecondary level that increases an individual's ability to— (A) read, write, and speak in English and perform mathematics or other activities necessary for the attainment of a secondary school diploma or its recognized equivalent; (B) transition to postsecondary education and training; and (C) obtain employment. Record 0 if the participant did not receive any services under the conditions described above. Record 9 if the grantee is unable to track enrollment in the program. | 1 = Yes 0 = No 9 = Unknown | | R | R | R | R | R | R | R | | | | R | R | | | | R | | R |
| 911 | Job Corps (WIOA) | IN 1 | Record 1 if the participant received services under title I, chapter 4, subtitle C of WIOA. Record 2 if the individual received reportable individual services (as defined in program specific guidance). Record 0 if the individual did not receive any services under the conditions described above. Record 9 if grantee is unable to track enrollment in the program. | 1 = Yes 2 = Reportable Individual 0 = No 9 = Unknown | R | | | | R | | | R | | | | R | | | R | | | | R |
| 912 | National Farmworker Jobs Program | AN 14 | Record the 14 character grant number if the participant received services under WIOA Title I-D, Section 167. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program. | XXXXXXXXXXXXXX | | R | R | R | R | | | R | | | | R | | | | R | | | R |
| 913 | Indian and Native American Programs | IN 1 | Record 1 if the participant received services under WIOA Title I-D, Section 166 Record 2 if the individual has demonstrated an intent to use program services and meets one of the following criteria— (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Leave blank if the participant did not receive services funded by this program. | 1 = Yes 2 = Reportable Individual | R | R | R | R | R | | | R | R | | | R | | | | R | | | R |
| 914 | Veterans' Programs | IN 2 | Record 1 if the participant received services from a Disabled Veterans Outreach Program specialist (DVOP specialist). Record 2 if the participant received services from a Local Veterans Employment Representative (LVER). Record 0 if the participant did not receive services under any of the conditions described above. Record 9 if grantee is unable to track enrollment in the program. | 1 = Yes, DVOP specialist 2 = Yes, LVER specialist 0 = No 9 = Unknown | | R | R | R | R | | R | R | | | | R | | | R | | | | R |
| 915 | TAA Petition Number | AN 29 | Record the petition number (and full alphabetical suffix, if applicable) of the certification which applies to the participant's group. If there is more than one petition number, list all petition numbers in the order in which they were received delimited by a pipe character (i.e. | ). If there are more than three petition numbers, list the first petition and the most recent two petition numbers. Leave blank if this data element does not apply to the participant. | XXXXXXXXX | | | | | | | R | | | | | | | | | | | | R |
| 916 | Vocational Education | IN 1 | Record 1 if the participant received services under the Carl D. Perkins Vocational and Applied Technology Education Act (20 USC 2301 et seq.). Record 0 if the participant did not receive any services under the condition described above. Record 9 if unknown. Leave blank if this data element does not apply to the participant. | 1 = Yes 0 = No 9 = Unknown | | | R | R | R | R | R | R | | | | | | | | | R | | R |
| 917 | Vocational Rehabilitation (WIOA) | IN 1 | Record 1 if the participant received services under parts A and B of title I of the Rehabilitation Act of 1973 (29 USC 720 et seq.), WIOA title IV, and Sec. 411(B)(15) defined as transition services for students with disabilities, that facilitate the transition from school to postsecondary life, such as achievement of an employment outcome in competitive integrated employment, or pre-employment transition services. Record 2 if the participant received services from the Vocational Rehabilitation and Employment (VR&E) Program authorized by 38 USC Chapter 31. Record 3 if the participant received services from both vocational rehabilitation programs. Record 0 if the participant did not receive any services under the conditions described above. Record 9 if unknown. | 1 = Yes 2 = VR&E 3 = Both VR and VR&E 0 = No 9 = Unknown | | R | R | R | R | R | R | R | | | | | | | | | R | | R |
| 918 | Wagner-Peyser Employment Service (WIOA) | IN 1 | Record 1 if the participant received services under the Wagner-Peyser Act (29 USC 49 et seq.) Record 2 if the individual has demonstrated an intent to use program services and meets one of the following criteria— (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive services under the Wagner-Peyser Act. Record 9 if the grantee is unable to track enrollment in the program. | 1 = Yes 2 = Reportable Individual 0 = No 9 = Unknown | R | R | R | R | R | R | R | R | | | | R | R | | | | R | | R |
| 919 | YouthBuild (WIOA) | AN 14 | Record the 14 character grant number if the participant received services under the YouthBuild Program as authorized under WIOA section 171. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter all 9s. Leave blank if the participant did not receive services funded by this program. | XXXXXXXXXXXXXX | | R | R | | R | | | R | | | | R | | | | | | | R |

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 920 | Senior Community Service Employment Program | AN 14 | Record the 14 character grant number if the participant received services under Title V of the Older Americans Act of 2006, the Senior Community Service Employment Program (SCSEP). The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program. | XXXXXXXXXXXXXX | | R | R | R | | | R | R | | | | | R | | | | R | | R |
| 921 | Employment and Training Services Related to SNAP | IN 1 | Record 1 if the participant received employment and training (E&T) services from the Supplemental Nutrition Assistance Program (SNAP) (7 USC 2015(d)(4)) - NOTE: This refers to the SNAP E&T program, NOT simply a SNAP recipient. Record 0 if the participant did not receive any services under the condition described above. Leave blank if it is not known. | 1 = Yes 0 = No | | R | R | | R | | R | R | | | | | R | | | | R | | R |
| 922 | Other WIOA or Non-WIOA Programs | IN 1 | Record 1 if the participant received services from any other WIOA or non-WIOA program not listed above that provided the participant with services during their period of participation. Record 2 if the participant received services from the Intellectual and/or Developmental Disability Program, Mental Health Program, or any other Employment First State Leadership Mentoring Program (EFSLMP) during the period of participation. Record 0 if the participant did not receive any services under either of the conditions described above. | 1 = Yes, Other WIOA or Non-WIOA Programs 2 = I/DD, MH or other disability programs 0 = No | | R | | | | | R | R | | R | R | | R | | | | R | | R |
| 923 | Other Reasons for Exit (WIOA) | IN 2 | Record 01 if the participant exits the program because he or she has become incarcerated in a correctional institution or has become a resident of an institution or facility providing 24-hour support such as a hospital or treatment center during the course of receiving services as a participant. Record 02 if the participant exits the program because of medical treatment and that treatment is expected to last longer than 90 days and precludes entry into unsubsidized employment or continued participation in the program. Record 03 if the participant is deceased. Record 04 if the participant exits the program because the participant is a member of the National Guard or other reserve military unit of the armed forces and is called to active duty for at least 90 days. Record 05 if the participant is in the foster care system as defined in 45 CFR 1355.20(a), and exits the program because the participant has moved from the area as part of such a program or system (Youth participants only). Record 06 if the participant, who was determine to be eligible, is later determined not a have met eligibility criteria. **NOTE:** This circumstance applies only to the VR program, in which participant eligibility is routinely revisited during the participation period. For titles I, II, and III program eligibility is determined at the time an individual becomes a participant. Record 07 if the participant is a criminal offender in a correctional institution under section 225 of WIOA. Record 00 if the participant meets none of the above conditions. | 01 = Institutionalized 02 = Health/Medical 03 = Deceased 04 = Reserve Forces called to Active Duty 05 = Foster Care 06 = Ineligible 07 = Criminal Offender 00 = No | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 924 | TAA Application Date | DT 8 | Record the date on which the individual first applied for Trade Act services/benefits under the applicable certification. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 925 | Date of First TAA Benefit or Service | DT 8 | Record the date of the first Trade funded benefit or service received after the participant was determined eligible to participate. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 926 | TAA Liable/Agent State Identifier | IN 1 | Record 1 if the reporting State is serving the participant exclusively as a liable state. The definition for liable state can be found under 20 CFR 617.26(a). Record 2 if the reporting State is serving the participant as an agent state. The definition for agent state can be found under 20 CFR 617.26(b). Record 0 if the reporting State is both the paying state for UI (liable) as well as the State providing services (agent). Leave blank if the individual is not a participant in the TAA Program | 1 = Liable State 2 = Agent State 0 = Both | | | | | | | R | | | | | | | | | | | | R |
| 927 | TAA Date of Eligibility Determination | DT 8 | Record the date upon which the individual was determined to be (or not) an adversely affected worker. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 928 | Determined Eligible for TAA | IN1 | Record 1 if the individual was determined eligible for the Trade Program. Record 0 if the individual was determined not eligible. Leave blank if the data element does not apply to the individual. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |
| 929 | Benefit Under Prior Certification Last 10 Years (TAA) | IN 1 | Record 1 if the participant received a benefit under a prior certification in any of the previous 10 fiscal years. Record 0 if the participant did not receive any services under the condition described above Leave blank if the individual is not a TAA participant. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |
| 930 | Pay-For-Performance | IN 1 | Record 1 if the participant received training services from a WIOA Title I service provider engaged in a contract with a local board which includes pay-for-performance strategies. Record 0 if the participant did not received services described under the condition described above. | 1 = Yes 0 = No | | | R | R | R | R | | | | | | | | | | | | | R |
| 931 | Apprenticeship Program | IN1 | Record 1 if the participant entered into a Registered Apprenticeship Program (RAP) or if the participant was a registered apprentice at the time of program entry. Record 2 if the participant entered into an Industry-Recognized Apprenticeship Program (IRAP) or if the participant was participating in an Industry-Recognized Apprenticeship at the time of program entry. Record 3 if the participant entered into an apprenticeship program that is neither a RAP or an IRAP. Record 4 if the participant did not enter an apprenticeship during program participation or was not participating in any apprenticeship program at the time of program entry. | 1 = RAP 2 = IRAP 3 = Other 4 = None | | R | R | R | R | R | | R | | R | R | | R | R | | | | R | R |
| 932 | National Dislocated Worker Grants (DWG) | IN 1 | Record 1 if the participant received services under WIOA Title I-D, Section 170. Record 2 if the individual has demonstrated an intent to use program services and meets one of the following criteria— (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive any services under the condition described above. Record 9 if grantee is unable to track enrollment in the program. | 1 = Yes, NDWG Participant 2 = Reportable Individual 0 = No 9 = Unknown | | R | R | R | R | R | R | | | | | | R | | | | | | R |
| 933 | Date of First DWG Service | DT 8 | Record the date on which the participant began receiving his/her first service funded by the DWG program following a determination of eligibility to participate in the program. Leave blank if the participant did not receive services funded by the DWG program. | YYYYMMDD | | | | | | R | | | | | | | | | | | | | R |
| 934 | Rapid Response Event Number | AN 13 | Record the 13digit unique number of the event through which rapid response services were provided to the participant. This unique identification number is the same one provided to the state or local area through the USDOL Rapid Response Information Network. Until such time as this system is operational, states are encouraged to voluntarily report this information using the following format XX000000000XX. The first two characters are the state postal code. The next four characters are the Program Year. The next five characters are the event number, numbered sequentially starting at 00001 each program year. The two last character are letter A through Z allowing for multiple service events to be associated with the same larger response event, or AA and AB for the 27th and 28th service events if applicable. For example, the first Rapid Response Event Number in Ohio for Program Year 2016 would be OH201600001A. | XXXXXXXXXXXXX | | | | | R | R | R | | | | | | | | | | | | R |
| 935 | Accountability Exit Status | IN 1 | Record 1 if the participant either disclosed an invalid social security number (SSN) or chose not to disclose a SSN. Record 2 if the participant retired from employment. Record 0 or leave blank if none of the above conditions apply. | 1 = Invalid SSN or failed to disclosed SSN 2 = Retirement 0 or Blank = None of the above conditions apply | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | | | R |
| 936 | Reentry Employment Opportunities (Adult) | AN 14 | Record the 14 character grant number if the participant received services under the Reentry Employment Opportunities (Adult) program. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program. | XXXXXXXXXXXXXX | | R | R | | R | | | R | | R | | | R | | | | | | R |
| 937 | Reentry Employment Opportunities (Youth) | AN 14 | Record the 14 character grant number if the participant received services under the Reentry Employment Opportunities (Youth) program. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program. | XXXXXXXXXXXXXX | | R | R | | R | | | R | | | R | | R | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 938 | H-1B | AN 14 | Record the 14 character grant number if the participant received services under any H-1B funded program. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program. | XXXXXXXXXXXXXX | | R | R | R | | R | | R | | | | | R | R | | | | | R |
| 939 | Individual With A Disability Individualized Education Program Participant | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant currently has an Individualized Education Program/Special Education Services while attending Secondary School. Record 2 if the participant formerly had an Individualized Education Program/Special Education Services while attending Secondary School. Record 0 or leave blank if neither condition applies. An Individualized Education Program (IEP) is a plan used to ensure that students with disabilities eligible to receive special education and related services under the Individuals with Disabilities Education Act receive services tailored to meet their unique needs in the least restrictive environment to prepare them for further education, employment, and independent living. 34 C.F.R. §300.340. To be eligible the student generally must be between ages 3 and 21, have a qualifying disability in one of the following 13 categories that impacts their educational performance and be in need of special education and related services: 1. autism; 2. deaf-blindness; 3. deafness; 4. emotional disturbance; 5. hearing impairment; 6. intellectual disability; 7. multiple disabilities; 8. orthopedic impairment; 9. other health impairment; 10. specific learning disability; 11. speech or language impairment; 12. traumatic brain injury; or 13. visual impairment (including blindness | 1 = Current IEP 2 = Previous IEP 0 or Blank = Neither condition applies | | | R | | R | | | | | R | R | R | | | | | | | R |
| 940 | Individual With A Disability Section 504 Plan | IN 1 | For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has a Section 504 plan. Record 0 if the participant does not meet the condition described above. Leave blank if the condition does not apply to the participant. Section 504, of the Rehabilitation Act, 29 U.S.C. § 794, is a federal law that protects students with disabilities that interfere with their ability to learn or access school programs from discrimination by schools receiving Federal financial assistance. Under Section 503 students are entitled to receive a free and appropriate education comparable to students without disabilities. A Section 504 Plan can be used to get reasonable accommodations for an individual with a disability that falls outside of the 13 disability categories required under IDEA, or who does not need special education and related services. A 504 plan outlines how the individual's specific needs will be met through accommodations, modifications and other services. | 1 = Yes 0 = No Blank = Does not apply | | | R | | R | | | | | | R | | | | | | | | R |
| 941 | National Farmworker Jobs Program (NFJP) | IN 1 | Record 1 if the participant received services that required significant involvement under WIOA Title I-D, Section 167. Record 2 if the individual has demonstrated an intent to use program services and meets one of the following criteria— (A) Individuals who only provide identifying information; or (B) Individuals who only receive related assistance services that do not require significant involvement. Record 0 if the participant did not receive any services under the condition described above. Leave blank if grantee is unable to track enrollment in the program. | 1 = Yes, NFJP Participant 2 = Reportable Individual 0 = No | | | | | | | | R | | | | | | | | | | | R |
| **SECTION C - ONE STOP SERVICES AND ACTIVITIES** | | | | | | | | | | | | | | | | | | | | | | | |
| **SECTION C.01 - GENERAL SERVICES OVERVIEW** | | | | | | | | | | | | | | | | | | | | | | | |
| 1000 | Date of First Basic Career Service (Self-Service/Information-only) | DT 8 | Record the first date a job seeker accessed self-services/information-only services or activities during the reporting period, either in a physical location or remotely via the use of electronic technologies. Self-Service does not uniformly apply to all virtually accessed services. For example, virtually accessed services that provide a level of support beyond independent job or information seeking on the part of the reportable individual would not qualify as self-service. Information-only activities or services may be either self-service or staff assisted. Leave blank if the reportable individual/participant accessed no self-services/information-only basic career services. | YYYYMMDD | R | R | R | R | R | R | R | R | | R | R | | R | | | | | | R |
| 1001 | Date of First Basic Career Service (Staff-Assisted) | DT 8 | Record the first date the participant received any staff-assisted basic services (includes any career service under WIOA section 134(c)(2)(A)(i)-(xi) that is not provided via self-service or information-only services and activities)". Leave blank if the participant did not receive a staff-assisted basic career service. | YYYYMMDD | | R | R | R | | R | R | R | R | R | R | | R | | | | | | R |
| 1002 | Most Recent Date Received Basic Career Services (Self-Service/Information-Only) | DT 8 | Record the most recent date a job seeker accessed self-services/information-only services or activities during the reporting period, either a physical location or remotely via the use of electronic technologies. Self-Service does not uniformly apply to all virtually accessed services; For example, virtual accessed services that provide a level of support above independent job or information seeking on the part of a reportable individual/participant would not qualify as self-service. Information-only activities or services may be either self-service or staff assisted. Leave blank if the reportable individual/participant did not access a self-service/information-only basic career service. | YYYYMMDD | R | R | R | R | R | R | R | R | R | | | | R | | | | | | R |
| 1003 | Most Recent Date Received Basic Career Services (Staff-Assisted) | DT 8 | Record the most recent date on which the participant received any basic career service (includes any career service under WIOA Section 134(c)(2)(A)(i)-(xi) that is not provided via self-service or information services and activities). Leave blank if the participant did not receive a basic career service with significant staff involvement. | YYYYMMDD | | R | R | R | | R | R | | | R | | | R | | | | | | R |
| 1004 | Date of Most Recent Career Service (WIOA) | DT 8 | Record the date on which career services (both basic and individualized) were last received (excluding self-services, information services or activities, or follow-up services). Leave blank if the participant did not receive career services. | YYYYMMDD | | R | R | R | R | R | R | R | R | R | | | R | | | | | | R |
| 1005 | Most Recent Date Received Staff-Assisted Services (DVOP specialist) | DT 8 | Record the most recent date on which the participant received any career service provided by a DVOP specialist. Leave blank if the participant did not receive a service with significant staff involvement or this data element does not apply to the participant. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1006 | Date Referred to Department of Veterans Affairs Vocational Rehabilitation and Employment Program | DT 8 | Record the most recent date on which the participant was referred to the Department of Veterans Affairs Vocational Rehabilitation and Employment Program. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1007 | Date of Most Recent Reportable Individual Contact | DT 8 | Record the most recent date on which the job seeker had reportable individual level contact, including provision of identifying information or enrollment, with one or more applicable programs. | YYYYMMDD | R | R | R | R | R | R | | R | R | | | | | | R | | | R | R |
