LA:RISE YOUTH ACADEMY

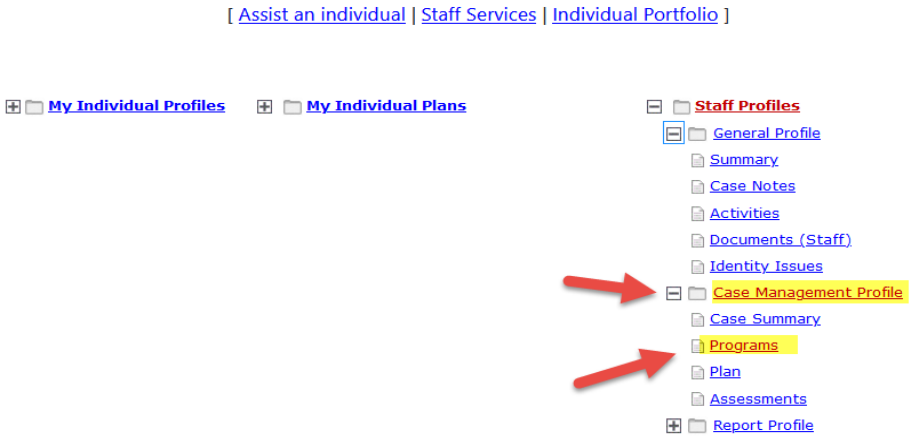
Economic and Workforce Development Department
Presented by: MIS Unit

