**U.S. Department of Labor**

**Employment and Training Administration**

**Services to Migrant and Seasonal Farmworkers Report, ETA Form 5148**

# Attachment II

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| State: | Region: | Quarter Ending: | PY: | Report Run Date: | OMB Approval No. 1205 - 0039 Expiration Date: 02/28/2027 |

**Services To Migrant and Seasonal Farmworkers Report (Part 1)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Previous**  **Cumulative Reported** | **Report Period** | **Cumulative** |
| 1. **Outreach Services** |  |  |  |
| 1. Best estimate of MSFWs in the State |  |  |  |
| 1. Number of MSFWs in the State contacted by ES staff |  |  |  |
| 1. **Monitoring System (Federal and State monitoring reviews)** |  |  |  |
| 1. Total number of significant MSFW one-stop centers |  |  |  |
| 1. Number of significant MSFW one-stop centers reviewed |  |  |  |
| 2. Number of non-significant MSFW one-stop centers reviewed |  |  |  |
| 1. **Agricultural Recruitment System for U.S. Workers (ARS)** |  |  |  |
| **Total number of agricultural job orders placed at the local level (sum of 1 and 2).** |  |  |  |
| 1. Total number of agricultural job orders placed at the local level, not attached to an H-2A application. |  |  |  |
| 1. Intrastate (number of local agricultural job orders placed into intrastate clearance). |  |  |  |
| 1. Interstate (number of intrastate clearance orders placed into interstate clearance process). |  |  |  |
| 1. Total number of agricultural job orders placed at the local level, attached to an   H-2 application. |  |  |  |
| 1. Total number of clearance orders attached to an H-2A application placed into the clearance system (both intrastate and interstate) |  |  |  |
| 1. Total Number of U.S. workers referred to all local agricultural job orders and clearance orders. |  |  |  |
| 1. Total number of U.S. workers placed on all local agricultural job orders and clearance orders. |  |  |  |
| 1. Total number of clearance orders with U.S. workers placed. |  |  |  |
| 1. Number of clearance orders on which field checks were conducted. |  |  |  |
| 1. Number of field checks on which violations were resolved locally (without referral to an enforcement agency). |  |  |  |

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| 1. Number of field checks on which violations were referred to an enforcement agency. |  |  |  |
| 1. Number of employers for whom discontinuation of service proceedings were initiated. |  |  |  |
| 1. **Complaint System** |  |  |  |
| 1. Total complaints received |  |  |  |
| 1. MSFW, ES-related against the employer |  |  |  |
| 1. MSFW, ES-related against the local employment service office |  |  |  |
| 1. MSFW, employment-related law |  |  |  |
| 1. Non-MSFW, ES-related against the employer |  |  |  |
| 1. Non-MSFW, ES-related against the local employment service office |  |  |  |
| 1. Non-MSFW, employment-related law |  |  |  |
| 1. Types of complaints |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Wage related |  |  |  |
| 1. Housing |  |  |  |
| 1. Child labor |  |  |  |
| 1. Pesticides |  |  |  |
| 1. Health/safety |  |  |  |
| 1. Discrimination |  |  |  |
| 1. Transportation |  |  |  |
| 1. Trafficking |  |  |  |
| 1. Sexual harassment/coercion/assault |  |  |  |
| 1. Other (specify) |  |  |  |

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| 1. Total number of MSFW complaints resolved at the local level |  |  |  |
| 1. Total number of MSFW ES-related complaints unresolved after 45 days |  |  |  |

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| --- | --- | --- | --- |
| 1. **Apparent Violations** |  |  |  |
| 1. Total number of apparent violations |  |  |  |
| 1. Employment Service related against the employer |  |  |  |
| 1. Employment Service related against the local employment service office |  |  |  |
| 1. Employment-Related law |  |  |  |
| 1. Total apparent violations resolved at the local level |  |  |  |
| 1. Type of apparent violations |  |  |  |
| 1. Wage related |  |  |  |
| 1. Housing |  |  |  |
| 1. Child labor |  |  |  |
| 1. Pesticides |  |  |  |
| 1. Health/safety |  |  |  |
| 1. Discrimination |  |  |  |
| 1. Transportation |  |  |  |
| 1. Trafficking |  |  |  |
| 1. Sexual harassment/coercion/assault |  |  |  |
| 1. Other (specify) |  |  |  |

**Narrative Responses**

**(Part 2)**

|  |  |
| --- | --- |
| **A - Issues, Accomplishments, and Anecdotes** | |
| **Activity Comments** | |
|  | |
| 1. Outreach |  |
| 1. Monitoring (such as common issues, findings, observations, or best practices). |  |
| 1. MSFW Apparent Violations |  |
| 1. MSFW Complaints |  |
|  |

|  |  |
| --- | --- |
| 1. Field Checks on Clearance Orders |  |
|  |
| **B - Training and Technical Assistance** | |  |
| Local Office Visits, Conferences, workshops, training opportunities |  |
| **C - Other** | |  |
| Other |  |