| **SECTION C.02 - BASIC CAREER SERVICES** | | | | | | | | | | | | | | | | | | | | | | | |
| 1100 | Most Recent Date Accessed Information-Only Activities | DT 8 | Record the most recent date on which the reportable individual/participant accessed information-only services or activities. Information-only services or activities provide readily available information that does not require an assessment by a staff member of the individual's skills, education, or career objectives. Leave blank if the reportable individual/participant did not access information-only activities. | YYYYMMDD | R | R | R | R | | R | | | | | | | R | | | | | | R |
| 1101 | Most Recent Date of Self-Service Activities | DT 8 | Record the most recent date a job seeker accessed self-services during the reporting period, either a physical location or remotely via the use of electronic technologies. Self-Service does not uniformly apply to all virtually accessed services; For example, virtual accessed services that provide a level of support above independent job or information seeking on the part of a reportable individual/participant would not qualify as self-service. Leave blank if the reportable individual/participant did not access a self-service basic career service. | YYYYMMDD | R | R | R | R | | R | | | | | | | R | | | | | | R |
| 1102 | Most Recent Date Received Staff-Assisted Career Guidance Services | DT 8 | Record the most recent date on which the participant received career guidance services with significant staff involvement. Career guidance services include the provision of information (including information on local performance and eligible training providers), materials, suggestions, or advice intended to assist the job seeker in making occupation or career decisions. Leave blank if the participant did not receive a career guidance service. | YYYYMMDD | | R | R | R | | R | | | | R | | | R | | | | | | R |
| 1103 | Most Recent Date Received Workforce Information Services | DT 8 | Record the most recent date that the reportable individual/participant received workforce information services including information on state and local labor market conditions industries, occupations and characteristic of the workforce; area business identified skills needs; employer wage and benefit trends; short and long term industry and occupational projections; worker supply and demand; and job vacancies survey results. Workforce information also includes local employment dynamics information such as workforce availability; business turnover rates; job creation; and job identification of high growth and high demand industries. Leave blank if the reportable individual/participant did not receive a workforce information service. | YYYYMMDD | R | R | R | R | | R | | | | R | | | R | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1104 | Most Recent Date Received Staff-Assisted Job Search Activities | DT 8 | Record the most recent date that the participant was provided job search activities with significant staff involvement, and which are designed to help the participant plan and carry out a successful job hunting strategy. The services include resume preparation assistance, job search workshops, job finding clubs, and development of a job search plan. "Resume Assistance" - Providing instructions on the content and format of resumes and cover letters and providing assistance in the development and production of the same. "Job Search Workshops" - An organized activity that provides instructions on resume writing, application preparation, interviewing skills, and/or job lead development. "Job Finding Clubs" - Have all the elements of a Job Search Workshop, plus a period of structured application where participants attempt to obtain jobs. "Job Search Planning" - Development of a plan (not necessarily a written plan) that includes the necessary steps and timetables to achieve employment in specific occupational, industry, or geographic area. Leave blank if the participant did not receive a job search activity with significant staff involvement. Additional Note: This definition excludes participants who receive workforce information services or attend a TAP employment workshop. Those services will be collected and reported separately. | YYYYMMDD | | R | R | R | | R | | | | R | R | | R | | | | | | R |
| 1105 | Most Recent Date Referred to Employment | DT 8 | Indicate the most recent date that the participant received a referral to employment which included significant staff involvement. A referral to employment is (a) the act of bringing to the attention of an employer a job seeker or group of registered job seekers who are available for a job and (b) the record of such a referral. Leave blank if the participant did not receive a referral to employment. | YYYYMMDD | | R | R | R | | R | | | | R | | | R | | | | | | R |
| 1106 | Most Recent Date Referred to Federal Training | DT 8 | Record the most recent date that the participant was referred to a training program supported by the Federal Government, such as WIOA-funded projects, TAA, Adult Education, Vocational Rehabilitation and Job Corps. Leave blank if the participant did not receive a referral to federal training. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1107 | Most Recent Date Placed in Federal Training | DT 8 | Record the most recent date on which the participant entered any training program supported by the Federal Government, such as WIOA-funded projects, TAA, Adult Education, Vocational Rehabilitation and Job Corps. Leave blank if the participant did not enter any training program supported by the Federal Government. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1108 | Most Recent Date Referred to Federal Job | DT 8 | Record the most recent date that the participant was referred to a job opening filed with a placement office by a department or agency of the Federal Government or other entity under the jurisdiction of the U.S. Office of Personnel Management. For example, a job posting with USAJOBS. Leave blank if the participant did not receive a referral to a Federal job. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1109 | Most Recent Date Referred to Federal Contractor Job | DT 8 | Record the most recent date that the participant who is a disabled veteran, campaign veteran, or recently separated veteran was referred to a job opening listed by an employer identified as a Federal contractor. Leave blank if the participant did not receive a referral to a job opening listed by an employer identified as a Federal contractor. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1110 | Most Recent Date Entered Into Federal Job | DT 8 | Record the most recent date a job seeker entered into a job filed with a placement office by a department or agency or other entity under the jurisdiction of the U.S. Office of Personnel Management. Leave blank if the participant was not placed into a federal job. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1111 | Most Recent Date Entered Into Federal Contractor Job | DT 8 | Record the most recent date a job seeker who is either a special disabled veteran, campaign veteran, or recently separated veteran entered into a Federal Contractor Job. Leave blank if the participant was not placed into a federal contractor job. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1112 | Most Recent Date Received Unemployment Insurance (UI) Claim Assistance | DT 8 | Indicate the most recent date a job seeker was provided meaningful assistance in filing a UI claim. Leave blank if the participant did not receive unemployment insurance claim assistance. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1113 | Most Recent Date Referred to Other Federal/State Assistance | DT 8 | Record the most recent date a job seeker was referred to Other Federal/State Assistance. This may include Supplemental Nutrition Assistance Program (SNAP) benefits, Temporary Assistance for Needy Families (TANF), health insurance assistance, child support assistance, tax preparation support, and any other Federal or State assistance programs. Leave blank if the participant was not referred to Other Federal/State assistance. | YYYYMMDD | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1114 | Referred to Jobs for Veterans State Grants (JVSG) Services | IN 1 | Record 1 if the participant was referred to JVSG services due to significant barrier to employment. Record 2 if the participant was referred to JVSG services due to TSM identified as in need of individualized career services. Record 3 if the participant was referred to JVSG services as wounded, ill, or injured located in a military treatment facility, or his or her caregiver. Record 4 if the participant was referred to JVSG services for reasons other than those listed above. Record 5 if the participant was referred to JVSG due to serving in the military during the Vietnam era of August 1964 to May 1975. Record 0 if the participant was not referred to JVSG services. Leave blank if this data element does not apply to the participant. | 1 = Referred due to significant barrier to employment 2 = Referred due to TSM identified as in need of individualized career services 3 = Referred as wounded, ill, or injured located in a military treatment facility, or his or her caretaker 4 = Other 5 = Vietnam-era veteran 0 = Not Referred | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1115 | Referred to Department of Veterans Affairs (VA) Services | IN 1 | Record 1 if the participant was referred for Vocational Rehabilitation and Employment (VR&E) determinations. Record 2 if the participant was referred to Post-9/11 GI Bill benefits. Record 3 if the participant was referred to Montgomery GI Bill benefits. Record 4 if the participant was referred to both the Post-9/11 GI Bill and to the Montgomery GI Bill. Record 5 for all other referrals for services from the Department of Veteran's Affairs (VA). These include referrals for PTSD and TBI treatment and substance abuse assistance to identify the most common. Leave blank if this data element does not apply to the participant. | 1 = VR&E 2 = Post 9/11 GI Bill 3 = Montgomery GI Bill 4 = Post 9/11 GI Bill and Montgomery GI Bill 5 = All other referrals for VA services | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1116 | Most Recent Date Received Staff-Assisted Basic Career Services (Other) | DT 8 | Record the most recent date on which the participant received basic career services requiring a significant expenditure of staff involvement, if said basic career service is not otherwise recorded in data elements 1102-1115. These additional basic career services may include, but are not limited to, (a) reemployment services; (b) federal bonding program; (c) job development contacts; (d) referrals to educational services; and (e) tax credit eligibility determination. Leave blank if the participant did not receive any other basic career services. | YYYYMMDD | | R | R | R | | R | | | | R | | | R | | | | | | R |
| SECTION C.03 - INDIVIDUALIZED CAREER SERVICES | | | | | | | | | | | | | | | | | | | | | | |
| 1200 | Date of First Individualized Career Service | DT 8 | Record the first date the participant received any individualized career service on or after the date of participation. Individualized Career Services include development of an Individual Employment Plan, Pre-Vocational Services, provision of comprehensive skills and career assessments, internships or work experiences, financial literacy services, English as Second Language Services, or any other service that comprises a significant amount of staff time with an individual participant as described in WIOA sec. 134(c)(2)(xii). Leave blank if the participant did not receive any individualized career service or this data element does not apply to the individual. | YYYYMMDD | | R | R | R | | R | R | R | R | R | R | | R | | | | | | R |
| 1201 | Most Recent Date Received Individualized Career Service | DT 8 | Record the most recent date on which the participant received individualized career services as described in WIOA sec. 134(c)(2)(xii). | YYYYMMDD | | R | R | R | | R | R | R | R | R | | | R | | | | | | R |
| 1202 | Date Individual Employment Plan Created | DT 8 | Record the date on which the participant's Individual Employment Plan (IEP) was created or otherwise established to identify the participant's employment goals, their appropriate achievement objectives, and the appropriate combination of services for the participant to achieve the employment goals. Leave blank if an employment plan was not created for the participant, or if the individual is not a participant. | YYYYMMDD | | R | R | R | | R | R | | R | | | | R | | | | | R | R |
| 1203 | Most Recent Date Received Internship or Work Experience opportunities | DT 8 | Record the most recent date on which the participant received an internship or work experience opportunity directly linked to a career. Leave blank if the participant did not receive an internship or work experience opportunity or this data element does not apply to the participant. | YYYYMMDD | | R | R | R | | R | | | R | | | R | R | R | | | | | R |
| 1205 | Type of Work Experience | IN 1 | If the participant received work experience, record the appropriate code to indicate the type of work experience provided to the participant. Record 1 if the participant participated in summer employment or an internship during the summer months (WIOA Youth). Record 2 if the participant participated in an internship or employment opportunity during the non-summer months or if it extends beyond the summer months. Record 3 if the participant participated in a pre-apprenticeship program. Record 4 if the participant participated in job shadowing. Record 5 if the participant participated in on-the-job training (WIOA Youth). Record 6 if the participant participated in a transitional job, as defined in WIOA Section 134(d)(5). Record 7 if the participant participated in another type of work experience not covered in 1 through 5. Record 0 if the participant did not participate in a work experience. Leave blank if this data element does not apply to the participant. NOTE: Code Value 6 should only be selected when other work experience opportunities are provided that are not captured elsewhere. This code value is also for use with Adult, Dislocated Worker, and Dislocated Worker Grants programs only. NOTE: If employment opportunities not limited to summer months are part of a pre-apprenticeship program, or if on-the-job training for WIOA Youth is part of a pre-apprenticeship program, choose Code 3 for pre-apprenticeship. | 1 = Summer employment/internships during the summer (WIOA Youth) 2 = Employment opportunities, including internships, not limited to summer months 3 = Pre-apprenticeship programs 4 = Job shadowing 5 = On-the-Job Training (WIOA Youth) 6 = Transitional Job (WIOA Adult, Dislocated Worker, and Dislocated Worker Grants) 7 = Other work experience activities 0 = Did Not Participate in these activities | | R | R | R | R | R | | R | R | R | R | R | R | R | R | | | | R |
| 1206 | Date Received Financial Literacy Services | DT 8 | Record the date, at any time during participation in the program, that the participant received any financial literacy services. They may include services that help with creating budgets, initiate checking and savings accounts at banks, applying for and managing loans and credit cards, learning about credit reports and credit scores, and identifies identity theft. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | R | R | R | R | R | | | R | | | | R | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | REQUIREMENTS BY PROGRAM OF PARTICIPATION | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
| 1207 | Date Received English as Second Language Services | DT 8 | Record the date, at any time during participation in the program, that the participant received any English as a second language service or training. ESL services are those services provided to participants whose primary language is not English. These services are designed to increase the English language proficiency of the participant so they can attain training and/or employment success. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | R | R | R | | R | | | | R | | | R | | | | | | R |
| 1210 | Received Pre-Vocational Activities | DT 8 | Record the date at any time during the individual's participant in the program that they received short-term prevocational services, including development of learning skills, communication skills, interviewing skills, punctuality, personal maintenance skills, and professional conduct to prepare individuals for unsubsidized employment or training. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | R | R | R | | R | | R | R | R | R | | R | | | | | | R |
| 1211 | Transitional Jobs | IN 2 | Record 1 if the participant received work experience at a transitional job as described in WIOA Section 134(d)(5). Record 0 if the participant did not receive transitional jobs training as described above. | 1 = Transitional Job 0 = No | | R | R | R | | R | | | | | | | R | | | | | | R |
| 1213 | Most Recent Date Received Individualized Career Service (DVOP) | DT 8 | Record the most date on which the participant received individualized career services (excluding case management) from a DVOP specialist, as described as "intensive services" in Veteran's Program Letter 07-10. This includes the provision of a combination of a) a comprehensive assessment and b) the development of an participant employment plan. Upon receipt of both of these services, the participant can be reported as receiving a single instance of individualized career services. Please note that states should not report provision of adult basic education and literacy activities as part of this specification. Receipt of individualized career services with significant staff involvement also does not require prior participation in "career services." Leave blank if the participant did not receive Individualized Career Services or this data element does not apply to the participant. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1214 | Most Recent Date Received Job Search Activities (DVOP) | DT 8 | Record the most recent date that a participant was provided job search activities which are designed to help the participant plan and carry out a successful job hunting strategy by a DVOP staff person. The services include resume preparation assistance, job search workshops, job finding clubs, and development of a job search plan. Leave blank if the participant did not receive a job search activity or this data element does not apply to the participant. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1215 | Most Recent Date Referred to Employment (DVOP) | DT 8 | Record the most recent date that a participant was referred to employment by a DVOP staff person. A referral to employment is (a) the act of bringing to the attention of an employer a job seeker or group of registered job seekers who are available for a job and (b) the record of such a referral. Leave blank if the participant did not receive a referral to employment or this data element does not apply to the participant. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1216 | Most Recent Date Referred to Federal Training (DVOP) | DT 8 | Record the most recent date that a participant was referred by a DVOP staff person to a training program supported by the Federal Government, such as WIOA-funded projects, TAA, NAFTA, and Job Corps. This definition does include DVA-OJT. Leave blank if the participant did not receive a referral to Federal training or this data element does not apply to the participant. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1217 | Most Recent Date Referred to Federal Job (DVOP) | DT 8 | Record the most recent date that the participant was referred by a DVOP staff person to a job opening filed with a placement office by a department or agency of the Federal government or other entity under the jurisdiction of the U.S. Office of Personnel Management. Leave blank if the participant did not receive a referral to a Federal job or this data element does not apply to the participant. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1218 | Most Recent Date Referred to Federal Contractor Job (DVOP) | DT 8 | Record the most recent date that the participant who is a disabled veteran, campaign veteran, or recently separated veteran was referred by a DVOP staff person to a job opening listed by an employer identified as a Federal contractor. Leave blank if the participant did not receive a referral to a job opening listed by an employer identified as a Federal contractor or this data element does not apply to the participant. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1219 | Most Recent Date Received Other Staff-Assisted Basic Career Services (DVOP) | DT 8 | Record the most recent date on which the individual received other services requiring a significant expenditure of DVOP staff time. These additional career services may include, but are not limited to: (a) reemployment services; (b) federal bonding program; (c) job development contacts; (d) referrals to educational services; and (e) tax credit eligibility determination. Leave blank if the participant did not receive any other career services with significant staff involvement. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1220 | Most Recent Date Received Career Guidance Services (DVOP) | DT 8 | Record the most recent date that a participant received career guidance services, which includes the provision of information, materials, suggestions, or advice by DVOP staff intended to assist the job seeker in making occupation or career decisions. Leave blank if the participant did not receive a career guidance service. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1221 | Most Recent Date Entered Federal Job (DVOP) | DT 8 | Indicate the most recent date a job seeker entered into a job filed with a placement office by a department or agency or other entity under the jurisdiction of the U.S. Office of Personnel Management (DVOP). Leave blank if the participant did not begin a federal job. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |
| 1222 | Most Recent Date Entered Federal Contractor Job (DVOP) | DT 8 | Indicate the most recent date a job seeker who is either a special disabled veteran, campaign veteran, or recently separated veteran entered into a Federal Contractor Job (DVOP). Leave blank if the participant did not begin working in a Federal Contractor Job. | YYYYMMDD | | R | | | | | | | | | | | R | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**REQUIREMENTS BY PROGRAM OF PARTICIPATION[1]**