CalJOBS Home Page

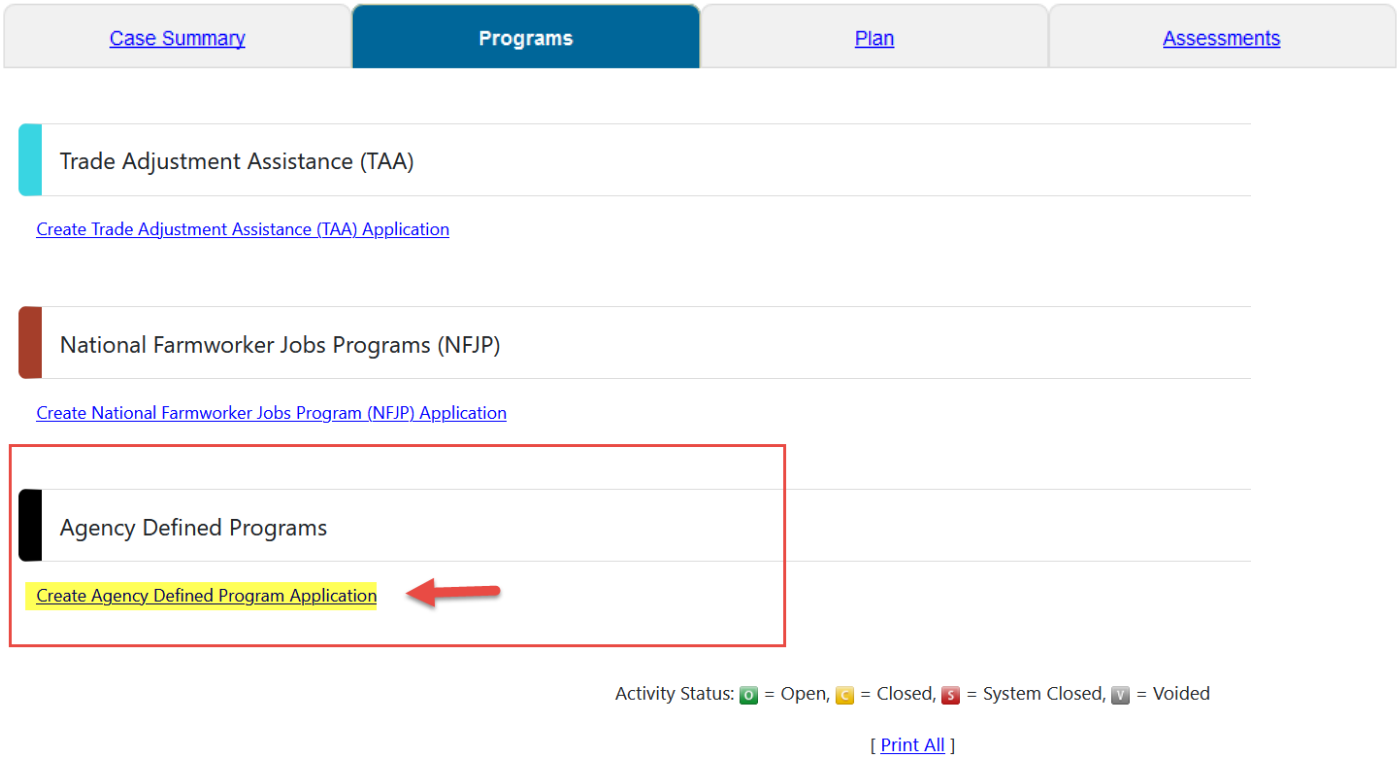
www.caljobs.ca.gov

Portfolio Section

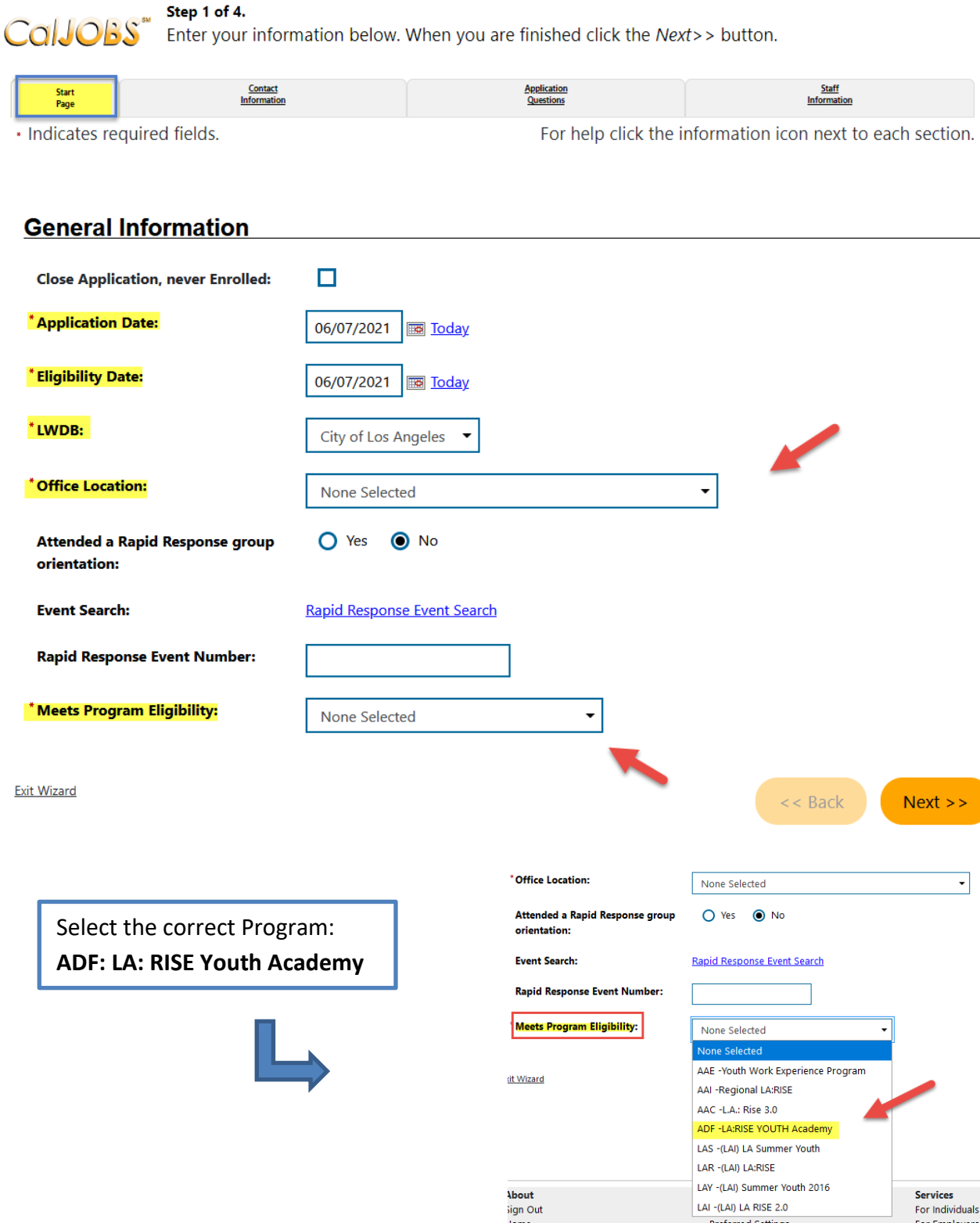
To create a WIOA application, navigate towards Staff Profiles > Case management Profile > Programs.



