Follow the instructions below to complete the WIOA Application Adult Basic Career Services Eligibility. The completion of the application will be for adults 18 and over that could be provided services from the Adult and Dislocated Worker Funding Stream.

1. Enter the RCOU for your center.
2. Enter the applicant's Social Security Number and indicate that it was verified.
3. Enter the Date of the Application; this is when the applicant starts the eligibility process.
4. Enter the applicant's Last Name, First Name and Middle Initial.
5. Enter the Eligibility Date for the Adult Basic Career Services Eligibility. This is the date when all documentation for eligibility has been obtained.
6. Leave Blank.
7. Leave Blank.
8. Leave Blank.
9. Enter the Residential Address for the applicant and indicate that it was verified.
10. Enter the Primary Phone Number.
11. Indicate the Primary Phone Type.
12. Indicate the Phone Mode.
13. Enter an Alternate Phone Number.
14. Indicate the Alternate Phone Type.
15. Indicate the Phone Mode.
16. Enter the applicant's Email address.
17. Enter the applicant's Date of Birth and indicate that it was verified.
18. Indicate the applicant's Gender.
19. Indicate if the applicant is Registered for the Selective Service and indicate that it was verified. For males born on or after January 1, 1960. For females enter "Not Applicable".
20. Indicate if the applicant is a U.S. Citizen or Authorized to work in the U.S. and indicate that it was verified.
21. Indicate whether or not the applicant is Considered to be of Hispanic Heritage.
22. Indicate whether or not the applicant is Considered to be of Haitian Heritage.
23. Indicate the applicant's Race.
24. Indicate whether or not the applicant is Considered to have a disability, if "Yes" indicate that it was verified.
25. Indicate the Type of Disability, if number 24 is "Yes".
26. Indicate if the applicant is a Transitioning Service Member.
27. Indicate the Type of Transitioning Service, if number 29 is "Yes".
28. Indicate the Estimated Discharge Date if the service member provides you with a future date.
29. Indicate the Eligible Veteran Status and indicate that it was verified. If not a veteran enter "No".

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30. Indicate whether or not the applicant Served more than 1 tour of duty. If "Yes" enter the discharge begin and end date.
31. Indicate whether or not the applicant is a Campaign Veteran.
32. Indicate whether or not the applicant is a Disabled Veteran.
33. Indicate whether or not the applicant is a Recently separated veteran (within the last 48 months).
34. Indicate if the applicant attended a Transition Assistance Program (TAP) Workshop within the last 3 years. If number 26 is "Yes" this must be completed. If number 26 is "No" this will be "No".
35. Indicate the applicant's Employment Status and indicate that it was verified.
36. Indicate whether or not the applicant is under-employed, if employment has been indicated in number 35.
37. Indicate if the applicant is Receiving Unemployment Compensation and indicate that it was verified.
38. Enter the Begin Date of Most Recent Job, if the applicant was employed in the past 26 weeks prior to eligibility date.
39. Enter the End Date of Most Recent Job, if the applicant was employed in the past 26 weeks prior to eligibility date.
40. Enter the Hours per Week at Most Recent Job, if the applicant was employed in the past 26 weeks prior to eligibility date.
41. Enter the Number of Weeks unemployed if the applicant worked in the past 26 weeks prior to eligibility date.
42. Indicate whether or not the applicant Meets Long Term Unemployment. If an applicant has been unemployed for 26 weeks or more.
43. Enter the Current or most recent hourly rate of pay if there was employment in the past 26 weeks prior to eligibility date and indicate that it was verified.
44. Enter the applicant's Occupation of Most recent Employment prior to WIOA participation (if available).
   **NOTE: If the applicant worked in the last 26 weeks and received Public Assistance the employment information should be left blank (numbers 35-44).**
45. Indicate the applicant's Farmworker Status, if not a farmworker enter "No".
46. Indicate the Type of Qualifying Farmwork if number 46 is "Yes".
47. Enter None of the above. Individual does not meet the definition of Dislocated Worker.
48. Leave Blank.
49. Leave Blank.
50. Leave Blank.
51. Leave Blank.
52. Leave Blank.
53. Leave Blank.
54. Leave Blank.
55. Leave Blank.

56. Leave Blank.
57. Leave Blank.
58. Leave Blank.
59. Leave Blank.
60. Indicate the Current Highest School Grade Completed and indicate that it was verified.
61. Indicate the School Status and indicate that it was verified.
62. Indicate whether or not the applicant is Attending any school (per state definition) excluding Adult Education, if "Yes" indicate that it was verified.
63. Leave Blank.
64. Leave Blank.
65. Leave Blank.
66. Leave Blank.
67. Leave Blank.
68. Leave Blank.
69. Indicate whether or not the applicant is an English language learner. This is a person that has provided documentation that they are currently enrolled in a training institution and learning English in addition to their native language and indicate that it was verified.
70. Indicate if the applicant is a High school dropout.
71. Leave Blank.
72. Leave Blank.
73. Leave Blank.
74. Leave Blank.
75. Leave Blank.
76. Leave Blank.
77. Leave Blank.
78. Leave Blank.
79. Leave Blank. This will only apply when the Governor has determined Special barriers to employment.
80. Leave Blank.
81. Leave Blank.
82. Leave Blank.
83. Leave Blank. This will only apply when the Governor has determined Special barriers to employment.
84. Indicate if the Applicant meets the definition for low income.
85. Indicate if the applicant is eligible for Adult Basic Career Services.
86. Indicate if the applicant is eligible for Adult.
87. Indicate if the applicant is eligible for Dislocated Worker.
88. Leave Blank.
89. Indicate Not applicable unless notified of a grant.
90. Indicate Not applicable unless notified of a grant.
91. Indicate Not applicable unless notified of a grant.

92. Indicate Not applicable unless notified of a grant.
93. Indicate Not applicable unless notified of a grant.
94. Indicate Not applicable unless notified of a grant.
95. Indicate Not applicable unless notified of a grant.
96. Indicate Not applicable unless notified of a grant.
97. Signature and Date required for the applicant and staff. Same as the "Eligibility" date.  This does not have to be the same date as the Date of Application.