## SECTION C.04 - TRAINING SERVICES

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (AdA/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1300 | Received Training (WIOA) | IN 1 | Record 1 if the participant received training services as defined by program specific guidance. Record 0 if the participant did not receive training services. | 1 = Yes<br>0 = No | | R | R | R | R | R | R | R | R | R | R | R | R | R | R | | R | R | R |
| 1301 | Eligible Training Provider - Name - Training Service #1 (WIOA) | AN 75 | Enter the name of the eligible training provider where the participant received training.<br><br>Leave blank if this data element does not apply to the participant. | XXXXXXXXXXX | | | R | R | | | R | | | | | | | | | | | | R |
| 1302 | Date Entered Training #1 (WIOA) | DT 8 | Record the date on which the participant's first training service actually began.<br>Leave blank if the participant did not receive a first training service or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1303 | Type of Training Service #1 (WIOA) | IN 2 | Use the appropriate code to indicate the type of approved training being provided to the participant.<br>NOTE: If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09.<br>NOTE: Code 06 should only be utilized when other codes are clearly not appropriate.<br>Record 00 if the participant did not receive a training service.<br>Leave blank if this data element does not apply to the participant. | 01 = On the Job Training (non-WIOA Youth).<br>02 = Skill Upgrading<br>03 = Entrepreneurial Training (non-WIOA Youth)<br>04 = ABE or ESL (contextualized or other) in conjunction with Training<br>05 = Customized Training<br>06 = Occupational Skills Training (non-WIOA Youth)<br>07 = ABE or ESL (contextualized or other) NOT in conjunction with training (funded by Trade Adjustment Assistance only)<br>08 = Prerequisite Training<br>09 = Registered Apprenticeship<br>10 = Youth Occupational Skills Training<br>11 = Other Non-Occupational-Skills Training<br>12 = Job Readiness Training in conjunction with other training<br>00 = No Training Service | | | R | R | R | R | R | R | R | R | R | R | | R | R | | | R | R |
| 1304 | Eligible Training Provider - Program of Study by Potential Outcome | IN 9 | Enter the participant's Program of Study for the Eligible Training Provider.<br>A program of study is synonymous with a "program of training services" as defined at 20 CFR part 680.420. A program of training services is one or more courses or classes, or a structured regimen that provides the services in 20 CFR part 680.200 and leads to:<br>(a) An industry-recognized certificate or certification, a certificate of completion of a registered apprenticeship, a license recognized by the State involved or the Federal Government, an associate or baccalaureate degree, or community college certificate of completion;<br>(b) Consistent with § 680.350, a secondary school diploma or its equivalent;<br>(c) Employment; or<br>(d) Measurable skill gains toward a credential described in paragraph (a) or (b) of this section or employment.<br>Record all that apply if the program of study can be classified | 1 = A program of study leading to an industry-recognized certificate or certification<br>2 = A program of study leading to a certificate of completion of a registered apprenticeship<br>3 = A program of study leading to a license recognized by the State involved or the Federal Government<br>4 = A program of study leading to an associate degree<br>5 = A program of study leading to a baccalaureate degree<br>6 = A program of study leading to a community college certificate of completion<br>7 = A program of study leading to a secondary school diploma or its equivalent<br>8 = A program of study leading to employment<br>9 = A program of study leading to a measurable skills gain | | | R | R | | | R | | | | | | | | | | | | R |
| 1305 | Eligible Training Provider - CIP Code (WIOA) | IN 6 | A program of study is identified through both the type of program outlined above (e.g. industry-recognized certificate) and the field of study. The taxonomy that will be used to identify fields of study will be the Classification of Instructional Programs (CIP). The CIP code can be found here:<br>https://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55<br><br>This field should represent the 6-digit CIP code, without decimal points. | XXXX | | | R | R | | | R | | | | | | | | | | | | R |
| 1306 | Occupational Skills Training Code #1 | IN 8 | Enter the 8 digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that matches the training participant's employment goal.<br><br>Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits. | 00000000 | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1307 | Training Completed #1 | IN 1 | Record 1 if the participant completed approved training.<br>Record 0 if the participant did not complete training (withdrew).<br>Leave blank if the participant did not receive a first training service or this data element does not apply to the participant. | 1 = Yes<br>0 = No (Withdrew) | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1308 | Date Completed, or Withdrew from, Training #1 | DT 8 | Record the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the participant completed training.<br>Leave blank if the participant did not receive a first training service or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1309 | Date Entered Training #2 | DT 8 | Record the date on which the participant's second training service actually began.<br>Leave blank if the participant did not receive a second training service or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1310 | Type of Training Service #2 (WIOA) | IN 2 | If the participant received a second type of training, record the appropriate code to indicate the type of approved training being provided to the participant.<br>NOTE: If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09.<br>NOTE: Code 06 should only be instances when other codes are clearly not appropriate.<br>Record 00 if the participant did not receive a second training service.<br>Leave blank if this data element does not apply to the participant. | 01 = On the Job Training (non-WIOA Youth)<br>02 = Skill Upgrading<br>03 = Entrepreneurial Training (non-WIOA Youth)<br>04 = ABE or ESL (contextualized or other) in conjunction with Training<br>05 = Customized Training<br>06 = Occupational Skills Training (non-WIOA Youth)<br>07 = ABE or ESL (contextualized or other) NOT in conjunction with training (funded by Trade Adjustment Assistance only)<br>08 = Prerequisite Training<br>09 = Registered Apprenticeship<br>10 = Youth Occupational Skills Training<br>11 = Other Non-Occupational-Skills Training<br>12 = Job Readiness Training in conjunction with other training<br>00 = No Training Service | | | R | R | R | R | R | R | R | R | R | R | | R | R | | | R | R |
| 1311 | Occupational Skills Training Code #2 | IN 8 | Enter the 8 digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that matches the training participant's employment goal.<br><br>Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits. | 00000000 | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1312 | Training Completed #2 | IN 1 | Record 1 if the participant completed approved training.<br>Record 0 if the participant did not complete training (withdrew).<br>Leave blank if the participant did not receive a second training service or this data element does not apply to the participant. | 1 = Yes<br>0 = No (Withdrew) | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1313 | Date Completed, or Withdrew from, Training #2 | DT 8 | Record the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the participant completed training.<br>Leave blank if the participant did not receive a second training service or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1314 | Date Entered Training #3 | DT 8 | Record the date on which the participant's third training service actually began. If the participant received more than 3 training services, record the date on which the participant actually began the last (or most recent) training service.<br>Leave blank if the participant did not receive a third training service or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1315 | Type of Training Service #3 (WIOA) | IN 2 | If the participant received a third type of training, record the appropriate code to indicate the type of approved training being provided to the participant.<br>NOTE: If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09.<br>NOTE: Code 06 should only be utilized when other codes are clearly not appropriate.<br>Record 00 if the participant did not receive a third service.<br>Leave blank if this data element does not apply to the participant.<br>Additional Note: If the participant receives more than three training services, record the last (or most recent) training services received by the participant in this field. | 01 = On the Job Training (non-WIOA Youth)<br>02 = Skill Upgrading<br>03 = Entrepreneurial Training (non-WIOA Youth)<br>04 = ABE or ESL (contextualized or other) in conjunction with Training<br>05 = Customized Training<br>06 = Occupational Skills Training (non-WIOA Youth)<br>07 = ABE or ESL (contextualized or other) NOT in conjunction with training (funded by Trade Adjustment Assistance only)<br>08 = Prerequisite Training<br>09 = Registered Apprenticeship<br>10 = Youth Occupational Skills Training<br>11 = Other Non-Occupational-Skills Training<br>12 = Job Readiness Training in conjunction with other training<br>00 = No Training Service | | | R | R | R | R | R | R | R | R | R | R | | R | R | | | R | R |
| 1316 | Occupational Skills Training Code #3 | IN 8 | Enter the 8 digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that matches the training participant's employment goal.<br><br>Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits. | 00000000 | | | R | R | R | R | R | | R | R | R | R | | R | | | | R | R |
| 1317 | Training Completed #3 | IN 1 | Record 1 if the participant completed approved training.<br>Record 0 if the participant did not complete training (withdrew).<br>Leave blank if the participant did not receive a third training service or this data element does not apply to the participant. | 1 = Yes<br>0 = No (Withdrew) | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |
| 1318 | Date Completed, or Withdrew from, Training #3 | DT 8 | Record the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the participant completed training.<br>Leave blank if the participant did not receive a third training service or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | | | | R | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1319 | Established Individual Training Account (ITA) | IN 1 | Record 1 if any of the individual's services were purchased utilizing an Individual Training Account funded by WIOA Title I. This information can be updated anytime during participation. Record 0 if the individual does not meet the condition described above. Leave blank if this data element does not apply to the participant. | 1 = Yes  0 = No | | | R | R | R | R | | R | | | | R | | | | | | | R |
| 1320 | Pell Grant Recipient | IN 1 | Record 1 if the participant is or has been notified s/he will be receiving a Pell Grant at any time during participation in the program. This information may be updated at any time during participation in the program. Record 0 if the participant does not meet the condition described above. Leave blank if this data element does not apply to the participant or if unavailable. | 1 = Yes  0 = No | | | R | R | R | R | R | R | | | | R | | | | | | R | R |
| 1321 | Waiver from Training Requirement | IN 1 | Use the appropriate code to indicate the reason for which a waiver from the training requirements was issued to the participant. Record 0 if the participant did not receive a training waiver. Leave blank if this data element does not apply to the participant. | 1 = Recall  2 = Marketable Skills  3 = Retirement  4 = Health  5 = Enrollment Unavailable | | | | | | | R | | | | | | | | | | | | R |
| 1322 | Date of Most Recent Case Management and Employment Service | DT 8 | Record the date on which the participant received his or her most recent Case Management and Reemployment Service. Leave blank if this does not apply to the participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1323 | Date Waiver From Training Requirement Issued | DT 8 | Record the date on which the participant received his or her most recent waiver from training. Leave blank if this does not apply to the participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1324 | Current Quarter Training Expenditures | DE 9.2 | Record the dollar amount of training expenditures accrued in the current report quarter for the participant. Leave blank if this does not apply to the participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1325 | Total Training Expenditures | DE 9.2 | Record the dollar amount of training expenditures accrued thus far in participant's training. Accrued expenditures are defined as the sum of actual cash disbursements for direct charges for goods and services; the amount of indirect expenses charged to the award; minus any rebates, refunds, or other credits; plus the total costs of all goods and property received or services performed, whether an invoice has been received or a cash payment has occurred. Accrued expenditures are to be recorded in the reporting quarter in which they occur, regardless of when the related cash receipts and disbursements take place. This item includes: (1) Tuition: facility and training costs, books and laboratory fees, and/or equipment expenses approved by the State agency; (2) Travel allowances (3) Subsistence allowances. Leave blank if this does not apply to the participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1326 | Training Costs-Amount of Overpayment | DE 9.2 | Record the amount of the Training Cost Overpayment. This amount may be updated on a cumulative basis. Leave blank if this does not apply to the participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1327 | Training Costs - Overpayment Waiver | IN 1 | Record 1 if there was a TAA Training overpayment waiver to be recorded in the quarter it is issued and continues through last quarter of reporting. This will include Job Search and Relocation Overpayments. Leave blank if this does not apply to the participant. | 1 = Yes  0 = No | | | | | | | R | | | | | | | | | | | | R |
| 1328 | Training Povided Virtual/Online | IN 1 | Record the mething in which training was delivered to the participant at any time during program participation. Record 1 if the participant received training through virtual/online methods only. Record 2 if the participant received training through a combination of in-person and virtual/online methods. Record 0 if the participant received training through only in-person methods. Leave blank if the participant did not received training at any point during program participation. | 1 = Virtual/Online Yes  2 = Mix of In-person and Virtual/Online  0 = No Virtual/Online, In-person Only | | | R | R | R | R | R | | | | | R | | R | R | | | R | R |
| 1329 | Part Time Training | IN 1 | Record 1 if the participant received part time training. Record 0 if the participant did not receive any services under the condition described above. Leave blank if the individual was not a TAA participant. | 1 = Yes  0 = No | | | | | | | R | | | | | | | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**REQUIREMENTS BY PROGRAM OF PARTICIPATION[1]**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual[a] | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1330 | Adversely Affected Incumbent Worker | IN 1 | Record 1 if the participant received services prior to his or her separation date from qualifying trade affected employment. Record 0 if the participant did not receive any services under the condition described above. Leave blank if this does not apply to the participant. | 1 = Yes<br>0 = No | | | | | | | R | | | | | | | | | | | | R |
| 1331 | Training Leading to an Associate's Degree | IN 1 | Record 1 if the participant is enrolled in training that will lead to an associate's degree. Record 0 if the participant did not receive any services under the condition described above. Leave blank if this does not apply to the participant. | 1 = Yes<br>0 = No | | | | | | | R | | | | | | | R | | | | | R |
| 1332 | Participated in Postsecondary Education During Program Participation (WIOA) | IN 1 | Record 1 if the participant was in a postsecondary education program that leads to a credential or degree from an accredited postsecondary education institution at any point during program participation. Record 0 if the participant was not in a postsecondary education program that leads to a credential or degree from an accredited postsecondary education institution during program participation, which includes if the participant was enrolled in a postsecondary education program that does not lead to a credential or degree from an accredited postsecondary education institution at any point during program participation. Leave blank if the participant was not in a postsecondary education program, as defined in program specific guidance. Note: This data element relates to the credential indicator denominator and those who are recorded as 1 are included in the credential rate denominator. This element is a subset of PIRL 1811. Do not record 1 if the participant was first enrolled in postsecondary education after exiting the program. | 1 = Yes, Participated in Postsecondary Education<br>0 = No, Did Not Participate in Postsecondary Education | | | R | R | R | R | R | R | R | R | R | R | | R | R | | R | R | R |
| 1333 | Received training from program(s) operated by the private sector | IN 1 | Record 1 if the participant received training services from one or more programs operated by the private sector under WIOA sec. 134 (c)(3)(D)(iv). Record 0 if the participant did not receive training services from a program operated by the private sector under WIOA sec. 134 (c)(3)(D)(iv). Leave blank if the participant did not receive training. | 1 = Yes<br>0 = No | | | R | R | R | R | | | | | | | | | | | | | R |

## SECTION C.05 - YOUTH PROGRAM SERVICES/ELEMENTS (Not Captured Elsewhere)

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA DW | WIOA Youth | DWG | TAA | NFJP | INA | REO Adult | REO Youth | YouthBuild | JVSG | H1B | Job Corps | Incumbent Worker | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1401 | Enrolled in Secondary Education Program (WIOA) | IN 1 | Record 1 if the participant was enrolled in a Secondary Education Program at or above the 9th Grade level. A Secondary Education program includes both secondary school and enrollment in a program of study with instruction designed to lead to a high school equivalent credential. Examples may include adult high school credit programs and programs designed to prepare participants to pass recognized high school equivalency exams such as the GED, HiSET, or TASC. Programs of study designed to teach English proficiency skills or literacy skills below the 9th grade equivalent are not considered Secondary Education Programs. States may use this coding value if the participant was either already enrolled in education or training at the time of application to the program OR became enrolled in an education or training program at or above the 9th Grade level at any point while participating in the program. Record 0 if the participant was not enrolled in a secondary education program at or above the 9th grade level. | 1 = Yes<br>0 = No | | | R | R | R | R | R | R | R | R | R | | | R | R | | R | R | R |
| 1402 | Most Recent Date Received Educational Achievement Services | DT 8 | Record the most recent date on which the participant received an educational achievement service. Educational achievement services include, but are not limited to: tutoring, study skills training, instruction, and evidence-based dropout prevention and recovery strategies that lead to completion of the requirements for a secondary school diploma or its recognized equivalent (including a recognized certificate of attendance or similar document for individuals with disabilities) or for a recognized postsecondary credential. Leave blank if the participant did not receive educational achievement services or this data element does not apply to the individual. | YYYYMMDD | | | | | R | | | | | | R | R | R | | | | | | R |
| 1403 | Most Recent Date Received Alternative Secondary School Services | DT 8 | Record the most recent date on which the participant received alternative secondary school services, or dropout recovery services, as appropriate. Leave blank if the participant did not receive alternative secondary school services or dropout recovery services. | YYYYMMDD | | | | | R | | | | | | R | R | R | | | | | | R |
| 1405 | Most Recent Date Received Work Experience Opportunities | DT 8 | Record the most recent date on which the youth participant received work experience opportunities that have as a component academic and occupational education. Work experiences are a planned, structured learning experience that takes place in a workplace for a limited period of time. Work experiences include: summer employment opportunities and other employment opportunities available throughout the school year; pre-apprenticeship programs; internships and job shadowing; and on-the-job training opportunities. Leave blank if the participant did not receive work experience opportunities or this data element does not apply to the participant. | YYYYMMDD | | | | | R | | | | | | R | R | R | | | | | | R |
| 1406 | Date Enrolled in Post Exit Education or Training Program Leading to a Recognized Postsecondary Credential (WIOA) | DT 8 | Record the first date after exit that the participant enrolled in or attended an education or training program that leads to a recognized postsecondary credential after program exit. NOTE: This element only applies to participants who exited secondary education and obtained a secondary school diploma or its equivalency per Sec 116(b)(2)(A)(iii). This data element applies to the Credential Rate indicator. | YYYYMMDD | | | R | R | R | R | R | R | R | | | R | R | R | R | | R | R | R |
| 1407 | Most Recent Date Received Education Offered Concurrently with Workforce Preparation | DT 8 | Record the most recent date on which the participant received education offered concurrently with and in in the same context as workforce preparation activities and training for a specific occupation or occupational cluster. Leave blank if the participant did not receive education offered concurrently with workforce preparation. | YYYYMMDD | | | | | R | | | | | | | R | | | | | | | R |
| 1408 | Most Recent Date Received Leadership Development Opportunities | DT 8 | Record the most recent date on which the participant received services that include, but are not limited to, opportunities that may include community service and peer-centered activities encouraging responsibility and other positive social and civic behaviors, as appropriate. Leave blank if the participant did not receive a leadership development service or this data element does not apply to the participant. | YYYYMMDD | | | | | R | | | | | | R | R | R | | | | | | R |
| 1409 | Most Recent Date Received Supportive Services | DT 8 | Record the most recent date on which the participant received a supportive service (WIOA section 134(d)(2)) which include, but are not limited to, assistance with transportation, child care, dependent care, and housing that are necessary to enable the participant to participate in programs which provide career and training services as defined in WIOA sec. 134(c)(2) and 134(c)(3). Support services for youth participants include; (a) linkages to community services; (b) assistance with transportation; (c) assistance with child care and dependent care; (d) assistance with housing; (e) needs-related payments; (f) assistance with educational testing; (g) reasonable accommodations for youth with disabilities; (h) referrals to healthcare; (i) assistance with uniforms or other appropriate work attire and work-related tools, including such items as eye glasses and protective eye gear; (j) assistance with books, fees, school supplies, and other necessary items for students enrolled in postsecondary education classes; and (k) payments and fees for employment and training-related applications, tests, and certifications. Leave blank if the participant did not receive supportive services or this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | | R | | R | R | R | R | | | | | R |
| 1410 | Most Recent Date Received Adult Mentoring Services | DT 8 | Record the most recent date on which the participant received adult mentoring services. Adult mentoring services may last for at least twelve (12) months and may occur both during and after program participation. Leave blank if the participant did not receive adult mentoring services or this data element does not apply to the participant. | YYYYMMDD | | | | | R | | | | | | R | R | R | | | | | | R |
| 1411 | Most Recent Date Received Comprehensive Guidance/ Counseling Services | DT 8 | Record the most recent date on which the participant received comprehensive guidance and counseling services, which may include drug and alcohol abuse counseling. Leave blank if the participant did not receive comprehensive guidance/counseling services or this data element does not apply to the participant. | YYYYMMDD | | | | | R | | | | | | R | R | R | | | | | | R |
| 1412 | Most Recent Date Received Youth Follow-up Services | DT 8 | Record the most recent date on which the youth participant received follow-up services after exiting the program. Follow-up services for youth participants are described as: (a) Follow-up services are critical services provided following a youth's exit from the program to help ensure the youth is successful in employment and/or postsecondary education and training. Follow-up services may include regular contact with a youth participant's employer, including assistance in addressing work-related problems that arise. (b) Follow-up services for youth may also include the following program elements: (1) Supportive services; (2) Adult mentoring; (3) Financial literacy education; (4) Services that provide labor market and employment information about in-demand industry sectors or occupations available in the local area, such as career awareness, career counseling, and career exploration services; and (5) Activities that help youth prepare for and transition to postsecondary education and training. (c) All youth participants must be offered the opportunity to receive follow-up services that align with their Individual Service Strategies. Furthermore, follow-up services must be provided to all participants for a minimum of 12 months unless the participant declines to receive follow-up services or the participant cannot be located or contacted. Leave blank if the participant did not receive follow-up services or if this data element does not apply to the participant. | YYYYMMDD | | | | | R | | | | | | | R | R | | | | | | R |
| 1413 | Most Recent Date Youth Received Entrepreneurial Skills Training | DT 8 | Record the most recent date on which the participant participated in entrepreneurial skills training. Leave blank if the participant did not participate in entrepreneurial skills training. | YYYYMMDD | | | | | R | | | | | | | R | | | | | | | R |
| 1414 | Most Recent Date Youth Received Services that provide labor market information and employment information | DT 8 | Record the most recent date on which the participant participated in services that provide labor market and employment information about in-demand industry sectors or occupations available in the local area, such as career awareness, career counseling, and career exploration services. Leave blank if the participant did not participate in these services. | YYYYMMDD | | | | | R | | | | | | | R | | | | | | | R |
| 1415 | Most Recent Date Youth Received Postsecondary transition and preparatory activities | DT 8 | Record the most recent date on which a youth participant received activities that helped them to prepare for and transition to postsecondary education and training. Leave blank if the participant did not participate in activities that helped them to prepare for and transition to postsecondary education and training. | YYYYMMDD | | | | | R | | | | | | | R | | | | | | | R |
| 1416 | Date of Completion of Youth Services | DT 8 | Record the date the participant received their last service in the WIOA Youth program other than follow-up services. This element is only required for participants who completed the WIOA Youth program but are co-enrolled in the WIOA Adult program or another partner program that would extend their exit date beyond their completion date in WIOA Youth. Leave blank if this does not apply to the participant. | YYYYMMDD | | | | | R | | | | | | | | | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**SECTION C.06 - OTHER RELATED ASSISTANCE AND SUPPORT SERVICES FOR NON-YOUTH CUSTOMERS**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1500 | Received Needs-Related Payments | IN 1 | Record 1 if the participant received needs related payments (WIOA section 134(d)(3)) for the purpose of enabling the participant to participate in approved training funded under WIOA Title IB. Record 0 if the participant did not receive any needs-related payments as described above. Leave blank if this data element does not apply to the participant. | 1 = Yes 0 = No | | | R | R | | R | R | | | R | R | R | | | | | | | R |
| 1501 | Most Recent Date Received Rapid Response Services | DT 8 | Record the most recent date on which the participant received a rapid response service authorized under WIOA section 134(a)(2)(A). Rapid response encompasses the activities necessary to plan and deliver services to enable dislocated workers to transition to new employment as quickly as possible, following either a permanent closure or mass layoff, or a natural or other disaster resulting in a mass job dislocation. Leave blank if the participant did not receive rapid response services or this data element does not apply to the participant. | YYYYMMDD | | | | R | | R | R | | | | | | | | | R | | | R |
| 1503 | Most Recent Date Received Follow-up Service | DT 8 | Record the most recent date on which the participant received follow-up services, which may include counseling in the workplace. Leave blank if the participant did not receive this service or if it does not apply to this participant. Note that follow-up services do not change the date of exit for performance purposes. | YYYYMMDD | | | R | R | | R | | | | | | | | | | | | | R |
| 1505 | Job Search Allowance-Count (TAA) | IN 2 | Record the total number of job search allowances paid to the participant in the current report quarter. Record a 0 if the participant did not receive a job search allowance in the quarter. Leave blank if the data element does not apply to the participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1506 | Job Search Allowance Current Quarter - Costs (TAA) | DE 9.2 | Record the dollar value of Job Search Allowance expenditures accrued in the current quarter. Leave blank if this data element does not apply to the participant or if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1507 | Job Search Allowance -Total Costs (TAA) | DE 9.2 | Record the cumulative total dollar amount of job search costs expenditures accrued for the participant. This field may be updated for each quarterly submission. Leave blank if this data element does not apply to the participant or if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1508 | Date Relocation Allowance Approved (TAA) | DT 8 | Record the date that the TAA Relocation Allowance was approved Leave blank if the participant did not have a TAA Relocation Allowance approved or this data element does not apply to the participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1509 | Relocation Allowance Current Quarter Costs (TAA) | DE 9.2 | Record the dollar amount of relocation costs expenditures accrued in the current quarter to relocate the participant including any lump sum payments in the quarter. Leave blank if this data element does not apply to the participant or if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1510 | Relocation Allowance -Total Cost (TAA) | DE 9.2 | Record the total dollar amount of relocation costs expenditures accrued to relocate the participant including the lump sum payment. Leave blank if this data element does not apply to the participant or if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1511 | Date Received First Basic TRA payment | DT 8 | Record the date on which the participant received their first Basic TRA payment. Leave blank if the participant did not receive a Basic TRA Payment, or if the individual is not a TAA participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1512 | Weeks Paid This Quarter - Basic TRA | IN 2 | Record the total number of weeks of Basic TRA **paid** in the current quarter. Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1513 | Total Weeks Paid Cumulative Basic TRA | IN 2 | Record the total number of weeks of Basic TRA paid to the individual. Record 0 if this data element does not apply to the participant Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1514 | Amount Paid Current Quarter- TRA Basic | DE 9.2 | Record the dollar amount of Basic TRA expenditures accrued in the current report quarter. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1515 | Total Amount Paid - Basic TRA | DE 9.2 | Record the total dollar amount of Basic TRA expenditures accrued to the individual. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1516 | Date Received First Additional TRA Payment | DT 8 | Record the date on which the participant received their first Additional TRA payment. Leave blank if the participant did not receive a Additional TRA Payment, or if the individual is not a TAA participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1517 | Weeks Paid This Quarter - Additional TRA | IN 2 | Record the total number of weeks of Additional TRA paid in the current quarter. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1518 | Total Weeks Paid Cumulative - Additional TRA | IN 2 | Record the total number of weeks of Additional TRA paid to the individual. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1519 | Amount Paid This Quarter - Additional TRA | DE 9.2 | Record the dollar amount of Additional TRA expenditures accrued in the current report quarter. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1520 | Total Amount Paid - Additional TRA | DE 9.2 | Record the total dollar amount of Additional TRA expenditures accrued to the individual. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1521 | Date Received First Remedial/Prerequisite TRA Payment | DT 8 | Record the date on which the participant received their first Remedial/Prerequisite TRA payment. Leave blank if the participant did not receive a Remedial/ Prerequisite TRA Payment, or if the individual is not a TAA participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1522 | Weeks Paid This Quarter- Remedial/Prerequisite | IN 2 | Record the total number of weeks of Remedial/Prerequisite TRA paid in the current quarter. "0" if this data element does not apply to the participant Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1523 | Total Weeks Paid Cumulative - Remedial/Prerequisite | IN 2 | Record the total number of weeks of Remedial/Prerequisite TRA paid to the individual. "0" if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1524 | Amount Paid This Quarter - Remedial/Prerequisite TRA | DE 9.2 | Record the dollar amount of Remedial/Prerequisite TRA expenditures accrued in the current report quarter. "0" if this data element does not apply to the participant Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1525 | Total Amount Paid - Remedial/Prerequisite TRA | DE 9.2 | Record the total dollar amount of Remedial/Prerequisite TRA expenditures accrued to the individual. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1526 | Date Received First Completion TRA Payment | DT 8 | Record the date on which the participant received their first Completion TRA payment. Leave blank if the participant did not receive a Remedial/Prerequisite TRA Payment, or if the individual is not a TAA participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1527 | Weeks Paid This Quarter - Completion TRA | IN 2 | Record the total number of weeks of Completion TRA paid in the current quarter. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1528 | Total Weeks Paid Cumulative - Completion TRA | IN 2 | Record the total number of weeks of Completion TRA paid to the individual. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1529 | Amount Paid Current Quarter - TRA Completion | DE 9.2 | Record the dollar amount of Completion TRA expenditures accrued in the current report quarter. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1530 | Total Amount Paid - Completion TRA | DE 9.2 | Record the total dollar amount of Completion TRA expenditures accrued to the individual. Record 0 if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1531 | TRA Overpayment | IN 1 | Record 1 if there was an overpayment established under any type of TRA during the course of participation in the quarter in which it is first identified and to continue through last quarter of reporting. Record 0 if there was no TRA overpayment. Leave blank if the individual was not a TAA participant. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |
| 1532 | Amount of TRA Overpayment | DE 9.2 | Record the dollar amount of the TRA overpayment. This amount may be updated on a cumulative basis. Leave blank if the individual was not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1533 | TRA Overpayment Waiver | IN 1 | Record 1 if there was a TRA overpayment waiver to be recorded in the quarter it is issued and to continue through last quarter of reporting "0" if this data element does not apply to the participant. Leave blank if the individual is not a TAA participant. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |
| 1534 | Date Received First A/RTAA Payment | DT 8 | Record the date on which the participant received their first Alternative/Reemployment Trade Adjustment Assistance (A/RTAA) payment. Leave blank if the individual is not a TAA participant. | YYYYMMDD | | | | | | | R | | | | | | | | | | | | R |
| 1535 | Number of A/RTAA Payments Current Quarter | IN 2 | Record the number of A/RTAA payments paid to the participant in the current report quarter. "0" if this data element does not apply to the participant Leave blank if the individual is not a TAA participant. | 00 | | | | | | | R | | | | | | | | | | | | R |
| 1536 | Current Quarter A/RTAA Payments | DE 9.2 | Record the total dollar amount of A/RTAA expenditures accrued to the participant in the report quarter. Leave blank if this data element does not apply to the participant or if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1537 | Number of A/RTAA Payments Total | IN 3 | Record the number of A/RTAA payments made to the participant through the current quarter of participation. This field may be updated for each quarterly submission. Record 0 if there was no TRA overpayment. Leave blank if the individual is not a TAA participant. | 000 | | | | | | | R | | | | | | | | | | | | R |
| 1538 | Total Amount Paid - A/RTAA | DE 9.2 | Record the total dollar amount of A/RTAA expenditures accrued to the individual. Record 0 if there was no TRA overpayment. Leave blank if the individual is not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1539 | Frequency of A/RTAA Payments (TAA) | IN 1 | Record 1 if weekly. Record 2 if every two weeks. Record 3 if monthly. Record 4 if other. Leave blank if the individual was not a TAA participant. | 1 = Weekly 2 = Bi-Weekly 3 = Monthly 4 = Other | | | | | | | R | | | | | | | | | | | | R |
| 1540 | Maximum A/RTAA Benefit Reached | IN 1 | Record 1 if the participant reached their maximum benefit amount prior to their two-year eligibility limitation. Record 0 if the participant did not reach their maximum benefit prior to their two year eligibility limitation. Leave blank if the individual was not a TAA participant. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |
| 1541 | A/RTAA Overpayment | IN 1 | Record 1 if there was an overpayment established under A/RTAA during the course of participation in the quarter in which it is first identified and to continue through last quarter of reporting. Record 0 if there was no A/RTAA Overpayment. Leave blank if the individual was not a TAA participant. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |
| 1542 | Amount of A/RTAA Overpayment | DE 9.2 | Record the amount of the A/RTAA overpayment.  This amount may be updated on a cumulative basis. Record 0 if there was no A/RTAA overpayment for this participant.  Leave blank if the individual was not a TAA participant. | 0000000.00 | | | | | | | R | | | | | | | | | | | | R |
| 1543 | A/RTAA Overpayment Waiver | IN 1 | Record 1 if there was an A/RTAA overpayment waiver to be recorded in the quarter it is issued and to continue through last quarter of reporting. Record 0 if there was not A/RTAA overpayment waiver. Leave blank if the individual was not a TAA participant. | 1 = Yes 0 = No | | | | | | | R | | | | | | | | | | | | R |

