



# Determination of Need for Training and Suitability Policy and Procedures

## A. Determination of Need for Training

The Workforce Innovation and Opportunity Act program is designed to provide employment and training opportunities to those who can benefit from and who are most in need of such opportunities. However, WIOA is not an entitlement program. This requires that eligible individuals are determined to be suitable for program enrollment based upon a consistent and equitable assessment that is relevant to the level of services for which the individuals are applying.

Proposed § 680.220(b) requires that the case file must contain a determination of need for training services under § 680.210 as determined through the interview, evaluation, or assessment, and career planning informed by local labor market information and training provider performance information, or through any other career service received. (see attached adult/osy need for training or DW need for retraining documentation forms).

Although verification documents will reflect participant information as of the application date, demographic characteristics entered in GEO Solutions should be updated to reflect the participant's actual circumstances as of the enrollment date.

## B. Suitability

Selection of customers for WIOA services is based on both need and suitability. Suitability must be determined through the assessed ability and the perceived personal commitment of the participant to attend activities, to successfully complete these activities and to acquire employment and/or post-secondary/advanced skill placement (**WIOA sec. 134 (c) (3) (b)**). Individuals may be fully eligible and in need of services, however they may not be suitable pending resolution of immediate issues (academic, personal, etc.) or personal barriers. TABE scores, combined with assessment data collection during interviews (such as review of barriers, dependency, employment history, interest, and etc.) helps determine suitability or need for training assistance. Staff will determine suitability during orientations and other activities with the participants.

Considering the information above, circumstances that may make an individual not suitable for WIOA includes, but is not limited to, the following:

- a. Ineligible WIOA application (automatically not suitable)
- b. Individual requiring extensive support beyond the ability of what WIOA provides
- c. Individual whose training needs are served more appropriately by another agency

- d. Individual whose training desires cannot be met by WIOA funding
- e. Individual whose living are in immediate crisis and cannot participant in WIOA activities at this time
- f. Individual who cannot allocate sufficient time for the required commitment to the WIOA program
- g. Consistent failure to show for scheduled appointments
- h. Individual who requires or insists on services sooner than WIOA can provide them

All applicants will be given an appointment. After eligibility is determined, staff must assess suitability. Should an applicant be eligible for WIOA and not suitable for the program, there must be proper documentation on why the applicant was denied access to the program. All denials must be maintained in a file for three (3) program years. There should also be case notes in the file that support suitability determination.

### C. Enrollment Procedures in GEO

- 1.) Click on **Manage Individual** then click on **Create an Individual**
  - Assign Username (First initial, last name, and last 4 numbers of social)
  - Complete all required fields using application and documentation
- 2.) Click on **Individual Portfolio** then **Case Management Profile** then **Programs** tab.
- 3.) Click on **Create Title 1 – Workforce Development (WIOA) Application** to create Application
  - Application Date (date the application was signed by applicant)
  - Click on which funding stream the participant is eligible for (Adult, DW, Youth)
  - Eligibility Date (date on last page of application)
  - Office Location and One Stop Location should be YOUR OFFICE location.
  - Complete all required fields using application and documentation
  - Click **FINISH**
- 4.) Expand Gray Box with the WIOA Application:
- 5.) Click on **Participation section**:
  - Click on **Create Participation**.
    - ✓ Verify information and click **NEXT**
  - Activity Codes to be assigned; if applicable: (**ASSIGN A CASE MANAGER!!**)
    - ✓ 202-Career Guidance (complete required fields)

- ✓ 203-Objective Assessment (complete required fields)
  - ✓ 205-Develop Service Strategy (complete required fields)
  - ✓ 181 and/or 182-Support Service (complete required fields)
  - ✓ 300-Occupational Skills Training (complete required fields)
- ❖ If an applicant is not enrolled within thirty (30) calendar days, the process begins again, with a new application date and (as appropriate) updated verification documents.

#### D. Enrollment Terms

- Application - the process of collecting information and necessary documentation to support a determination of eligibility and suitability. This information may be collected through methods that include electronic data transfer, personal interview, or an individual's application.
- Application date - the date of the application and the first day a Career Advisor begins collecting eligibility information from an applicant.
- Eligibility date - the date on which the Career Advisor signs the application indicating the individual has met all eligibility requirements for WIOA services.
- Enrollment date - the date on which the individual begins receiving his/her first service following completion of the application and eligibility determination is made. A maximum of thirty (30) days can elapse between the application date and the date of enrollment. The enrollment process is concluded once the Career Advisor completes GEO Solutions data entry requirements.

## ASSESSMENT OF APPLICANT'S NEED FOR TRAINING for ADULT/OSY

This form should be completed prior to assignment of training services. The need for training should be addressed in the casenotes and a copy placed in the participant's file.

You will need to explain each item identified in the comment section.

NAME:		SSN:	COMMENTS
YES	NO	CONSIDERATION	
		1 Is the applicant in need of training services to obtain or retain employment that leads to economic self-sufficiency or wages comparable to or higher than wages from previous employment?	
		2 Does the applicant have the skills and qualifications to successfully participate in the selected program of training services?	
		3 Does the applicant lack skills for in-demand occupations in our area?	
		4 Is the applicant unable to obtain grant assistance from other sources to pay the costs of such training, including Pell, or requires WIOA assistance in addition to other sources, including Pell?	
		5 Has the applicant selected a training program that is currently on the State ETPL and an in-demand occupation for our area?	
		6 Are there any other qualifying factors?	

The individual listed above is/is not in need of training based on counseling and assessment activities.

\_\_\_\_\_  
Career Advisor Signature

\_\_\_\_\_  
Date

## ASSESSMENT OF A DISLOCATED WORKER APPLICANT'S NEED FOR RETRAINING

<b>NAME:</b>		<b>SSN:</b>	
<b>YES</b>	<b>NO</b>	<b>CONSIDERATION</b>	<b>COMMENTS</b>
		1 Is the applicant unlikely or unable to obtain or retain employment that leads to economic self-sufficiency or wages comparable to or higher than wages from previous employment through career services alone?	
		2 Does the applicant have the skills and qualifications to successfully participate in the selected program of training services?	
		3 Is the applicant unable to obtain grant assistance from other sources to pay the costs of such training, including Pell, or requires WIOA assistance in addition to other sources, including Pell?	
		4 Is the applicant a member of a worker group covered under a petition filed for TAA and is awaiting a determination?	
		5 Has the applicant selected a program of training services that is directly linked to the employment opportunities in the local area or region, or in another area to which the individual is willing to commute or relocate?	

The individual listed above is/is not in need of retraining based on counseling and assessment activities.

\_\_\_\_\_  
 Career Advisor Signature

\_\_\_\_\_  
 Date