



Subgrantee Name
01 Application Number
02 Agency Code
Social Security Number

WORKFORCE INVESTMENT ACT

DATA ELEMENT VERIFICATION

Last Name	First Name / Middle Initial
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<p>Section A - Birth Date <i>(One or more documents from this column is required)</i></p> <ul style="list-style-type: none"> Baptismal Record <input type="checkbox"/> Birth Certificate <input type="checkbox"/> DD-214 <input type="checkbox"/> Report of Transfer or Discharge <input type="checkbox"/> Driver's License <input type="checkbox"/> Federal, State or Local ID Card <input type="checkbox"/> Passport <input type="checkbox"/> Hospital Record of Birth <input type="checkbox"/> Public Assist/Social Services records <input type="checkbox"/> School Records or ID Card <input type="checkbox"/> Work Permit <input type="checkbox"/> Cross Match with Vital Statistics <input type="checkbox"/> Tribal Records <input type="checkbox"/> 	<p>Section C - Dislocated Worker <i>(One or more documents from this column is required)</i></p> <ul style="list-style-type: none"> Verification of Employer <input type="checkbox"/> Rapid Response List <input type="checkbox"/> Notice of Layoff <input type="checkbox"/> Public Announcement w/ follow-up cross-match w/ UI <input type="checkbox"/> Self-Attestation <input type="checkbox"/> <p>Section D - Selective Services <i>(One or more documents from this column is required)</i></p> <ul style="list-style-type: none"> Acknowledgement Letter <input type="checkbox"/> DD-214 <input type="checkbox"/> Screen Print of the Selective Service Verification <input type="checkbox"/> <small>(Internet site: www.gov/regverification1.asp)</small> Selective Service Status Information Letter <input type="checkbox"/> Selective Service Registration Card <input type="checkbox"/> Selective Service Registration Record (Form 3A) <input type="checkbox"/> Selective Service Verification Form <input type="checkbox"/> Stamp Post Office Receipt of Registration <input type="checkbox"/> Other (see case notes) <input type="checkbox"/>
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Section B - Income Eligibility

Low Income Y or N

Documentation: _____

TANF Y or N

Documentation: _____

Other Public Assistance Y or N

Documentation: _____

Section E - Veteran Status
(One or more documents from this column is required)

- DD-214
- Veterans Administration Letter or Record

Section F - U.S. Work Authorization *
Document that Satisfies List A or a combination of List B and List C of Form I-9
Select one or more documents from List A or one document from both List B and List C

<p>List A - Verification Document that Establishes both Identity and Employment Eligibility</p> <ul style="list-style-type: none"> 1. U.S. Passport (unexpired or expired) <input type="checkbox"/> 2. Permanent Resident or Alien Registration Card <input type="checkbox"/> 3. Unexpired Foreign passport <input type="checkbox"/> 4. Employment Authorization Document w/photo <input type="checkbox"/> 5. Unexpired 1) foreign passport and 2) Arrival-Departure Record <input type="checkbox"/> <p>List C - Verification Document that Establishes Employment</p> <ul style="list-style-type: none"> 1. U.S. Social Security card <input type="checkbox"/> 2. Certification of Birth Abroad <input type="checkbox"/> 3. Original or certified copy of a birth certificate <input type="checkbox"/> 4. Native American Tribal document <input type="checkbox"/> 5. U.S. Citizen ID Card (Form I-197) <input type="checkbox"/> 6. ID card for use of Resident Citizen in the U.S. <input type="checkbox"/> 7. Employment authorization document <input type="checkbox"/> 	<p>List B - Verification Document that Establishes Identity</p> <ul style="list-style-type: none"> 1. A state issued Driver's License or ID card <input type="checkbox"/> 2. ID card issued by federal, state or local govt <input type="checkbox"/> 3. School ID card with a photograph <input type="checkbox"/> 4. Voter's registration card <input type="checkbox"/> 5. U.S. Military card or draft record <input type="checkbox"/> 6. Military Dependent's ID card <input type="checkbox"/> 7. U.S. Coast Guard Merchant Mariner Card <input type="checkbox"/> 8. Native American tribal document <input type="checkbox"/> 9. Driver's license issued by Canadian government <input type="checkbox"/> <p>For persons under age 18 who are unable to present a document listed above:</p> <ul style="list-style-type: none"> 10. School record or report card <input type="checkbox"/> 11. Clinic, doctor or hospital record <input type="checkbox"/> 12. Day-care or nursery school record <input type="checkbox"/>
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* For additional information related to U.S. Work Authorization, see Form I-9.

Date _____ Case Manager Signature _____

July 2008