## REQUIREMENTS BY PROGRAM OF PARTICIPATION [1]

Program columns (left to right): Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW funded) | SCSEP | Apprenticeship | Demonstration Grants

## SECTION D - PROGRAM OUTCOMES INFORMATION

### SECTION D.01 - EMPLOYMENT AND JOB RETENTION DATA

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE |
|---|---|---|---|---|
| 1600 | Employed in 1st Quarter After Exit Quarter (WIOA) | IN 1 | Record 1 if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). Record 2 if the participant is in a Registered Apprenticeship. Record 3 if the participant is in the military. Record 0 if the participant was not employed in the first quarter after the quarter of exit. Record 9 if the participant has exited but employment information is not yet available. | 1 = Yes<br>2 = Yes, Registered Apprenticeship<br>3 = Yes, Military<br>0 = No<br>9 = Information not yet available |
| 1601 | Type of Employment Match 1st Quarter After Exit Quarter (WIOA) | IN 1 | Use the appropriate code to identify the method used in determining the participant's employment status in the first quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the first quarter after the exit quarter. If the participant is not found in wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the first quarter after the quarter of exit. | 1 = UI Wage Data<br>2 = Federal Employment Records (OPM, USPS)<br>3 = Military Employment Records (DOD)<br>4 = Non UI Verification<br>5 = Information not yet available<br>0 = Not employed |
| 1602 | Employed in 2nd Quarter After Exit Quarter (WIOA) | IN 1 | Record 1 if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). Record 2 if the participant is in a Registered Apprenticeship. Record 3 if the participant is in the military. Record 0 if the participant was not employed in the second quarter after the quarter of exit. Record 9 if the participant has exited but employment information is not yet available. | 1 = Yes<br>2 = Yes, Registered Apprenticeship<br>3 = Yes, Military<br>0 = No<br>9 = Information not yet available |
| 1603 | Type of Employment Match 2nd Quarter After Exit Quarter (WIOA) | IN 1 | Use the appropriate code to identify the method used in determining the participant's employment status in the second quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the second quarter after the exit quarter. If the participant is not found in wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage | 1 = UI Wage Data<br>2 = Federal Employment Records (OPM, USPS)<br>3 = Military Employment Records (DOD)<br>4 = Non UI verification |
| 1604 | Employed in 3rd Quarter After Exit Quarter (WIOA) | IN 1 | Record 1 if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). Record 2 if the participant is in a Registered Apprenticeship. Record 3 if the participant is in the military. Record 0 if the participant was not employed in the third quarter after the quarter of exit. Record 9 if the participant has exited but employment information is not yet available. | 1 = Yes<br>2 = Yes, Registered Apprenticeship<br>3 = Yes, Military<br>0 = No<br>9 = Information not yet available |
| 1605 | Type of Employment Match 3rd Quarter After Exit Quarter (WIOA) | IN 1 | Use the appropriate code to identify the method used in determining the participant's employment status in the third quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the third quarter after the exit quarter. If the participant is not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the third quarter after the quarter of exit. | 1 = UI Wage Data<br>2 = Federal Employment Records (OPM, USPS)<br>3 = Military Employment Records (DOD)<br>4 = Non UI verification<br>5 = Information not yet available<br>0 = Not employed |
| 1606 | Employed in 4th Quarter After Exit Quarter (WIOA) | IN 1 | Record 1 if the participant is in unsubsidized employment (not including Registered Apprenticeship, or the military). Record 2 if the participant is in a Registered Apprenticeship. Record 3 if the participant is in the military. Record 0 if the participant was not employed in the fourth quarter after the quarter of exit. Record 9 if the participant has exited but employment information is not yet available. | 1 = Yes<br>2 = Yes, Registered Apprenticeship<br>3 = Yes, Military<br>0 = No<br>9 = Information not yet available |
| 1607 | Type of Employment Match 4th Quarter After Exit Quarter (WIOA) | IN 1 | Use the appropriate code to identify the method used in determining the participant's employment status in the fourth quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the fourth quarter after the exit quarter. If the participant is not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the fourth quarter after the quarter of exit. | 1 = UI Wage Data<br>2 = Federal Employment Records (OPM, USPS)<br>3 = Military Employment Records (DOD)<br>4 = Non UI verification<br>5 = Information not yet available<br>0 = Not employed |
| 1608 | Employment Related to Training (2nd Quarter After Exit) (WIOA) | IN 1 | Record 1 if the participant received training services and obtained employment directly related to the training services received. Record 0 if the participant received training services and obtained employment, but the employment was not directly related to the training services received. Record 9 if the participant received training services and obtained employment, but it is unknown if the employment was directly related to the training services received. Leave blank if the participant did not receive training or has not exited or the employment information is not yet available. | 1 = Training related to employment<br>0 = Training not related to employment<br>9 = Unknown |
| 1609 | Reemployed by Layoff Employer | IN 1 | Record 1 if the participant was reemployed by the employer (where the qualifying separation took place) at any point from the point of program exit through the 4th quarter after program exit. Record 0 if the participant does not meet the condition described above. Record 9 if not known. Leave blank this data element does not apply to the participant. | 1 = Yes<br>0 = No<br>9 = Unknown |
| 1610 | Occupational Code (if available) | AN 8 | Record the 8-digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that best describes the participant's most recent employment in any quarter after exit. Leave blank if occupational code is not available or not known, or the data element does not apply. Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits. | 00000000 |
| 1611 | Entered Non-Traditional Employment | IN 1 | Record 1 if the participant's employment is in an occupation or field of work for which individuals of the participant's gender comprise less than 25% of the individuals employed in such occupation or field of work. Non-traditional employment can be based on either local or national data, and both males and females can be in non-traditional employment. This information can be based on any job held after exit and only applies to adults, dislocated workers and youth who entered employment in the second quarter after the exit quarter. Record 0 if the participant does not meet the condition described above. Record 9 if not known. | 1 = Yes<br>0 = No<br>9 = Unknown |
| 1612 | Occupational Code of Employment 2nd Quarter After Exit Quarter (if available) | IN 8 | Record the 8-digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that best describes the participant's employment in the 2nd quarter after exit quarter. Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits. | 00000000 |
| 1613 | Occupational Code of Employment 4th Quarter After Exit Quarter (if available) | IN 8 | Record the 8-digit O*NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that best describes the participant's employment in the 4th quarter after the exit quarter. Note: If all 8 digits of the O*NET occupational code are not collected, record at least the first 6 digits. | 00000000 |
| 1614 | Industry Code of Employment 1st Quarter After Exit Quarter | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 1st Quarter After the Exit Quarter' exist and NAICS Code is not known. Leave blank if this data element does not apply to the person or wages are not yet available. | 000000 |
| 1615 | Industry Code of Employment 2nd Quarter After Exit Quarter | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 2nd Quarter After the Exit Quarter' exist and NAICS Code is not known. Leave blank if this data element does not apply to the person or wages are not yet available. | 000000 |
| 1616 | Industry Code of Employment 3rd Quarter After Exit Quarter | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 3rd Quarter After the Exit Quarter' exist and NAICS Code is not known. Leave blank if this data element does not apply to the person or wages are not yet available | 000000 |
| 1617 | Industry Code of Employment 4th Quarter After Exit Quarter | IN 6 | Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Enter 999999 if 'Wages 4th Quarter After the Exit Quarter' exist and NAICS Code is not known. Leave blank if this data element does not apply to the person or wages are not yet available. | 000000 |
| 1618 | Retention with the same employer in the 2nd Quarter and the 4th Quarter (WIOA) | IN 1 | Record 1 if the participant's employer in the second quarter also matches the employer in the fourth quarter. Record 0 if the participant is not employed in the second or fourth quarters after exit, or the employer in the second quarter does not match the employer in the fourth quarter | 1 = Yes<br>0 = No |

### SECTION D.02 - WAGE RECORD DATA

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE |
|---|---|---|---|---|
| 1700 | Earnings 3rd Quarter Prior to Participation Quarter | DE 8.2 | Record total earnings from wage records for the third quarter prior to the quarter of participation. Leave blank if data element does not apply to the participant. | 000000.00 |
| 1701 | Earnings 2nd Quarter Prior to Participation Quarter | DE 8.2 | Record total earnings from wage records for the second quarter prior to the quarter of participation. Leave blank if data element does not apply to the participant. | 000000.00 |
| 1702 | Earnings 1st Quarter Prior to Participation Quarter | DE 8.2 | Record total earnings from wage records for the first quarter prior to the quarter of participation. Leave blank if data element does not apply to the participant. | 000000.00 |
| 1703 | Earnings 1st Quarter After Exit Quarter (WIOA) | DE-9.2 | Record total earnings for the first quarter after the quarter of exit. Record 9999999.99 if data is are not yet available for this item. Leave blank if data element does not apply to the participant. | 0000000.00 |
| 1704 | Earnings 2nd Quarter After Exit Quarter (WIOA) | DE-9.2 | Record total earnings for the second quarter after the quarter of exit. Record 9999999.99 if data is not yet available for this item. Leave blank if data element does not apply to the participant. | 0000000.00 |
| 1705 | Earnings 3rd Quarter After Exit Quarter (WIOA) | DE-9.2 | Record total earnings for the third quarter after the quarter of exit. Record 9999999.99 if data is not yet available for this item. Leave blank if data element does not apply to the participant | 0000000.00 |
| 1706 | Earnings 4th Quarter After Exit Quarter (WIOA) | DE-9.2 | Record total earnings for the fourth quarter after the quarter of exit. Record 9999999.99 if data is not yet available for this item. Leave blank if data element does not apply to the participant. | 0000000.00 |