**Services Provided to Migrant and Seasonal Farmworkers**

# Minimum Service Level Indicators

**(Part 3)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **DATA ITEMS** | Compliance  Level | Actual  Level  (%) | Actual Denominator | Actual Numerator | Compliant? | |
|  |  |  |  |  | Yes | No |
| 1. Reviews of significant MSFW one-stop centers | 100% |  |  |  |  |  |
| 1. Field checks conducted when the SWA has made placements on 10 or more agricultural clearance orders during the quarter | 25% |  |  |  |  |  |
| 1. Field checks conducted when the SWA has made placements on 9 or fewer agricultural clearance orders (but at least one) during the quarter | 100% |  |  |  |  |  |
| 1. Outreach contacts per quarter | 100% |  |  |  |  |  |
| 1. Timely processing of complaints | 100% |  |  |  |  |  |

For the above data items 1 through 5, the system will auto-populate the category indicating whether the state is compliant.

Total number of minimum service level indicators in compliance[[1]](#footnote-1):

Comments:

**Services Provided to Migrant and Seasonal**

**Annual Summary**

**(Part 4)**

**(Only to be completed by SWA after Fourth Quarter ends.)**

|  |  |
| --- | --- |
| **State Annual Summary of Services to MSFWs**  20 CFR 653.108(u) | |
| This section is completed only after the fourth quarter ends. This Annual Summary describes how the State provided employment and training services to MSFWs within the State based on statistical data, reviews, and other activities as required at 20 CFR 653, and 658.  The summary must include: | |
| (1) A description of the activities undertaken during the program year by the SMA pertaining to their responsibilities set forth in 20 CFR 653.108 and other applicable regulations in 20 CFR 653. |  |
| (2) An assurance that the SMA is a senior-level official who reports directly to the State Administrator or the State Administrator’s designee as described at 20 CFR 653.108(c). |  |
| (3) An evaluation of SMA staffing levels, including: |  |
| (i) An assurance the SMA devotes all of their time to Monitor Advocate functions or, if the SMA conducts their functions on a part-time basis, an assessment of whether all SMA functions are able to be effectively performed on a part-time basis; |  |
| (ii) An assessment of whether the performance of SMA functions requires increased time by the SMA (if part-time) or an increase in the number of ES staff assigned to assist the SMA in the performance of SMA functions, or both. |  |
| (4) A summary of the monitoring reviews conducted by the SMA, including: |  |
| (i) A description of any problems, deficiencies, or improper practices the SMA identified in the delivery of services; |  |
| (ii) A summary of the actions taken by the SWA to resolve the problems, deficiencies, or improper practices described in its service delivery; and |  |
| (iii) A summary of any technical assistance the SMA provided for the SWA, ES offices, and outreach staff. |  |
| (5) A summary and analysis of the outreach efforts undertaken by all significant and non-significant MSFW one-stop centers, as well as the results of those efforts, and an analysis of whether the outreach levels and results were adequate. |  |
| (6) A summary of the State’s actions taken under the Complaint System described in 20 CFR 658, Subpart E, identifying any challenges, complaint trends, findings from reviews of the Complaint System, trainings offered throughout the year, and steps taken to inform MSFWs, employers, and farmworker advocacy groups about the Complaint System. |  |
| (7) A summary of how the SMA is working with WIOA sec. 167 NFJP grantees, the State-level EO Officer, and other organizations serving farmworkers, employers, and employer organizations, in the State, and an assurance that the SMA is meeting at least quarterly with these individuals and representatives of these organizations. The summary should include whether the SMA has established an MOU with the NFJP grantee or other farmworker organizations in accordance with 20 CFR 653.108 (l). |  |
| (8) A summary of the statistical and other MSFW-related data and reports gathered by SWAs and ES offices for the year, including an overview of the SMA’s involvement in the SWA’s reporting systems. |  |
| (9) A summary of the training conducted for ES staff on techniques for accurately reporting data. |  |
| (10) A summary of activities related to the AOP and an explanation of whether those activities helped the State reach the objectives described in the AOP. At the end of the 4-year AOP cycle, the summary must include a synopsis of the SWA’s achievements over the previous 4 years to accomplish the objectives set forth in the AOP, and a description of the objectives which were not achieved and the steps the SWA will take to address those deficiencies. |  |
| (11) For significant MSFW one-stop centers, a summary of the State’s efforts to comply with 20 CFR 653.111. |  |

Submitted by:

Submission Date:

Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control Number. Respondent's obligation to reply to these requirements is required to obtain or retain benefits (44 USC 5301). Public reporting burden for this collection of information is estimated to average 4.43 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employment and Training Administration, Office of Workforce Investment, Room C-4510, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0039).

1. This will be auto-populated. [↑](#footnote-ref-1)