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **SECTION D.03 - EDUCATION AND CREDENTIAL DATA** | | | | | | | | | | | | | | | | | | | | | | | |
| 1800 | Type of Recognized Credential (WIOA) | IN 1 | Use the appropriate code to record the type of recognized diploma, degree, or a credential consisting of an industry-recognized certificate or certification, a certificate of completion of a Registered Apprenticeship, a license recognized by the State involved or Federal Government, or an associate or baccalaureate degree attained by the participant who received education or training services. Record 0 if the participant received education or training services, but did not attain a recognized diploma, degree, license or certificate. Leave blank if data element does not apply to the participant. NOTE: Diplomas, degrees, licenses or certificates must be attained either during participation or within one year of exit. This data element applies to both the Credential Rate indicator and the Measurable Skills Gain indicator for all programs. | 1 = Secondary School Diploma/or equivalency 2 = AA or AS Diploma/Degree 3 = BA or BS Diploma/Degree 4 = Occupational Licensure 5 = Occupational Certificate 6 = Occupational Certification 7 = Other Recognized Diploma, Degree, or Certificate 0 = No recognized credential | | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R |
| 1801 | Date Attained Recognized Credential (WIOA) | DT 8 | Record the date on which the participant attained a recognized credential. Leave blank if the participant did not attain a degree or certificate. | YYYYMMDD | | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R | R |
| 1802 | Type of Recognized Credential #2 (WIOA) | IN 1 | Use the appropriate code to record the type of recognized diploma, degree, or a credential consisting of an industry-recognized certificate or certification, a certificate of completion of a Registered Apprenticeship, a license recognized by the State involved or Federal Government, or an associate or baccalaureate degree attained by the participant who received education or training services. Record 0 if the participant received education or training services, but did not attain a recognized diploma, degree, license or certificate. Leave blank if data element does not apply to the participant. NOTE: Diplomas, degrees, licenses or certificates must be attained either during participation or within one year of exit. This data element applies to both the Credential Rate indicator and the Measurable Skills Gain indicator for all DOL programs. | 1 = Secondary School Diploma/or equivalency 2 = AA or AS Diploma/Degree 3 = BA or BS Diploma/Degree 4 = Occupational Licensure 5 = Occupational Certificate 6 = Occupational Certification 7 = Other Recognized Diploma, Degree, or Certificate 0 = No recognized credential | | | R | R | R | R | R | R | R | R | R | R | | | R | R | | R | R | R |
| 1803 | Date Attained Recognized Credential #2 (WIOA) | DT 8 | Record the date on which the participant attained a second recognized credential. Leave blank if the participant did not attain a second recognized credential, or if this data element does not apply. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | | R | R | | R | R | R |
| 1804 | Type of Recognized Credential #3 (WIOA) | IN 1 | Use the appropriate code to record the type of recognized diploma, degree, or a credential consisting of an industry-recognized certificate or certification, a certificate of completion of a Registered Apprenticeship, a license recognized by the State involved or Federal Government, or an associate or baccalaureate degree attained by the participant who received education or training services. Record 0 if the participant received education or training services, but did not attain a recognized diploma, degree, license or certificate. Leave blank if data element does not apply to the participant. NOTE: Diplomas, degrees, licenses or certificates must be attained either during participation or within one year of exit. This data element applies to both the Credential Rate indicator and the Measurable Skills Gain indicator for all DOL programs. | 1 = Secondary School Diploma/or equivalency 2 = AA or AS Diploma/Degree 3 = BA or BS Diploma/Degree 4 = Occupational Licensure 5 = Occupational Certificate 6 = Occupational Certification 7 = Other Recognized Diploma, Degree, or Certificate 0 = No recognized credential | | | R | R | R | R | R | | R | R | R | R | | | R | R | | R | R | R |
| 1805 | Date Attained Recognized Credential #3 (WIOA) | DT 8 | Record the date on which the participant attained a third recognized credential. Leave blank if the participant did not attain a third recognized credential, or if this data element does not apply. | YYYYMMDD | | | R | R | R | R | R | | R | R | R | R | | | R | R | | R | R | R |
| 1806 | Date of Most Recent Measurable Skill Gains: Educational Functioning Level (EFL) (WIOA) | DT 8 | Record the most recent date the participant who received instruction below the postsecondary education level achieved at least one EFL. EFL gain may be documented in one of three ways: 1) by comparing a participant's initial EFL as measured by a pre-test with the participant's EFL as measured by a participant's post-test; or 2) for States that offer secondary school programs that lead to a secondary school diploma or its recognized equivalent, an EFL gain may be measured through the awarding of credits or Carnegie units: or 3) States may report an EFL gain for participants who exit the program and enroll in postsecondary education or training during the program year. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | | R | R | R | R | R | R |
| 1807 | Date of Most Recent Measurable Skill Gains: Postsecondary Transcript/Report Card (WIOA) | DT 8 | Record the most recent date of the participant's transcript or report card for postsecondary education who complete a minimum of 12 hours per semester, or for part time students a total of at least 12 credit hours over the course of two completed semesters during the same 12 month period, that shows a participant is meeting the State unit's academic standards. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | | R | R | | | R | R |
| 1808 | Date of Most Recent Measurable Skill Gains: Secondary Transcript/Report Card (WIOA) | DT 8 | Record the most recent date of the participant's transcript or report card for secondary education for one semester showing that the participant is meeting the State unit's academic standards. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | | R | R | R | R | R | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1809 | Date of Most Recent Measurable Skill Gains: Training Milestone (WIOA) | DT 8 | Record the most recent date that the participant had a satisfactory or better progress report towards established milestones from an employer/training provider who is providing training (e.g., completion of on-the-job training (OJT), completion of one year of a registered apprenticeship program, etc.). Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | R | R | | | R | R |
| 1810 | Date of Most Recent Measurable Skill Gains: Skills Progression (WIOA) | DT 8 | Record the most recent date the participant successfully completed an exam that is required for a particular occupation, or progress in attaining technical or occupational skills as evidenced by trade-related benchmarks such as knowledge-based exams. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | R | R | | | R | R |
| 1811 | Date Enrolled During Program Participation in an Education or Training Program Leading to a Recognized Credential or Employment | DT 8 | Record the date the participant was enrolled during program participation in an education or training program that either 1) leads to a recognized credential, including a secondary education program; or 2) a training program that leads to employment; as defined by the core program in which the participant participates. States may use this coding value if the participant was either already enrolled in education or training at the time of program entry or became enrolled in education or training at any point while participating in the program. If the participant was enrolled in postsecondary education at program entry, the date in this field should be the date of Program Entry. This includes, but is not limited to, participation in Job Corps, YouthBuild, a Registered Apprenticeship program, Adult Education or secondary education programs. Leave blank if the data element does not apply to the participant. NOTE: This data element applies to the Measurable Skill Gains Indicator, and specifically will be utilized to calculate the denominator. It encompasses all education and training program enrollment. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | R | R | R | R | R | R |
| 1812 | School Status at Exit | IN 1 | Record 1 if the participant has not received a secondary school diploma or its recognized equivalent and is attending any secondary school (including elementary, intermediate, junior high school, whether full or part-time), or is between school terms and intends to return to school. Record 2 if the participant has not received a secondary school diploma or its recognized equivalent and is attending an alternative secondary school or an alternative course of study approved by the local educational agency whether full or part-time. Record 3 if the participant has received a secondary school diploma or its recognized equivalent and is attending a postsecondary school or program (whether full or part-time), or is between school terms and intends to return to school. Record 4 if the participant is no longer attending any school and has not received a secondary school diploma or its recognized equivalent. Record 5 if the participant is not attending any school and has either graduated from secondary school or holds an equivalency. Record 6 if the participant is within the age of compulsory school attendance, but has not attended school for at least the most recent complete school year calendar quarter and has not received a secondary school diploma or its recognized equivalent. Leave blank if data element does not apply to the participant. | 1 = In-school, secondary school or less 2 = In-school, Alternative school 3 = In-school, Postsecondary school. 4 = Not attending school or Secondary School Dropout 5 = Not attending school; secondary school graduate or has a recognized equivalent 6 = Not attending school; within age of compulsory school attendance | | | | | R | | | R | R | | R | | | | | | | | | R |
| 1813 | Date Completed During Program Participation an Education or Training Program Leading to a Recognized Credential or Employment | DT 8 | Record the date the participant completes, during program participation, either 1) an education or training program that leads to a recognized credential, including a secondary education program; or 2) training program that leads to employment; as defined by the core program in which the participant participates. States may use this coding value if the participant was either already enrolled in education or training at the time of program entry or became enrolled in education or training at any point while participating in the program. If the participant was enrolled in postsecondary education at program entry, the date in this field should be after the date of Program Entry. This includes, but is not limited to, participation in Job Corps, Youthbuild, a Registered Apprenticeship program, Adult Education or secondary education programs. Leave blank if the data element does not apply to the participant. NOTE: This data element applies to the Measurable Skill Gains Indicator, and specifically will be utilized to calculate the denominator. It encompasses all education and training program enrollment. | YYYYMMDD | | | R | R | R | R | R | R | R | R | R | R | | R | R | R | R | R | R | R |
| 1814 | Date Attained Graduate/Post Graduate Degree (WIOA) | DT 8 | Record the date a participant attained a masters' degree after receiving education or training services. Leave blank if data element does not apply to the participant. NOTE: Diplomas, degrees, licenses or certificates must be attained either during participation or within one year of exit. This data element applies to the Credential Rate for RSA programs. | YYYYMMDD | | R | R | R | | R | R | | | | R | R | R | | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**SECTION D.04 - ADDITIONAL OUTCOME DATA**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1900 | Youth 2nd Quarter Placement (Title I) (WIOA) | IN 1 | Record 1 if the participant is enrolled in occupational skills training (including advanced training). Record 2 if the participant is enrolled in postsecondary education. Record 3 if the participant is enrolled in secondary education. Record 0 if the participant was not placed in any of the above conditions. | 1 = Occupational Skills Training 2 = Postsecondary Education 3 = Secondary Education 0 = No placement | | | | | R | | | R | | | R | R | | | | R | | | R | R |
| 1901 | Youth 4th Quarter Placement (Title I) (WIOA) | IN 1 | Record 1 if the participant is enrolled in occupational skills training (including advanced training). Record 2 if the participant is enrolled in postsecondary education. Record 3 if the participant is enrolled in secondary education. Record 0 if the participant was not placed in any of the above conditions. | 1 = Occupational Skills Training 2 = Postsecondary Education 3 = Secondary Education 0 = No placement | | | | | R | | | R | | | R | R | | | | R | | | R | R |
| 1902 | Category of Assessment #1 | IN 1 | Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE) English Language Arts (ELA). Record 2 if the participant was assessed using approved tests for ABE Mathematics. Record 3 if the participant was assessed using approved tests for English-As-A-Second Language (ESL). Record 0 if the participant was not assessed. Leave blank if this data element does not apply to the participant. | 1 = ABE ELA 2 = ABE Math 3 = ESL 0 = Not assessed | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1903 | Date of Pre-Test Score #1 | DT 8 | Record the date that the participant took the pre-assessment test. Leave blank if the participant did not take a pre-assessment test. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | YYYYMMDD | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1904 | Pre-Test Score #1 | IN 3 | Record the raw scale score achieved by the participant on the pre-assessment test. Leave blank if the participant was not assessed in literacy or numeracy or if this data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 000 | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1905 | Educational Functioning Level Pre-Test #1 | IN 2 | Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6 | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1906 | Date of Most Recent Post-Test Score #1 | DT 8 | Record the date on which the post-test was administered to the participant during his/her first year of participation in the program. If multiple post-tests were administered, record the most recent date on which the functional area post-test was administered. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | YYYYMMDD | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1907 | Post-Test Score #1 | IN 3 | Record the raw scale score achieved by the participant. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 000 | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1908 | Educational Functioning Level Post-Test #1 | IN 2 | Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6 | | | | | | | | R | | R | R | R | | | | R | | | | R |
| 1909 | Category of Assessment #2 | IN 1 | Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE) English Language Arts (ELA). Record 2 if the participant was assessed using approved tests for ABE Mathematics. Record 3 if the participant was assessed using approved tests for English-As-A-Second Language (ESL). Record 0 if the participant was not assessed. Leave blank if this data element does not apply to the participant. | 1 = ABE ELA 2 = ABE Math 3 = ESL 0 = Not assessed | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1910 | Date of Pre-Test Score #2 | DT 8 | Record the date that the participant took the pre-assessment test. Leave blank if the participant did not take a pre-assessment test. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | YYYYMMDD | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1911 | Pre-Test Score #2 | IN 3 | Record the raw scale score achieved by the participant on the pre-assessment test. Leave blank if the participant was not assessed in literacy or numeracy or if this data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 000 | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1912 | Educational Functioning Level Pre-Test #2 | IN 2 | Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6 | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1913 | Date of Most Recent Post-Test Score #2 | DT 8 | Record the date on which the post-test was administered to the participant. If multiple post-tests were administered, record the most recent date on which the functional area post-test was administered. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | YYYYMMDD | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1914 | Post-Test Score #2 | IN 3 | Record the raw scale score achieved by the participant. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 000 | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1915 | Educational Functioning Level Post-Test #2 | IN 2 | Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6 | | | | | | | | | | R | R | R | | | | R | | | | R |
| 1916 | Category of Assessment #3 | IN 1 | Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE) English Language Arts (ELA). Record 2 if the participant was assessed using approved tests for ABE Mathematics. Record 3 if the participant was assessed using approved tests for English-As-A-Second Language (ESL). Record 0 if the participant was not assessed. Leave blank if this data element does not apply to the participant. | 1 = ABE ELA 2 = ABE Math 3 = ESL 0 = Not assessed | | | | | | | | | | R | R | R | | | | R | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (AdA/DW funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1917 | Date of Pre-Test Score #3 | DT 8 | Record the date that the participant took the pre-assessment test. Leave blank if the participant did not take a pre-assessment test. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | YYYYMMDD | | | | | | | | | | R | R | R | | | R | | | | R |
| 1918 | Pre-Test Score #3 | IN 3 | Record the raw scale score achieved by the participant on the pre-assessment test. Leave blank if the participant was not assessed in literacy or numeracy or if this data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 000 | | | | | | | | | | R | R | R | | | R | | | | R |
| 1919 | Educational Functioning Level Pre-Test #3 | IN 2 | Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6 | | | | | | | | | | R | R | R | | | R | | | | R |
| 1920 | Date of Most Recent Post-Test Score #3 | DT 8 | Record the date on which the post-test was administered to the participant. If multiple post-tests were administered, record the most recent date on which the functional area post-test was administered. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | YYYYMMDD | | | | | | | | | | R | R | R | | | R | | | | R |
| 1921 | Post-Test Score #3 | IN 3 | Record the raw scale score achieved by the participant. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 000 | | | | | | | | | | R | R | R | | | R | | | | R |
| 1922 | Educational Functioning Level Post-Test #3 | IN 2 | Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain. | 0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6 | | | | | | | | | | R | R | R | | | R | | | | R |

**SECTION E - NEW DATA ELEMENTS** *(Data Elements are Specific to Each Program, As Listed)*

**SECTION E.01 - DISLOCATED WORKER GRANTS**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | NFJP | INA | REO (Adult) | REO (Youth) | YouthBuild | JVSG | H1B | Job Corps | Incumbent Worker | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2001 | Date of Completion of DWG Services | DT 8 | Record the date the participant received their last service in the DWG program. | YYYYMMDD | | | | | | R | | | | | | | | | | | | | R |
| 2002 | Employed at Completion of DWG Services | IN 1 | Record 1 if the participant is employed at completion of participation in services under a Dislocated Worker Grant (DWG). Employment is counted the quarter in which the participant stops receiving services funded through a DWG project. Record 0 if the participant does not meet the condition described above. | 1 = Yes 0 = No | | | | | | R | | | | | | | | | | | | | R |
| 2003 | DWG Grant Number | AN 7 | Record the first 7 characters of the grant number if the participant received services under the National Dislocated Worker Grant (DWG) program. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program, followed by numeric characters (XXXXXXX). Leave blank if the participant did not receive services funded by this program. NOTE: If the participant received services funded by more than one DWG, report the additional grant number under PIRL 105 Special Project ID in the same format (first 7 characters of the grant number). PIRL 105 may only be used for DWG if there is already a grant number entered in PIRL 2003 | XXXXXXX | | | | | | R | | | | | | | | | | | | | R |
| 2004 | Received Services through a Disaster Recovery Dislocated Worker Grant | IN 1 | Record 1 if the participant received disaster relief employment only and received no other services. Record 2 if the participant received disaster relief employment and received Employment and Training services (Career and Training services). Record 3 if the participant received Employment and Training services (Career and Training services) only, and did not receive disaster relief employment. Record 0 if the participant did not receive services under a Disaster Recovery DWG. | 1 = Disaster Relief Employment Only 2 = Disaster Relief Employment and Employment and Training Services 3 = Employment and Training Services Only 0 = No | | | | | | R | | | | | | | | | | | | | R |

**SECTION E.02 - H1B**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | DWG | TAA | NFJP | INA | REO (Adult) | REO (Youth) | YouthBuild | JVSG | H1B | Job Corps | Incumbent Worker | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2101 | Underemployed Worker | IN 1 | Record 1 if a person is not currently connected to a full-time job commensurate with the individual's level of education, skills, or wage and/or salary earned previously, or who have obtained only episodic, short-term, or part-time employment Record 0 if the participant does not meet any of the conditions described above. Leave blank if information is not available. | 1 = Yes 0 = No | | | | | | | | | | | | | | R | | | | | R |
| 2102 | Previous Quarter Received Case Management Service | IN 1 | Record 1 if the participant received Case Management Services in the previous quarter. Record 0 if the participant did not receive Case Management Services in the previous quarter. | 1 = Yes 0 = No | | | | | | | | | | | | | | | | | | | |
| 2103 | Most Recent Date Received Assessment Services | DT 8 | Record the most recent date on which the participant received assessment services funded by the program. Leave blank if the participant did not receive Assessment Services. | YYYYMMDD | | | | | | | | | | | | | | R | | | | R | R |
| 2104 | Previous Quarter Received Assessment Services | IN 1 | Record 1 if the participant received Assessment Services in the previous quarter. Record 0 if the participant did not receive Assessment Services in the previous quarter. | 1 = Yes 0 = No | | | | | | | | | | | | | | | | | | | |
| 2105 | Previous Quarter Received Supportive Services | IN 1 | Record 1 if the participant received Supportive Services in the previous quarter. Record 0 if the participant did not receive Supportive Services in the previous quarter. | 1 = Yes 0 = No | | | | | | | | | | | | | | | | | | | |
| 2106 | Most Recent Date Received Specialized Participant Services | DT 8 | Record the most recent date on which the participant received specialized participant services which include, but are not limited to, financial counseling, behavioral health counseling, mentoring, assistance with re-location, job coaching, networking, and job search assistance. Leave blank if the participant did not receive Specialized Participant Services. | YYYYMMDD | | | | | | | | | | | | | | R | | | | | R |
| 2107 | Previous Quarter Received Specialized Services | IN 1 | Record 1 if the participant received Specialized Services in the previous quarter. Record 0 if the participant did not receive Specialized Services in the previous quarter. | 1 = Yes 0 = No | | | | | | | | | | | | | | | | | | | |
| 2108 | Previous Quarter Participated in Work Experience | IN 1 | Record 1 if the participant participated in Work Experience in the previous quarter. Record 0 if the participant did not participate in Work Experience in the previous quarter. | 1 = Yes 0 = No | | | | | | | | | | | | | | | | | | | |
| 2109 | Primary Type of Training Service for Training Activity #1 | IN 1 | Use the appropriate code to indicate the primary type of training being provided to the participant. Leave blank if the participant did not enroll in training for Primary Type of Training Service for Training Activity #1. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | | | | | | | | | | | | | | R | | | | | R |
| 2110 | Secondary Type of Training Service for Training Activity #1 | IN 1 | Use the appropriate code to indicate the secondary type of training being provided to the participant, if applicable. Leave blank if the participant is not enrolled in a Secondary Type of Training Service for Training Activity #1. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | | | | | | | | | | | | | | R | | | | | R |
| 2111 | Tertiary Type of Training Service for Training Activity #1 | IN 1 | Use the appropriate code to indicate the tertiary type of training being provided to the participant, if applicable. Leave blank if the participant is not enrolled in a Tertiary Type of Training Service for Training Activity #1. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | | | | | | | | | | | | | | R | | | | | R |
| 2112 | Primary Type of Training Service for Training Activity #2 | IN 1 | Use the appropriate code to indicate the primary type of training being provided to the participant during their second training service. Leave blank if the participant is not enrolled in a Primary Type of Training Service for Training Activity #2. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | | | | | | | | | | | | | | R | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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**REQUIREMENTS BY PROGRAM OF PARTICIPATION[1]**

Column headers: Reportable Individual[a] | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | H1B | Demonstration Grants |
|---|---|---|---|---|---|---|
| 2113 | Secondary Type of Training Service for Training Activity #2 | IN 1 | Use the appropriate code to indicate the secondary type of training being provided to the participant during their second training service, if applicable. Leave blank if the participant is not enrolled in a Secondary Type of Education/Job Training Activity #2. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | R | R |
| 2114 | Tertiary Type of Training Service for Training Activity #2 | IN 1 | Use the appropriate code to indicate the tertiary type of training being provided to the participant during their second training service, if applicable. Record 0 if the above condition does not apply to the participant. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | R | R |
| 2115 | Primary Type of Training Service for Training Activity #3 | IN 1 | Use the appropriate code to indicate the primary type of training being provided to the participant during their third training service. Leave blank if the participant is not enrolled in a Primary Type of Training Service for Training Activity #3. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | R | R |
| 2116 | Secondary Type of Training Service for Training Activity #3 | IN 1 | Use the appropriate code to indicate the secondary type of training being provided to the participant during their third training service, if applicable. Leave blank if the participant is not enrolled in a Secondary Type of Training Service for Training Activity #3. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | R | R |
| 2117 | Tertiary Type of Training Service for Training Activity #3 | IN 1 | Use the appropriate code to indicate the tertiary type of training being provided to the participant during their third training service, if applicable. Leave blank if the participant is not enrolled in a Tertiary Type of Training Service for Training Activity #3. | 1 = On-the-Job Training 2 = Classroom Occupational Training 3 = Contextualized Learning 4 = Distance Learning 5 = Customized Learning 6 = Incumbent Worker Training 7 = Other Occupational Skills Training 0 = No training | R | R |
| 2118 | Date Entered Employment (Discretionary Grants) | DT 8 | Record the date of employment (when the participant first began a job). This data element captures employment outcomes for unemployed participants that found employment, and underemployed participants that entered a new position of employment. Leave blank if the participant has not received a job. | YYYYMMDD | R | R |
| 2119 | Incumbent Workers Retained Current Position | IN 1 | Record 1 if the participant was employed at the start of participation (incumbent worker) and retained their current position in the first quarter after program completion. Record 0 if the participant was employed at the start of participation (incumbent worker) and did not retain their current position in the first quarter after program completion. Record 9 if information on the participant's employment status in the first quarter after program completion is not yet available. Leave blank if the participant has not completed the training program or is not an incumbent worker. | 1 = Yes 0 = No 9 = Information not yet available | R | R |
| 2120 | Incumbent Workers Advanced into a New Position with Current or New Employer in the 1st Quarter after Completion | IN 1 | Record 1 if the participant was employed at the start of participation (incumbent worker) and advanced into a new position requiring a higher skill level either with their current employer or a new employer, as a result of grant funded activities in the first quarter after training program completion. Record 0 if the participant was employed at the start of program participation (incumbent worker) and did not advance into a new position as a result of the grant-funded activities, in the first quarter after training program completion. Record 9 if information on the participant's employment status in the first quarter after training program completion is not yet available. Leave blank if the participant has not completed the training program or is not an incumbent worker. | 1 = Yes 0 = No 9 = Information not yet available | R | R |
| 2121 | Incumbent Workers Retained Current Position in the 2nd Quarter after Program Completion | IN 1 | Record 1 if the participant was employed at the start of participation (incumbent worker) and retained their current position in the second quarter after training program completion. Record 0 if the participant was employed at the start of participation (incumbent worker) and did not retain their current position in the second quarter after training program completion. Record 9 if information on the participant's employment status in the second quarter after training program completion is not yet available. Leave blank if the participant has not completed the training program or is not an incumbent worker. | 1 = Yes 0 = No 9 = Information not yet available | R | R |
| 2122 | Incumbent Workers Advanced into a New Position with Current Employer or New Employer in the 2nd Quarter after Training Program Completion | IN 1 | Record 1 if the participant was employed at the start of participation (incumbent worker) and advanced into a new position requiring a higher skill level either with their current employer or a new employer, as a result of grant funded activities in the second quarter after training program completion. Record 0 if the participant was employed at the start of program participation (incumbent worker) and did not advance into a new position as a result of the grant-funded activities, in the second quarter after training program completion. Record 9 if information on the participant's employment status in the second quarter after training program completion is not yet available. Leave blank if the participant has not completed the training program or is not an incumbent worker. | 1 = Yes 0 = No 9 = Information not yet available | R | R |
| 2123 | Incumbent Workers Retained Current Position in the 3rd Quarter After Program Completion | IN 1 | Record 1 if the participant was employed at the start of participation (incumbent worker) and retained their current position in the third quarter after training program completion. Record 0 if the participant was employed at the start of participation (incumbent worker) and did not retain their current position in the third quarter after training program completion. Record 9 if information on the participant's employment status in the second quarter after training program completion is not yet available. Leave blank if the participant has not completed the training program or is not an incumbent worker. | 1 = Yes 0 = No 9 = Information not yet available | R | R |
| 2124 | Incumbent Workers Advanced into a New Position with Current or New Employer in the 3rd Quarter after Training Program Completion | IN 1 | Record 1 if the participant was employed at the start of participation (incumbent worker) and advanced into a new position requiring a higher skill level either with their current employer or a new employer, as a result of grant funded activities, in the third quarter after training program completion. Record 0 if the participant was employed at the start of program participation (incumbent worker) and did not advance into a new position as a result of the grant-funded activities, in the third quarter after training program completion. Record 9 if information on the participant's employment status in the third quarter after training program completion is not yet available. Leave blank if the participant has not completed the training program or is not an incumbent worker. | 1 = Yes 0 = No 9 = Information not yet available | R | R |
| 2126 | Entered Training-Related Employment After Training Program Completion | IN 1 | Record 1 if after training program completion, the employment in which the individual entered uses a substantial portion of the skills taught in the training received by the individual. This data element is training program completion based. Individuals that have not enrolled in and completed training should not be reported in this data element. Record 0 if the employment in which the individual entered does not use a substantial portion of the skills taught in the training received by the individual. Record 9 if unknown. Leave blank if the individual has not completed a training program and/or has not yet entered employment | 1 = Yes 0 = No 9 = Unknown | R | R |

**SECTION E.03 - NATIONAL FARMWORKER JOBS PROGRAM (NFJP)**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | National Farmworker Jobs Program (NFJP) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | SCSEP | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|
| 2200 | For Those Who Were Placed in Employment: Job Covered by Unemployment Insurance | IN 1 | Record 1 if the participant was placed into unsubsidized employment that is covered by Unemployment Insurance. Record 0 if the participant was placed into unsubsidized employment that is not covered by Unemployment Insurance. Leave blank if data element does not apply to the participant. | 1 = Yes 0 = No | R | | | | | R |
| 2202 | For Those Who Were Placed in Employment: Fringe Benefits Available/ Received | IN 1 | Record 1 if the participant was placed into unsubsidized employment where the employer makes available (or will make available following the completion of a probationary period) to the participant (whether or not the participant accepts) fringe benefits, beyond those required by law (e.g., Unemployment Insurance, worker's compensation), including health insurance benefits, holiday or vacation pay, sick leave, or a pension plan (not including social security). Record 0 if the participant was placed into unsubsidized employment where the employer does not make available fringe benefits. Leave blank if data element does not apply to the participant. SPECIAL NOTE: For participants holding multiple jobs, this item should be recorded as 1 = Yes if any job provides fringe benefits. | 1 = Yes 0 = No | R | | | | | R |
| 2203 | For Those Who Were Placed in Employment: Hourly Wage at Placement | DE 8.2 | Record the hourly wage at placement. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned. Record 00.00 if the participant was not placed into unsubsidized employment. SPECIAL NOTE: Decimal point in entry must be explicit. Leave blank if data element does not apply to the participant. | 0000000.00 | R | R | | R | | R |
| 2204 | For Those Who Were Placed in Employment: Hours Worked per Week | IN 2 | Record the usual number of hours of work scheduled per week, including overtime. Record 00 if the participant was not placed into unsubsidized employment. Leave blank if data element does not apply to the participant. | 00 | R | R | | R | R | R |
| 2205 | For Those Who Were Placed in Employment: Self-Employment | IN 1 | Record 1 if the participant was self-employed. Self-employment includes self-directed work in which goods or services produced by, or obtained by, the participant (or others working for him/her) are offered for sale. Record 0 if the participant was not self-employed. Leave blank if data element does not apply to the participant. | 1 = Yes 0 = No | | | | R | | R |
| 2206 | For Those Who Were Placed in Employment: Entered Military Service | IN 1 | Record 1 if the participant joined the Army, Navy, Air Force, Marines or Coast Guard, or entered into active duty from Reserve or National Guard units in cases of unplanned military buildup. Record 0 if the participant did not enter the military services. Leave blank if data element does not apply to the participant. | 1 = Yes 0 = No | | | | R | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2207 | For Those Who Were Placed in Employment: Entered Pre-Apprenticeship or Registered Apprenticeship Program | IN 1 | Record 1 if the participant entered into a Pre-apprenticeship program. Record 2 if the participant entered into a Registered Apprenticeship program. The program must be registered with DOL Office of Apprenticeship (OA) or a federally-recognized State Apprenticeship Agency (SAA). Record 0 if the participant did not enter a Pre- or Registered Apprenticeship program. Leave blank if data element does not apply to the participant. | 1 = Yes, Pre-Apprenticeship 2 = Yes, Registered Apprenticeship 0 = No | | | | | | | | | | R | R | R | | | | | | | R |
| 2208 | Category of Exit | IN 1 | Record 1 if the participant received and/or completed any job-related career services, individualized career services, youth services, or training services. Record 2 if the participant received non staff-assisted non-job related services, without having received job-related career, individualized career services, or training services. Record 3 if the participant received significant staff-assisted assistance services. Record 4 if participant withdrew application prior to assignment. Record 5 if participant transferred to another project. Record 6 if participant moved to another sub-grantee. Record 7 if participant is dual enrolled. Record 8 if the participant did not complete the program and exited for other reasons. NOTE: Code values 4, 5, 6 and 7 apply to SCSEP only. NOTE: For code value 2, participants are considered, a "reportable participant" and not included in performance calculations for the indicators of performance. For code value 3, participants are considered a "participant" and included in performance calculations for the indicators of performance. | 1 = Employment and Training Exiter 2 = Non staff-assisted related Assistance Services ONLY Exiter 3 = Significant staff-assisted related assistance services Exiter 4 = Withdrew application prior to assignment 5 = Transferred to another project 6 = Moved to another sub-grantee 7 = Dual enrollment 8 = Other Reasons for Exit | | | | | | | | R | | | | | | | | | | | R |
| 2209 | Related assistance: Transportation | IN 1 | Record 1 if the participant received transportation (public or private) assistance or cash paid to participants or members of their families for the purpose of transportation. Record 0 if the participant did not receive any transportation assistance. | 1 = Yes 0 = No | | | | | | | | R | | R | | R | | | | | | | R |
| 2210 | Related assistance: Health Care | IN 1 | Record 1 if the participant received health care services that includes, but is not limited to, preventive and clinical medical treatment, voluntary family planning, and necessary psychiatric, psychological and prosthetic services. Record 0 if the participant did not receive any health care assistance. | 1 = Yes 0 = No | | | | | | | | R | | R | R | R | | | | | | | R |
| 2211 | Family Care (including child care) | IN 1 | Record 1 if the participant received related assistance services which help participants meet their family care needs during program participation. Family care ranges from adult to child care inside or outside the home to after-school programs (inside or outside the home). It usually includes supervision and shelter. Record 0 if the participant did not receive any family care assistance. | 1 = Yes 0 = No | | | | | | | | R | | R | | R | | | | | | | R |
| 2212 | Housing Services | IN 1 | Record 1 if the participant received temporary housing services as described in 20 CFR 685.360 Record 2 if the participant received permanent housing services as described in 20 CFR 685.360 Record 3 if the participant received both temporary housing services and permanent housing services as described in 20 CFR 685.360 and permanent housing services as described in 20 CFR 685.360. Record 0 if the participant did not receive any housing services. | 1 = Temporary Housing Services 2= Permanent Housing Services 3= Both Temporary and Permanent Housing services 0 = No housing services | | | | | | | | R | | R | | R | | | | | | | R |
| 2213 | Related assistance: Nutritional Assistance | IN 1 | Record 1 if the participant received related assistance services that includes the provision of food and other nutritional assistance (other than counseling) to eligible program participants and their dependents. Record 0 if the participant did not receive any nutritional assistance. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2214 | Related assistance: Translation and Interpretation Services | IN 1 | Record 1 if the participant received related assistance services which involves a bi-lingual agent who hears or reads the language of one party and speaks or writes another language for another party. One of the two parties will be a program participant. Record 0 if the participant did not receive any translation and interpretation services. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2215 | Related assistance: Staff Assisted | IN 1 | Record 1 if the participant received related assistance services with significant staff involvement. Record 0 if the participant did not receive any other related assistance services with significant staff involvement. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2216 | Received Worker Safety Training | IN 1 | Record 1 if the participant received any training that consists of instruction in any of the following: safe and proper ways to operate or maintain machinery, safe handling and use of toxic chemicals, proper use of protective clothing and devices, first aid, or other topics related to worker safety on the job site. Record 0 if the participant did not receive worker safety training. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2217 | Work Experience funded by 167 grant | IN 4 | Record the actual total hours the individual received work experience under the section 167 grant. Work experience includes short-term or part-time work activity that provides an individual with the opportunity to acquire appropriate work habits and behaviors. | 0000 | | | | | | | | R | | | | | | | | | | | R |
| 2218 | On-the-job Training (OJT) funded by 167 grant | IN 4 | Record the actual total hours the participant received On-the-job Training (OJT) under the section 167 grant. OJT includes training by an employer that is provided to a paid participant while engaged in productive work in a job that: (a) provides knowledge or skills essential to the full and adequate performance of the job; (b) provides reimbursement to the employer of up to 50 percent of the wage rate of the participant, for the extraordinary costs of providing the training and additional supervision related to the training; and (c) is limited in duration appropriate to the occupation for which the participant is being trained, taking into account | 0000 | | | | | | | | R | | | | | | | | | | | R |
| 2219 | Integrated Basic/Occupational Skills Training funded by 167 grant | IN 4 | Record the actual total hours the participant received integrated basic/occupational skills training under the section 167 grant. Integrated basic/occupational skills training combines elements of both Basic Skills Training and Occupational Skills Training (Non-OJT) as described immediately above. | 0000 | | | | | | | | R | | | | | | | | | | | R |
| 2220 | Occupational Skills Training (Non-OJT) funded by 167 grant | IN 4 | Record the actual total hours the participant received occupational skills training (excluding On-the-job training) under the section 167 grant. Occupational skills training includes vocational education and classroom training, designed to provide participants with the technical skills and information required to perform a specific job or group of jobs. | 0000 | | | | | | | | R | | | | | | | | | | | R |
| 2221 | Basic Skills Training funded by 167 grant | IN 4 | Record the actual total hours the participant received basic skills training under the section 167 grant. Basic skills training includes, but is not limited to, remedial reading, writing, communication, mathematics and/or English for non-English speakers. | 0000 | | | | | | | | R | | | | | | | | | | | R |
| 2222 | Lacks Transportation | IN 1 | Record 1 if the participant is a person who lacks access to adequate/reasonable transportation services, resulting in a barrier to receiving training or accepting employment. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2223 | Long-term Agricultural Employment | IN 1 | Record 1 if the participant is a person who has engaged in agricultural work as the primary source of income for a minimum of four (4) years prior to intake/eligibility determination. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2224 | Lacks Significant Work History | IN 1 | Record 1 if the participant is a person who has not worked for any nonagricultural employer for longer than three (3) consecutive months in the 24 months prior to intake/eligibility determination. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | | | | | | | R | | | | | | | | | | | R |
| 2225 | 6 month pre-program earnings during the 6-months prior to date of application | DE 8.2 | Record pre-program earnings during the 6-months prior to date of application. Earnings include salaries or wages, and also include any bonuses, tips, gratuities, commissions or overtime pay. | 000000.00 | | | | | | | | R | | | | | | | | | | | R |
| 2226 | Total pre-program earnings during 12-month eligibility determination period | DE 8.2 | Record pre-program earnings during 12-month eligibility determination period. Earnings include salaries or wages, and also include any bonuses, tips, gratuities, commissions or overtime pay. | 000000.00 | | | | | | | | R | | | | | | | | | | | R |
| 2227 | Number of dependents in the family under age 18 | IN 2 | Record the number of dependents in the family under age 18. | 00 | | | | | | | | R | | | | | | | | | | | R |
| 2231 | Date of Eligibility Determination | DT 8 | Record the date upon which the participant was determined eligible to participate in the Section 167 program. | YYYYMMDD | | | | | | | | R | | | | | | | | | | R | R |
| 2232 | Family status for NFJP Housing Services (WIOA Sec. 167) | IN 1 | Record 1 if the individual is an eligible MSFW and the individual does not reside with a Family and recieves NFJP funded permanent or temporary housing services. Record 2 if the individual is an eligible MSFW and the individual resides with a Family and receives NFJP funded permanent housing services or temporary housing services. Record 3 if the individual is not an eligible MSFW and the individual does not reside with a Family and receives NFJP funded permanent housing services. Record 4 if the individual is not an eligible MSFW and the individual resides with a Family and receives NFJP funded permanent housing services. Record 0 if the individual receives housing services through an NFJP career services and training grant. Note: While NFJP-funded permanent housing must be promoted and made widely available to an eligible MSFW Families, occupancy is not restricted to eligible MSFW individuals or eligible MSFW Families. Migrant and Seasonal Farmworkers (MSFW) is described at WIOA Section 167. Family is defined at 20 CFR 685.110. Note: The indicators of performance for grantees providing NFJP housing services are described at 20 CFR 685.400 | 1= MSFW (Individual) 2= MSFW (Family) 3= Other (Individual) 4=Other (Family) 0=Housing through NFJP CST grant | | | | | | | | R | | | | | | | | | | | R |
| 2233 | NFJP Grant Enrollment | IN 1 | Record 1 if the participant was enrolled through a NFJP Employment and Training grant. Record 2 if the participant was enrolled through an NFJP Housing grant. | 1 = NFJP Employment and Training Grant enrollee 2 = NFJP Housing Grant enrollee | | | | | | | | R | | | | | | | | | | | R |
| **SECTION E.04 - INDIAN AND NATIVE AMERICAN PROGRAM (INA)** | | | | | | | | | | | | | | | | | | | | | | |
| 2302 | Tribal Affiliation | IN 6 | Record the participant's tribal affiliation. Leave blank if the tribal affiliation code is unknown. | 000000 | | | | | | | | | R | | | | | | | | | | R |
| 2303 | Public Assistance Recipient | IN 9 | Record 1 if the participant receives general assistance (GA) from their state or local government; | 1 = General Assistance (GA) 2 = TANF | | | | | | | | | R | | | | | | | | | | R |
| **SECTION E.05 - REENTRY EMPLOYMENT OPPORTUNITIES (ADULT)** | | | | | | | | | | | | | | | | | | | | | | |
| 2400 | In Work Release Program | IN 1 | Record 1 if the participant was in a work-release program at the time enrollment. Record 0 if the participant does not meet the condition described above. | 1 = Yes 0 = No | | | | | | | | | | R | | | | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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Requirements columns (Programs of Participation): Reportable Individual; Wagner-Peyser; WIOA Adults; WIOA Dislocated Workers; WIOA Youth; Dislocated Worker Grants (DWG); TAA; National Farmworker Jobs Program (NFJP); Indian and Native American Program (INA); Reentry Employment Opportunities (REO) (Adult); Reentry Employment Opportunities (REO) (Youth); YouthBuild; Jobs for Veterans' State Grants (JVSG); H1B; Job Corps; Incumbent Worker (Adult/DW Funded); SCSEP; Apprenticeship; Demonstration Grants.

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Requirements (programs marked R) |
|---|---|---|---|---|---|
| 2401 | Employment Status at Incarceration | IN 1 | Record 1 if the participant was working in unsubsidized employment upon incarceration (not including Registered Apprenticeship or the military.) Record 2 if the participant was in a Registered Apprenticeship upon incarceration. Record 3 if the participant was in the military upon incarceration. Record 9 if employment participant prior to incarceration is unknown. Record 0 if the participant was not employed upon incarceration. | 1 = Unsubsidized Employment 2 = Registered Apprenticeship 3 = Military 9 = Unknown 0 = Not employed | REO (Adult); Demonstration Grants |
| 2404 | Alcohol/Drug Abuse at Enrollment | IN 1 | Record 1 if the participant abused alcohol and/or drugs at the time of enrollment. Record 0 if the participant did not meet either of the conditions described above at the time of enrollment. Record 9 if the alcohol/drug abuse status is unknown at the time of enrollment. | 1 = Yes 0 = No 9 = Unknown | REO (Adult); Demonstration Grants |
| 2412 | Criminal Justice System Identifier | AN 1 | Record the appropriate criminal justice system identifier as indicated in code values 1 through 6. | 1 = Federal ID 2 = State CJ Record ID 3 = State Prison ID 4 = Local Probation Agency ID 5 = Local Jail ID 6 = Other | REO (Adult); Demonstration Grants |
| 2413 | Incarcerated at Program Entry (WIOA) | IN 1 | Record 1 if the participant, at program entry, was a criminal offender in a correctional institution at program entry. Record 0 if this data element does not apply to the participant. | 1 = Yes 0 = No | WIOA Youth; REO (Adult); REO (Youth); Demonstration Grants |
| 2414 | Date Released from Incarceration (WIOA) | DT 8 | Record the date the participant was released from a correctional institution. Leave blank if participant remains in a correctional institution at program exit. | YYYYMMDD | WIOA Youth; REO (Adult); REO (Youth); Demonstration Grants |
| 2415 | Date of Anticipated Release From Incarceration | DT 8 | Record the date that the participant is anticipated to be released from a correctional institution. Leave blank if this data element does not apply to the participant. | YYYYMMDD | REO (Adult); Demonstration Grants |
| 2416 | Post-Release Status | IN 1 | Record 1 if the participant's post-release status is parole. Record 2 if the participant's post-release status is probation. Record 3 if the participant's post-release status is out on bail. Record 4 if the participant's post-release status is without conditions. Leave blank if this data element does not apply to the participant. [I.i.e., if the person has yet to be released from incarceration, per 2415] | 1 = Parole 2 = Probation 3 = Bail 4 = Without Conditions | REO (Adult); Demonstration Grants |
| 2417 | Most Recent Type of Offense | IN 1 | Record 1 if the participant was convicted of a property crime. Record 2 if the participant was convicted of a drug crime. Record 3 if the participant was convicted of a public order crime. | 1 = Property Crime 2 = Drug Crimes 3 = Public Order Crime | REO (Adult); Demonstration Grants |
| 2422 | Housing Status at Six Months After Program Entry | IN 1 | Record the appropriate housing status for the participant at six months after program entry as indicated in code values 1 through 9. | 1 = Own/rent apartment, room or house 2 = Staying at someone's apartment, room or house (stable) 3 = Transitional house 4 = Residential Treatment 5 = Homeless 6 = Staying at someone's apartment, room or house (unstable) 7 = Monitored home confinement Incarcerated 8 = Halfway house / residential re-entry center 9 = Did not specify due to exit or re-arrest | REO (Adult); Demonstration Grants |
| 2423 | Housing Status at Enrollment | IN 1 | Record the appropriate housing status for the participant at enrollment as indicated in code values 1 through 9 | 1 = Own/rent apartment, room or house 2 = Staying at someone's apartment, room or house (stable) 3 = Transitional house 4 = Residential Treatment 5 = Homeless 6 = Staying at someone's apartment, room or house (unstable) 7 = Monitored home confinement Incarcerated 8 = Halfway house / residential re-entry center 9 = Family | REO (Adult); REO (Youth); Demonstration Grants |
| 2424 | Alcohol/Drug Abuse Six Months After Enrollment | IN 1 | Record 1 if the participant abused alcohol and/or drugs at six months after enrollment. Record 0 if the above conditions do not apply to the participant. | 1 = Yes 0 = No | REO (Adult); Demonstration Grants |
| 2433 | Re-arrested within 12 months of Release for a New Crime | IN 1 | Record 1 if the participant was re-arrested within 12 months of release for a new crime. Record 0 if the participant does not meet the condition described above. | 1 = Yes 0 = No | REO (Adult); Demonstration Grants |
| 2434 | Re-arrested for a previous crime | IN 1 | Record 1 if the participant was re-arrested for a previous crime. Record 0 if the above condition does not apply to the participant. Record 9 if this information is not available. | 1 = Yes 0 = No 9 = Unknown | REO (Adult); Demonstration Grants |
| 2435 | Re-incarcerated for a revocation of the parole or probation order for violations of terms of sentence | IN 1 | Record 1 if the participant was re-incarcerated for revocation of parole. Record 2 if the participant was re-incarcerated for revocation of probation order for violations of terms of sentence. Record 3 if the participant was re-incarcerated for other violations of the terms and | 1 = Revocation of Parole 2 = Revocation of Probation 3 = Other Violations 0 = No | REO (Adult); Demonstration Grants |
| 2436 | Not Re-arrested | IN 1 | Record 1 if the participant was not re-arrested. Record 0 if the above condition does not apply to the participant. | 1 = Yes 0 = No | REO (Adult); Demonstration Grants |
| 2437 | Date arrested for new/previous crime | DT 8 | Record the date that the participant was arrested for a new or previous crime. Leave blank if the above condition does not apply to the participant. | YYYYMMDD | REO (Adult); Demonstration Grants |
| 2438 | Convicted for new/previous crime | IN 1 | Record 1 if the participant was convicted of a new crime. Record 2 if the participant was convicted of a previous crime. Record 0 if the above condition does not apply to the participant. Record 9 if this information is not available. | 1 = Yes 0 = No | REO (Adult); Demonstration Grants |
| 2439 | Date re-incarcerated | DT 8 | Record the date which the participant became re-incarcerated. Leave blank if the above condition does not apply to the participant. | YYYYMMDD | REO (Adult); Demonstration Grants |
| 2440 | Date charges dropped | DT 8 | Record the date which charges against the participant were dropped. Leave blank if the above condition does not apply to the participant. | YYYYMMDD | REO (Adult); Demonstration Grants |

## SECTION E.06 - REENTRY EMPLOYMENT OPPORTUNITIES (YOUTH)

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Requirements (programs marked R) |
|---|---|---|---|---|---|
| 2500 | Secondary school enrollment status at arrest | IN 1 | Record 1 if the participant was a secondary school student at the time of their arrest. Record 2 if the participant was a secondary school graduate at the time of their arrest. Record 3 if the participant was a secondary school dropout at the time of their arrest. Record 0 if the participant does not meet the conditions described above. | 1 = Secondary school student 2 = Secondary school graduate 3 = Secondary School dropout 0 = No | REO (Youth); Demonstration Grants |
| 2502 | Youth Offender status at enrollment | IN 1 | Record 1 if the participant is currently in, returning from, or has been in a juvenile correctional facility. Record 2 if the participant is currently in, returning from, or has been in a juvenile detention facility. Record 3 if the participant is currently on, leaving, or has been on juvenile probation. Record 4 if the participant is currently in, leaving, or has been in juvenile alternative sentencing or diversion. Record 5 if the participant is currently in, returning from, or has been in an adult prison. Record 6 if the participant is currently in, returning from, or has been in an adult jail. Record 7 if the participant is currently on, leaving, or has been on adult probation. Record 8 if the participant is currently in, leaving, or has been in adult sentence or diversion. Record 0 if the at-risk participant is not an offender. | 1 = Juvenile Correctional Facility 2 = Juvenile detention facility 3 = Juvenile probation 4 = Juvenile alternative sentencing or diversion 5 = Adult prison 6 = Adult jail 7 = Adult probation 8 = Adult sentence or diversion 0 = At-risk individual who is not an offender | REO (Adult); REO (Youth); Demonstration Grants |
| 2503 | Date released from correctional facility or placed on probation | DT 8 | Record the date on which the participant was released from a correctional facility, detention or was placed on probation. Leave blank if this data element does not apply to the participant. | YYYYMMDD | REO (Adult); REO (Youth); Demonstration Grants |
| 2505 | Date verified Selective Service registration | DT 8 | Enter date verified Selective Service Registration Leave blank for participants who are not required to sign up for selective service. | YYYYMMDD | REO (Youth); YouthBuild; Demonstration Grants |
| 2506 | Voter registration | IN 1 | Record 1 if the participant is a registered voter. Record 0 if the participant is not a registered voter. | 1 = Yes 0 = No | REO (Youth); YouthBuild; Demonstration Grants |
| 2507 | Driver's license | IN 1 | Record 1 if the participant is a licensed driver. Record 0 if the participant is not a licensed driver. | 1 = Yes 0 = No | REO (Youth); YouthBuild; Demonstration Grants |
| 2509 | First date of service | DT 8 | Enter first date of service of the service selected. Grantees need to be able to enter the first date of service each quarter, with the data saved each quarter to keep a running count of services received. Leave blank if no service(s) was received. | YYYYMMDD | |
| 2510 | Completed diversion without out-of-home placement | IN 1 | Record 1 if diversion was completed without out-of-home placement. Record 0 if the participant does not meet this condition. Leave blank if participant did not receive diversion services. | 1 = Yes 0 = No | REO (Adult); REO (Youth); Demonstration Grants |
| 2511 | Records expunged | IN 1 | Record 1 if the participant's record was expunged. Record 0 if the participant does not meet this condition. Leave blank if participant did not receive expungement legal services. | 1 = Yes 0 = No | REO (Adult); REO (Youth); Demonstration Grants |
| 2512 | Records sealed | IN 1 | Record 1 if the participant's record was sealed. Record 0 if the participant does not meet this condition. Leave blank if participant did not receive sealing of records assistance. | 1 = Yes 0 = No | REO (Youth); Demonstration Grants |
| 2516 | Date of postsecondary education or training placement | DT 8 | Record the date of participant's placement into postsecondary education or training. Leave blank if the participant was not placed into postsecondary education or training. | YYYYMMDD | Wagner-Peyser; REO (Adult); REO (Youth); YouthBuild; JVSG; Demonstration Grants |
| 2519 | Hourly training wage | DE 8.2 | Record the participant's hourly training wage. Leave blank if the participant was not enrolled in training. | 000000.00 | Apprenticeship; Demonstration Grants |
| 2523 | Date entered degree or certificate program: | DT 8 | Record the date on which the participant entered the degree or certificate program. Leave blank if the participant did not enter into a degree or certificate program. | YYYYMMDD | |
| 2525 | Date arrested for new crime after enrollment | DT 8 | Record date on which participant was arrested for new crime after enrollment. Leave blank if this data element does not apply to the participant. | YYYYMMDD | REO (Youth); Demonstration Grants |
| 2526 | Convicted for new crime committed after enrollment | DT 8 | Record date on which participant was convicted for new crime after enrollment. Leave blank if this data element does not apply to the participant. | YYYYMMDD | REO (Youth); Demonstration Grants |
| 2527 | Type of crime | IN 1 | Record 1 if participant was arrested/convicted for a violent felony. Record 2 if participant was arrested/convicted for a non-violent felony. Record 3 if participant was arrested/convicted for a misdemeanor. | 1 = Violent Felony 2 = Non-violent felony 3 = Misdemeanor | REO (Adult); REO (Youth); Demonstration Grants |
| 2528 | Reached 12-month point since release from correctional facility or placement on probation | IN 1 | Record 1 if participant has reached 12-month point since release from correctional facility or placement on probation. Record 0 if the participant does not meet this condition. | 1 = Yes 0 = No | REO (Adult); REO (Youth); Demonstration Grants |
| 2529 | Convicted for new crime committed within 12 months of release from correctional facility or placement on probation | IN 1 | Record 1 if participant was convicted for new crime committed within 12 months of release from correctional facility or placement on probation. Record 0 if the participant does not meet this condition. | 1 = Yes 0 = No | REO (Adult); REO (Youth); Demonstration Grants |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2530 | Incarcerated for new crime committed after enrollment | IN 1 | Record 1 if the participant was incarcerated for a new crime committed after enrollment. Record 0 if the participant does not meet this condition. | 1 = Yes 0 = No | | | | | | | | | | | R | | | | | | | | R |
| 2541 | Receiving public assistance since leaving the program | IN 1 | Record 1 if participant has received SSI, SSD, or SSA benefits since leaving the program. Record 2 if participant has received General Assistance since leaving the program. Record 3 if participant has received UI benefits since leaving the program. Record 4 if the participant has received Food Stamps since leaving the program. | 1 = SSI, SSD, SSA 2 = General Assistance 3 = UI 4 = Food Stamps | | | | | | | | | | | | | | | | | | | |
| 2542 | Arrested for new crime in follow-up period | IN 1 | Record 1 if participant was arrested for a new crime in follow-up period. Record 0 if participant was not arrested for a new crime in follow-up period. | 1 = Yes 0 = No | | | | | | | | | | | R | | | | | | | | R |
| 2543 | Date arrested for new crime in follow-up period | DT 8 | Record the date on which the participant was arrested for new crime in follow-up period. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | | | | | | | | | R | | | | | | | | R |
| 2544 | Convicted for new crime committed in follow-up period | DT 8 | Record the date on which the participant was convicted for new crime in follow-up period. Leave blank if this data element does not apply to the participant. | YYYYMMDD | | | | | | | | | | | R | | | | | | | | R |
| 2545 | Incarcerated for new crime committed in follow-up period | IN 1 | Record 1 if participant was incarcerated for new crime committed in follow-up period. Record 0 if the participant does not meet this condition. | 1 = Yes 0 = No | | | | | | | | | | | R | | | | | | | | R |
| 2546 | Housing Status at follow-up | IN 1 | Record 1 if participant resides in stable housing at follow-up. Record 2 if participant resides in temporary housing at follow-up. Record 3 if participant is homeless at follow-up. | 1 = Stable 2 = Temporary 3 = Homeless | | | | | | | | | | | R | | | | | | | | R |
| **SECTION E.07 - YOUTHBUILD** | | | | | | | | | | | | | | | | | | | | | | |
| 2600 | Construction Plus Grantee | IN 2 | Record 1 if grantees are providing Construction Plus training in in-demand industries beyond construction. Record 0 if grantees are not providing Construction Plus training in in-demand industries beyond construction. | 1 = Yes 0 = No | | | | | | | | | | | | R | | | | | | | R |
| 2603 | Completed mental toughness component | IN 2 | Record 1 if the youth completed mental toughness. Record 0 if the participant did not complete mental toughness. Record 9 if the participant did not participate in mental toughness. | 1 = Yes 0 = No 9 = NA | | | | | | | | | | | | R | | | | | | | R |
| 2605 | Children living with participant | IN 2 | Record the number of the participant's own children less than 18 years of age living in the household, including biological, adopted, step, and foster children. Leave blank if the participant does not meet the criteria or if the data is not available. | 00 | | | | | | | | | | | | R | | | | | | | R |
| 2606 | Other dependents living with participant | IN 2 | Record the number of dependents other than children living with the participant. Leave blank if the participant does not meet the criteria or if the data is not available. | 00 | | | | | | | | | | | | R | | | | | | | R |
| 2607 | Migrant Youth | IN 2 | Record 1 if the participant is the youth and is a migrant worker or is a member of a migrant family. Record 0 if the participant does not meet the conditions described above. | 1 = Yes 0 = No | | | | | | | | | | | | R | | | | | | | R |
| 2608 | Offender | IN 2 | Record 1 if the participant has been convicted of a crime by the juvenile justice system. Record 2 if the participant has been convicted of a crime by the adult correctional system. Record 0 if the participant does not meet the conditions described above. | 1 = Juvenile Offender 2 = Adult Offender 0 = No | | | | | | | | | | | | R | | | | | | | R |
| 2609 | Secondary School Drop-Out | IN 2 | Record 1 if the participant is a youth and has dropped out of secondary school. Record 0 if the participant does not meet the condition described above. | 1 = Yes 0 = No | | | | | | | | | | | | R | | | | | | | R |
| 2610 | Child of Incarcerated Parent or Legal Guardian | IN 2 | Record 1 if either of the youth's parents or legal guardian is incarcerated at the time of the youth's enrollment into the YouthBuild program, or if at least one parent has been previously incarcerated. Record 0 if the participant does not meet the condition described above. | 1 = Yes 0 = No | | | | | | | | | | | | R | | | | | | | R |
| 2611 | Health Issues | IN 2 | Record 1 if the participant has any significant health issues that could impact the participant's ability to work. Examples of such health issues can include, but are not limited to, untreated high blood pressure, HIV/STDs, asthma, depression, and other mental/physical health issues. Record 2 if the participant does not meet the condition described above. Record 9 if the participant does not self-identify. | 1 = Yes, significant health issues 2 = No significant health issues 9 = participant did not self-identify | | | | | | | | | | R | R | R | | | | | | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2612 | Occupation at Enrollment | IN 2 | Record the participant's occupation at enrollment as follows: Record 11 if the participant's occupation is classified as a Management. Record 13 if the participant's occupation is classified as Business and Financial Operations. Record 15 if the participant's occupation is classified as Computer and Mathematical. Record 29 if the participant's occupation is classified as Arts, Design, Entertainment, Sports, and Media. Record 31 if the participant's occupation is classified as Healthcare Support. | 11 = Management 13 = Business and Financial Operations 15 = Computer and Mathematical 17 = Architecture and Engineering 37 = Building and Grounds Cleaning and Maintenance 39 = Personal Care and Service | | | | | | | | | | | | | | | | | | | |
| 2613 | Hours Worked at Enrollment | IN 2 | Record the average hours per week that the participant works at the above occupation. Leave blank if the participant is not employed at enrollment. | 00 | | | | | | | | | | | | R | | | | | | | R |
| 2614 | Average Hourly Wage at Enrollment | DE 8.2 | Record the participant's average hourly wage at the above occupation. Leave blank if the participant is not employed at enrollment. | 000000.00 | | | | | | | | | | | | R | | | | | | | R |

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2616 | Housing Status | IN 1 | Housing status at enrollment: Record 1 if the participant was living in an apartment, room, or house that he/she owns or rents. Record 2 if the participant was living in a (stable) apartment, room, or house that somebody else owns or rents and if the person is not at risk of being displaced from this housing. (i.e., The housing situation is long-term and/or stable.) Record 3 if the participant was living in a residence designed to assist persons as they re-enter society and learn to adapt to independent living after having been in prison. Record 4 if the participant was living in a residential treatment center. A residential treatment center is a group home that provides room and board, and provides specialized treatment or rehabilitation persons with emotional, psychological, or developmental problems as well as chemical dependencies. Record 5 if participant lacked a fixed, regular, adequate night time residence. This definition includes any participant who may regularly stay at a publicly or privately operated shelter for temporary accommodation; an institution providing temporary residence for participants intended to be institutionalized; or a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings. This definition does not include a participant imprisoned or detained under an Act of Congress or State law. A participant who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be recorded as homeless. Record 6 if the participant was living in an apartment, room, or house that somebody else owns or rents and if the person was at risk of being displaced from this housing. (i.e., The housing situation is short-term and/or unstable.) Record 7 if at enrollment, the participant was living in a group home. Record 0 if the data is not available. | 1 = Own/rent apartment, room, or house<br>2 = Staying at someone's apartment, room, or house (Stable)<br>3 = Halfway house/ transitional house<br>4 = Residential treatment<br>5 = Homeless<br>6 = Staying at someone's apartment, room, or house (Unstable)<br>7 = Group Home<br>0 = Unknown/unavailable | | | | | | | | | | | | R | | | | | | | R |

**SECTION E.08 - MISCELLANEOUS DATA ELEMENTS AND USER DEFINED FIELDS**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2700 | Social Security Number | IN 9 | Record the Social Security Number (SSN) assigned to the participant. **NOTE:** THE SSN MUST NOT BE INCLUDED UNLESS SPECIFIED UNDER PROGRAM OR FUNDING STREAM REPORTING REQUIREMENTS. | XXXXXXXXX | | | | | | R | R | R | R | R | R | R | | R | R | | R | R | R |
| 2701 | WIB Name | AN 75 | Record the WIB Name from which the reportable individual/participant received services. Leave blank if this data element does not apply or is unknown | N/A | | R | R | R | R | R | R | R | | | | | R | | | | | | R |
| 2702 | Office Name | AN 75 | Record the Office Name from which the participant received services. Leave blank if this data element does not apply or is unknown | N/A | | R | R | R | R | R | R | R | | | | | R | | | | | | R |
| 2703 | Case Manager | AN 75 | Record the name of the case manager assigned to the participant. Leave blank if this data element does not apply or is unknown | N/A | | | | | | | | | | | | | | | | | | | |
| 2704 | User Field 1 | AN 75 | User defined field. Leave blank if this data element does not apply or is unknown | N/A | | | | | | | | | | | | | | | | | | | |
| 2704 | User Field 2 | AN 75 | User defined field. Leave blank if this data element does not apply or is unknown | N/A | | | | | | | | | | | | | | | | | | | |

**SECTION E.09 - SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)**

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2800 | Urban/Rural | IN 1 | Record 1 if participant resides in an urban location. "Rural" means an area not designated as a metropolitan statistical area by the Census Bureau; segments within metropolitan counties identified by codes 4 through 10 in the Rural Urban Commuting Area (RUCA) system; and RUCA codes 2 and 3 for census tracts that are larger than 400 square miles and have population density of less than 30 people per square mile. Record 2 if participant resides in a rural location. | 1 = Urban<br>2 = Rural | | | | | | | | | | | | | | | | | R | | R |
| 2801 | Family Size | IN 2 | Record the number of individuals in the applicant's family. A "family" is defined in TEGL 12-06 as husband, wife, and dependent children; parent or guardian and dependent children; or husband and wife. Count only current family members living together. Do not include deceased spouses or separated spouses who are living separately. In addition, consistent with ... | 00 | | | | | | | | | | | | | | | | | R | | R |
| 2802 | Family Income Poverty Level | IN 1 | Record 1 if the family income is at or below 100% of the poverty level. Use the federal poverty level for the applicant's family size.. Use the same income inclusions and exclusions that you use for determining SCSEP eligibility. This information is used for reporting purposes only, not for eligibility (which is based on 125% of the poverty level). | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | | | |
| 2803 | Veteran, Post-9/11 Era | IN 1 | Record 1 if participant is a post-9/11 era veteran. Record 0 if the participant is not a post-9/11 era veteran. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2804 | At Risk of Homelessness | IN 1 | An individual is at risk for homelessness when the individual lacks the resources and support networks needed to obtain housing. The risk must be real and imminent. In some sense, anyone living below the poverty level may be at risk of homelessness. Being at risk for homelessness is considered along with actual homelessness as a single priority for service and a single factor for the most-in-need measure. An individual may be either at risk for homelessness or homeless, but not both at once. Record 1 if the participant is at risk for homelessness. Record 0 is the participant is not at risk for homelessness. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2805 | Failed to Find Employment After Receiving WIOA Title I Services | IN 1 | Record 1 if the participant was enrolled in WIOA Title I (adult services) prior to enrolling in SCSEP and was unable to obtain employment before enrolling in SCSEP. Record 0 if the participant does not meet conditions above. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2806 | Low Employment Prospects | IN 1 | Low employment prospects means it is likely that an individual will not obtain employment without the assistance of SCSEP or another workforce development program. Persons with low employment prospects have a significant barrier to employment. Significant barriers to employment may include, but are not limited to: lacking a substantial employment history, basic skills, and/or English language proficiency; lacking a high school diploma or the equivalent; having a disability; being homeless; or residing in socially and economically isolated rural or urban areas where employment opportunities are limited. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2807 | SCSEP Eligible | IN 1 | Record 1 if the applicant is SCSEP eligible. Record 0 if the applicant is not eligible | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2808 | Reason for Ineligibility (Recert) | IN 4 | If the applicant is ineligible, record the reason for ineligibility at recertification. Record all that apply. Record 0 if the participant remains eligible at recertification. | 1 = Income<br>2 = Failed to file complete Application<br>3 = Others<br>0 = Eligible | | | | | | | | | | | | | | | | | R | | R |
| 2809 | Date of Recertification Determination | DT 8 | Record the date on which the authorized individual made the eligibility determination at recertification. | YYYYMMDD | | | | | | | | | | | | | | | | | | | |
| 2810 | Severe Disability | IN 1 | Record 1 if applicant has Severe Disability. Severe Disability is a severe, chronic disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that (A) is likely to continue indefinitely, and (B) results in substantial functional limitation in 3 or more of the following areas of major life activity: (i) self-care, (ii) receptive and expressive language, (iii) learning, (iv) mobility, (v) self-direction, (vi) capacity for independent living, (vii) economic self-sufficiency. ⏵Severe disability is to be recorded in addition to disability. Each is counted separately for the most-in-need measure. Severe disability must be documented by a physician. Record 0 if applicant does not the Severe Disability conditions. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2811 | Date of Last Update (Severe Disability) | DT 8 | Record most recent date that participant was deemed to have a severe disability. ⏵For each program year thereafter, enter the date of updating the factor if grantee wants to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2812 | Frailty | IN 1 | Record 1 if applicant is Frail. Frail means that an individual 55 years of age or older is determined to be functionally impaired because the individual: (A)(i) is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or (ii) at the option of the grantee, is unable to perform at least three such activities without such assistance; or (B) due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to him- or herself or to another individual. Frailty must be documented by a qualified professional. Record 0 if applicant does not meet the Frail definition. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2813 | Date of Last Update (Frailty) | DT 8 | Record the date of updating the factor if you want to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2814 | Old Enough for but Not Receiving Social Security Title II | IN 1 | Record 1 if an individual may qualify for SS retirement benefits at age 62. If an individual is 62 or over but does not have sufficient wage credits to qualify for retirement benefits. This factor applies only if the participant is not monetarily eligible for Social Security. Record 0 if the participant qualifies but chooses to delay receipt to increase the amount of benefits. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2815 | Date of Last Update (Old Enough for but Not Receiving Social Security Title II) | DT 8 | Record the date of updating the factor if you want to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2816 | Severely Limited Employment Prospects in Area of Persistent Unemployment | IN 1 | Record 1 if applicant is a severely limited employment prospects in area of persistent unemployment, This element has two separate requirements: 1. Severely limited employment prospects, and 2. Residence in an area of persistent unemployment. Both must be met for a "yes" answer. Severely limited employment prospects means a substantially higher likelihood that an individual will not obtain employment without the assistance of the SCSEP or another workforce development program. Persons with severely limited employment prospects have more than one significant barrier to employment; significant barriers to employment may include but are not limited to: lacking a substantial employment history, basic skills, and/or English-language proficiency; lacking a high school diploma or the equivalent; having a disability; being homeless; or residing in socially and economically isolated rural or urban areas where employment opportunities are limited. | 1 = Yes  0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2817 | Date of Last Update (Severely Limited Employment Prospects in Area of Persistent Unemployment) | DT 8 | Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2818 | Limited English Proficiency | IN 1 | Record 1 if the participant cannot speak or read English well enough to fully participate in all aspects of the program. Record 0 if the participant is able to participate in all aspects of the program. There is no substantive change in the definition. An LEP individual is one who does not speak English as his or her primary language and who has a limited ability to read, speak, write, or understand English. If you are in doubt, ask the participant | 1 = Yes  0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2819 | Date of Last Update (Limited English Proficiency) | DT 8 | Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2820 | Low Literacy Skills | IN 1 | Record 1 if the participant calculates or solves problems, reads, writes, or speaks English at or below the 8th grade level or is unable to compute or solve problems, read, write, or speak at a level necessary to function on the job, in the individual's family, or in society. | 1 = Yes  0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2821 | Date of Last Update (Low Literacy Skills) | DT 8 | Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2822 | Type of Placement | IN 1 | Record 1 if participant is working full-time at placement. Record 2 if participant is working part-time at placement. | 1 = Full-time  2 = Part-time | | | | | | | | | | R | R | | | | | | R | | R |
| 2824 | Participant returned to SCSEP within the first 90 days of exit | IN 1 | Record 1 if participant returned to SCSEP within the first 90 days of exit. Record 0 if participant did not returned to SCSEP within the first 90 days of exit. | 1 = Yes  0 = No | | | | | | | | | | | | | | | | | | | |
| 2825 | Has the participant re-enrolled in SCSEP within the first 90 | IN 1 | Record 1 if the participant re-enrolled in SCSEP within the first 90 days after exit. | 1 = Yes  0 = No | | | | | | | | | | | | | | | | | | | |
| 2826 | Approved Break Start | DT 8 | Record the start date of any approved break in participation, such as a leave of absence without pay. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2827 | Approved Break End Date | DT 8 | Record the end date of any approved break in participation. | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2828 | Reason for Approved Break in Participation | IN 1 | Record the reason for the leave of absence or other approved break in participation. | 1 = Family/health  2 = Personal  3 = Administrative  4 = Other | | | | | | | | | | | | | | | | | R | | R |
| 2829 | Participant Community Service Assignment | IN 1 | Record where participant is assigned to for his or her community service assignment. | 1 = Grantee or sub-recipient/ local project  2 = Workforce Partner  3 = Other host agency | | | | | | | | | | R | R | | | | | | | | R |
| 2830 | Supportive Service Provider | IN 1 | Record 1 if participant received supportive services from the grantee or sub-recipient/local project. Record 2 if participant received supportive services from the workforce partner. Record 3 if participant received supportive services from both the grantee or sub-recipient/local project and the workforce partner. Record 4 if participant received supportive services from other sources. | 1 = Grantee or sub-recipient/local project  2 = Workforce partner  3 = Both 1 and 2  4 = Other | | | | | | | | | | | | | | | | | R | | R |
| 2831 | Wage per Hour (Community Service Assignment) | DE 8.2 | Record the current wage at the community service assignment. | 000000.00 | | | | | | | | | | | | | | | | | R | | R |
| 2832 | Total Hours Paid in 1st Quarter | IN 3 | Record the total number of hours for which the participant was paid wages in the 1st quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2833 | Total Hours Paid in 2nd Quarter | IN 3 | Record the total number of hours for which the participant was paid wages in the 2nd quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2834 | Total Hours Paid in 3rd Quarter | IN 3 | Record the total number of hours for which the participant was paid wages in the 3rd quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2835 | Total Hours Paid in 4th Quarter | IN 3 | Record the total number of hours for which the participant was paid wages in the 4th quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2836 | Total Hours of Paid Training in 1st Quarter | IN 3 | Record the total number of hours of paid training for which the participant was paid wages in the 1st quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2837 | Total Hours of Paid Training in 2nd Quarter | IN 3 | Record the total number of hours of paid training for which the participant was paid wages in the 2nd quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2838 | Total Hours of Paid Training in 3rd Quarter | IN 3 | Record the total number of hours of paid training for which the participant was paid wages in the 3rd quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2839 | Total Hours of Paid Training in 4th Quarter | IN 3 | Record the total number of hours of paid training for which the participant was paid wages in the 4th quarter of the program year as determined from the sub-grantee's wage records. | 000 | | | | | | | | | | | | | | | | | R | | R |
| 2840 | Other Reasons for Exit (SCSEP-Only) | IN 1 | Record the reason that applies at the time of exit. | 1 = Moved from area<br>2 = For cause<br>3 = Voluntary | | | | | | | | | | | | | | | | | R | | R |
| 2841 | Exclusion After Exit | IN 1 | Record 1 if it was discovered that the participant was deceased after exit.<br>Record 2 if it was discovered that the participant had medical condition after exit<br>Record 3 if it was discovered that the participant was caring for a family after exit.<br>Record 4 if it was discovered that the participant was institutionalized after exit. | 1 = Deceased<br>2 = Medical Condition<br>3 = Family Care<br>4 = Institutionalized | | | | | | | | | | | | | | | | | R | | R |
| 2842 | Date Exclusion Occurred | DT 8 | Record the date that the exclusion occurred. | YYYYMMDD | | | | | | | | | | | | | | | | | | | |
| 2843 | Host Agency Employer | IN 1 | Record 1 if the employer is a host agency. Unsubsidized employers that have served as a host agency for any participant (under any state or national grant) in the last 12 months will not be included in the customer service survey of employers. | 1 = Yes<br>0 = No | | | | | | | | | | | | | | | | | R | | R |
| 2844 | Employer Type | IN 1 | Record 1 if employer is a not-for-profit entity.<br>Record 2 if employer is a for-profit entity.<br>Record 3 if employer is a government entity.<br>Record 4 if the participant is engaged in self-employment. | 1= Not-for-profit<br>2= For-profit<br>3= Government<br>4= Self-employment | | | | | | | | | | | | | | | | | | | |
| 2845 | Placement Start Date | DT 8 | Record the date on which the participant began work with this employer. This will be the date of placement for measurement purposes. | YYYYMMDD | | | | | | | | | | R | R | | | | | | R | | R |
| 2846 | Placement End Date | DT 8 | Record the date on which the unsubsidized employment with this employer ended. If there is additional unsubsidized employment within four quarters after the quarter of exit from SCSEP, all unsubsidized employment may be included in the performance measures | YYYYMMDD | | | | | | | | | | | | | | | | | R | | R |
| 2847 | SCSEP Application Date | DT 8 | Record the date on which the individual first applied for Senior Community Service Employment Program services/benefits under the applicable certification. | YYYYMMDD | | | | | | | | | | | | | | | | | | | |
| **SECTION E.10 - APPRENTICESHIP** | | | | | | | | | | | | | | | | | | | | | | |
| 2900 | RAPIDS Number | AN 12 | Record the RAPIDS number for the participant who is a registered apprentice (Registered Apprenticeship Partners Information Data System).<br>Leave blank if this data element does not apply.<br>**Note:** There are no RAPIDS numbers for pre-apprentices. | XXXXXXXXXXXX | | | | | | | | | | | | | | | | | | R | R |
| 2901 | Pre-Apprenticeship Program Status | IN 1 | Record 1 for participants enrolled in a pre-apprenticeship program.<br>Record 2 for participants who cancelled or withdrew from their pre-apprenticeship program.<br>Record 3 for participants who completed their pre-apprenticeship program and did not continue into an apprenticeship program.<br>Record 4 for participants who completed their pre-apprenticeship and continued into a registered apprenticeship program during program participation (RAP).<br>Record 5 for participants who completed their pre-apprenticeship and continued into an industry-recognized apprenticeship program (IRAP).<br>Leave blank if this data element does not apply.<br>**Note:** Status can change over time. | 1 = Enrolled<br>2 = Cancelled or Withdrew<br>3 = Completed<br>4 = Completed and Continued into RAP<br>5 = Completed and Continued into IRAP | | | | | | | | | | | | | | | R | | | R | R |
| 2902 | Date Enrolled in Pre-Apprenticeship | DT 8 | Record the date the participant started the pre-apprenticeship program.<br>Leave blank if this data element does not apply. | YYYYMMDD | | | | | | | | | | | | | | | | | | R | R |
| 2903 | Expected Completion Date: Pre-Apprenticeship | DT 8 | Record the expected completion date of the pre-apprenticeship program, which should be prior to program exit.<br>Leave blank if this data element does not apply. | YYYYMMDD | | | | | | | | | | | | | | | | | | R | R |
| 2904 | In Pre-Apprenticeship Program with an Articulated Agreement | IN 1 | Record 1 if the participant is in a pre-apprenticeship program where a Memorandum of Understanding (MOU), Memorandum of Agreement (MOA) or other formal agreement exists between the pre-apprenticeship program and the Registered Apprenticeship Program or Industry-Recognized Apprenticeship Program.<br>Record 2 if no formal agreement exists between the pre-apprenticeship program and an apprenticeship program.<br>Leave blank if this data element does not apply. | 1 = Yes<br>2 = No | | | | | | | | | | | | | | | | | | R | R |
| 2905 | Date Completed Pre-Apprenticeship | DT 8 | Record the date the participant completed the pre-apprenticeship program.<br>Leave blank if this data element does not apply. | YYYYMMDD | | | | | | | | | | | | | | | | | | R | R |
| 2906 | Date Changed Status from Pre-Apprentice to Apprentice | DT 8 | Record the date the participant's status changed from pre-apprentice to apprentice.<br>Leave blank if this data element does not apply.<br>**Note:**This may be the same date (or shortly thereafter) as pre-apprenticeship program completion. | YYYYMMDD | | | | | | | | | | | | | | | | | | | |
| 2907 | Apprenticeship Program Status | IN 1 | Record 1 for participants enrolled in an apprenticeship program.<br>Record 2 for participants who cancelled or withdrew from their apprenticeship program.<br>Record 3 for participants who completed their apprenticeship program.<br>Leave blank if this data element does not apply.<br>**Note:** Status can change over time. | 1 = Enrolled<br>2 = Cancelled or Withdrew<br>3 = Completed | | | | | | | | | | | | | | | R | | | R | R |
| 2908 | Date Started Apprenticeship | DT 8 | Record the date the participant started the apprenticeship program.<br>Leave blank if this data element does not apply. | YYYYMMDD | | | | | | | | | | | | | | | R | | | R | R |
| 2909 | Expected Completion Date: Apprenticeship | DT 8 | Record the expected completion date of the apprenticeship program, whether or not the participant is expected to complete the program during their participation.<br>Leave blank if this data element does not apply. | YYYYMMDD | | | | | | | | | | | | | | | R | | | R | R |
| 2910 | Type of Apprenticeship Program | IN 1 | Record 1 if the apprenticeship program is a Time-Based program.<br>Record 2 if the apprenticeship program is a Competency-Based program.<br>Record 3 if the apprenticeship program is a Hybrid program.<br>Leave blank if this data element does not apply. | 1 = Time-Based<br>2 = Competency-Based<br>3 = Hybrid | | | | | | | | | | | | | | | | | | R | R |
| 2911 | Date Completed Apprenticeship | DT 8 | Record the date the participant completed the apprenticeship program.<br>Leave blank if this data element does not apply. | YYYYMMDD | | | | | | | | | | | | | | | R | | | R | R |
| 2912 | Type of RTI Provider | IN 1 | Record 1 if the provider of Related Training Instruction (RTI) is a Joint Apprenticeship Training Committee.<br>Record 2 if the provider of RTI is a Community College.<br>Record 3 if the provider of RTI is a Vocational or Technical School.<br>Record 4 if the provider of RTI is a 4-year educational institution.<br>Record 5 if the provider of RTI is an entity other than those previously noted.<br>Leave blank if this data element does not apply. | 1 = JATC<br>2 = Community College<br>3 = Voc/Tech School<br>4 = 4-year educational institution<br>5 = Other | | | | | | | | | | | | | | | | | | R | R |
| 2913 | Type of Supportive Services Received | IN 3 | Record up to 3 types of supportive services:<br>Record 1 if the supportive service received by the participant is Transportation.<br>Record 2 if the supportive service is Tools and/or Equipment.<br>Record 3 if the supportive service is Uniforms.<br>Record 4 if the supportive service is Child Care.<br>Record 5 if the supportive service is something other than that previously listed.<br>Leave blank if this data element does not apply. | 1 = Transportation<br>2 = Tools/Equipment<br>3 = Uniforms<br>4 = Child Care<br>5 = Other | | | | | | | | | | | | | | | | | | R | R |
| 2914 | OA Apprenticeship Grants Program Status | IN 1 | Record 1 if the participant is an individual who received a direct grant funded participant service. Examples include, but are not limited to OJL and/or RTI paid for through the grant, or other grant funded participant services provided).<br>Record 2 if the individual has been impacted by the development of expansion of grant funded registered apprenticeship program enrolled in a registered apprenticeship program AND is enrolled in a RAP and is a least 16 years old. | 1= Yes, Participant<br>2= Reportable Individual (applies to state grantees only) | | | | | | | | | | | | | | | | | | R | R |
| 2915 | Received OJT Services (Identification of Funding Source(s)) | IN 3 | Record up to 3 sources of funding:<br>Record 1 if the OJT reimbursement was funded by the apprenticeship grant.<br>Record 2 if the OJT reimbursement was funded by WIOA Title I (Adult, Dislocated Worker, and/or Youth).<br>Record 3 if the OJT reimbursement was funded by WIOA funding that was not Title I (i.e., either Title II or Title IV).<br>Record 4 if the reimbursement was funded by a State funding source.<br>Record 5 if the reimbursement was funded by the GI Bill.<br>Leave blank if this data element does not apply. | 1 = Grant Funded<br>2 = WIOA (Title I)<br>3 = WIOA (not Title I)<br>4 = State Funding Source<br>5 = GI Bill | | | | | | | | | | | | | | | | | | | |

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2916 | Received RTI Services (Identification of Funding Source(s)) | IN 3 | Record up to 3 sources of funding: Record 1 if the Related Training and Instruction (RTI) was funded by the apprenticeship grant. Record 2 if the RTI was funded by WIOA Title I (Adult, Dislocated Worker, and/or Youth). Record 3 if the RTI was funded by WIOA funding that was not Title I (i.e., either Title II or Title IV). Record 4 if the RTI was funded by a State funding source. Record 5 if the RTI was funded by the GI Bill. Record 6 if the RTI was funded by a PELL Grant. Leave blank if this data element does not apply. | 1 = Grant Funded 2 = WIOA (Title I) 3 = WIOA (not Title I) 4 = State Funding Source 5 = GI Bill 6 = PELL Grant | | | | | | | | | | | | | | | | | | | |
| 2917 | Exit Wage | DE 5.2 | Record the hourly wage received on the Date of Exit. Leave blank if this data element does not apply. | 000.00 | | | | | | | | | | | | | | | | | | R | R |
| 2918 | Wage at Entry into Apprenticeship | DE 5.2 | Record the hourly wage received on the date of entry into the apprenticeship program. | 000.00 | | | | | | | | | | | | | | | | | | R | R |

| DATA ELEMENT NO. | DATA ELEMENT NAME | DATA TYPE/ FIELD LENGTH | DATA ELEMENT DEFINITIONS/INSTRUCTIONS | CODE VALUE | Reportable Individual[2] | Wagner-Peyser | WIOA Adults | WIOA Dislocated Workers | WIOA Youth | Dislocated Worker Grants (DWG) | TAA | National Farmworker Jobs Program (NFJP) | Indian and Native American Program (INA) | Reentry Employment Opportunities (REO) (Adult) | Reentry Employment Opportunities (REO) (Youth) | YouthBuild | Jobs for Veterans' State Grants (JVSG) | H1B | Job Corps | Incumbent Worker (Adult/DW Funded) | SCSEP | Apprenticeship | Demonstration Grants |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 2920 | Apprenticeship Grant Number | AN 14 | Record the 14 character apprenticeship grant number. The grant number should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program | XXXXXXXXXXXXXX | | | | | | | | | | | | | | | | | | R | R |
| **SECTION E.11 ADDITIONAL MISC. ELEMENTS (ADDED 2021)** | | | | | | | | | | | | | | | | | | | | | | |
| 3000 | Direct Referral from Justice System | IN 1 | Record 1 if participant is a direct referral from the Justice System. Record 2 if participant is not a direct referral from the Justice System. | 1 = Yes 0 = No | | | | | | | | | | R | R | | | | | | | | R |
| 3001 | Most Recent Date Participating in Community Service/Restorative Justice | DT 8 | Record the most recent date on which the enrollee participated in Community Service/Restorative Justice Leave blank if enrollee did not participate in Community Service/Restorative Justice | YYYYMMDD | | | | | | | | | | R | R | | | | | | | | R |
| 3002 | Received Legal Services | IN 5 | Record 1 if participant received legal services regarding outstanding warrants. Record 2 if participant received legal services regarding child support. Record 3 if participant received legal services to obtain a restraining order. Record 4 if participant received legal services seeking to seal or expunge records. Record 5 if participant received other legal services. Leave blank if participant did not receive legal services | 1 = Outstanding warrants 2 = Child support 3 = Obtain restraining order 4 = Seal or expunge records 5 = Other legal services | | | | | | | | | | R | R | | | | | | | | R |
| 3003 | Received Housing Assistance, Substance Abuse Treatment, or Mental Health Treatment | IN 5 | Record 1 if participant received housing assistance (non-emergency) Record 2 if participant received substance abuse treatment (non-emergency) Record 3 if participant received mental health treatment (non-emergency) Record 4 if participant received emergency housing assistance Record 5 if participant received emergency substance abuse treatment Record 6 if participant received emergency mental health treatment | 1 = Housing assistance 2 = Substance abuse treatment 3 = Mental health treatment 4 = Emergency housing assistance 5 = Emergency substance abuse treatment 6 = Emergency mental health treatment | | | | | | | | | | R | R | | | | | | | | R |
| 3004 | Individualized Services Provided Virtual/Online | IN 1 | Record the method in which the individualized services other than training were delivered to the participant at any point during program participation. Record 1 if the participant received individualized services other than training that were delivered only through virtual/online methods. Record 2 if the participant received individualized services other than training that were delivered through in-person and virtual/online methods. Record 0 if the participant received individualized services other than training that were delivered only through in-person methods. Leave blank if the participant did not receive any individualized services other than training at any point during program participation. | 1 = Virtual/Online 2 = Mix of In-person and Virtual/Online 0 = No Virtual/Online, In-person Only | | R | R | R | R | R | R | | | | | | R | R | | | R | | R |
| 3005 | Transitioning Service Member Warm Handover | IN 1 | Record 1 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) was referred or offered additional services through the Department of Labor by his/her military branch. Record 2 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) received information about DOL services during their transition but was NOT sent to the AJC by his/her military officer. Record 3 if the service member was not made aware of DOL services from his/her Commander. Record 0 if the participant is not a transitioning service member. | 1 = Yes, received information and was sent to the AJC by military officer. 2 = Yes, received information but visited AJC on their own accord. 3 = No, information was not provided. 0 = Not TSM | | R | | | | | | | | | | | R | | | | | | R |
| 3006 | Transitioning Service Member Housing Plan | IN1 | Record a 1 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) was assessed by the military as having an adequate post-transition housing plan. Record a 2 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) was assessed by the military as not having an adequate post-transition plan. Record 0 if the participant is not a transitioning service member. | 1= Yes, adequate housing plan 2 = No, housing plan is not adequate or non-existent 0 = Not TSM | | R | | | | | | | | | | | R | | | | | | R |
| 3007 | Referred from Department of Veterans Affairs (VA) Services | IN 1 | This data element reflects the agency where the participant was referred from. Record 1 if the participant was referred to the AJC from the Department of Veterans Affairs Vocational Rehabilitation and Employment Service for Labor Market Information to be used in development of the Individual Written Rehabilitation Plan (IWRP). Note: this alone will not begin a participation period. Record 2 if the participant was referred from the Department of Veterans Affairs Vocational Rehabilitation and Employment Service for employment services. Record 3 if the participant was referred from the Department of Veterans Affairs Regional Office for employment services. Record 4 if the participant was referred from the Department of Veterans Affairs Medical Center for employment services. Record 5 if the participant entered into a Registered Apprenticeship program and a Department of Veterans Affairs Vocational Rehabilitation participant or if the participant was a registered apprentice at the time of program entry and Department of Veterans Affairs Vocational Rehabilitation participant Record 9 if the participant indicates they were referred by the Department of Veterans Affairs, but does not specify which of the above programs referred them. | 1 = Referred from the VA VR&E for LMI to be used in development of the IWRP 2 = Referred from the VA VR&E for employment services 3= Referred from the VA Regional Office for employment services. 4= Referred from the VA Medical Center for employment services. 5 = Department of Veterans Affairs Vocational Rehabilitation Funded 9 = Referred by VA, Entity Unknown | | R | | | | | | | | | | | R | | | | | | R |
| 3008 | Family Unit Size | IN 2 | Record the number of individuals (including the participant) that live with the individual and are a part of the individual's family, as defined by 20 CFR 685.110. | xx | | | | | | | | R | | | | | | | | | | | R |

Footnotes
1. Cells populated with "R" represent data elements that must be collected by the corresponding program.
2. The collection of data elements for reportable individuals is limited to the core programs (Adult, Dislocated Worker, Youth, and Wagner-Peyser Employment Service) only. The collection of data element 413 for reportable individuals is only required for Wagner-Peyser Employment Service programs.

**Public Burden Statement (1205-0521)**

*Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.