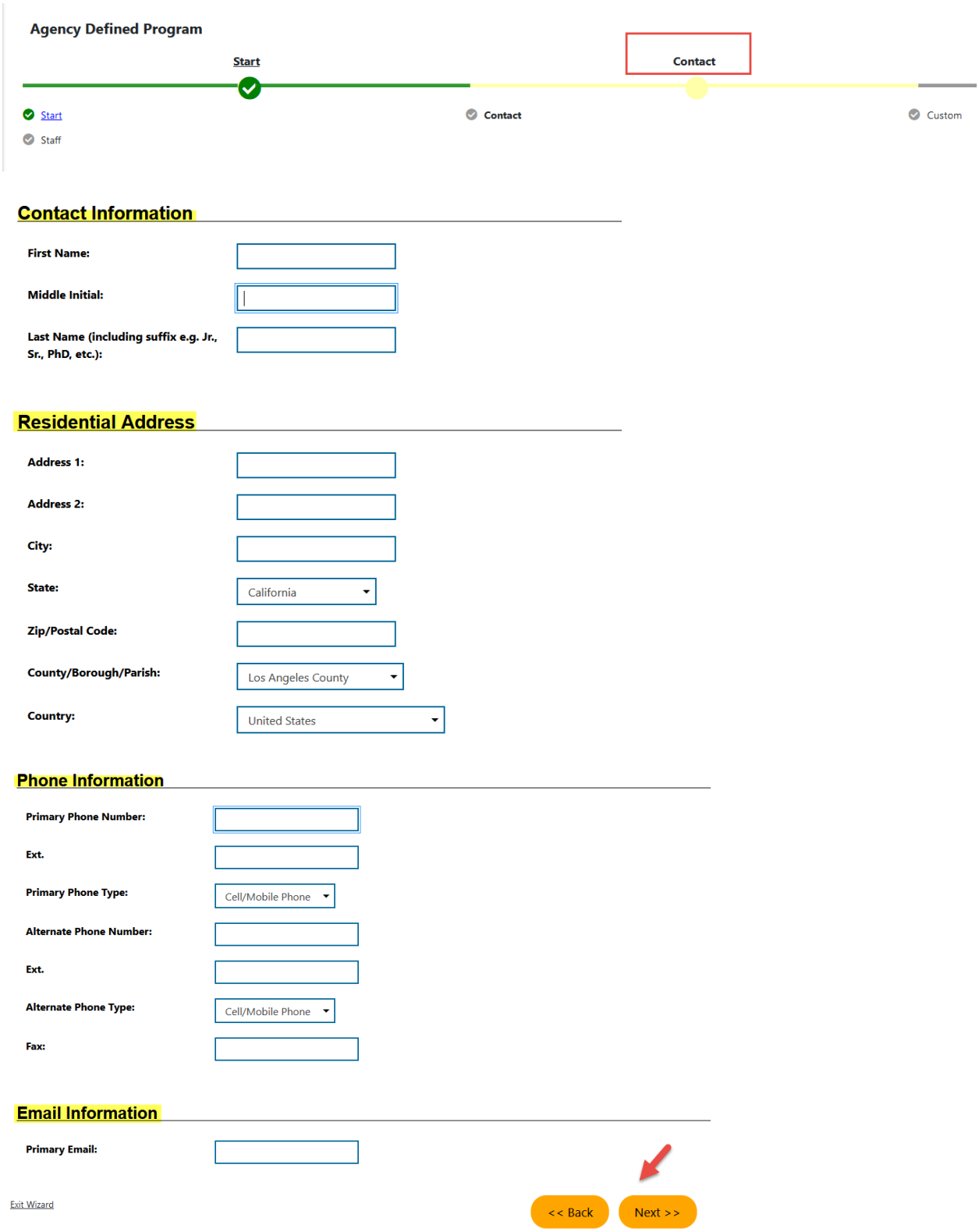
Program Page



The Generic Module has a New Name – Agency Defined Programs.


Step 1 of 4.
Enter your information below. When you are finished click the Next>> button.
Start Page
Contact Information
Application Questions
Staff Information
* Indicates required fields.
For help click the information icon next to each section.
General Information
Close Application, never Enrolled:
*Application Date:
06/07/2021
Today
*Eligibility Date:
06/07/2021
Today
*LWDB:
City of Los Angeles
*Office Location:
None Selected
Attended a Rapid Response group orientation:
Yes
No
Event Search:
Rapid Response Event Search
Rapid Response Event Number:
*Meets Program Eligibility:
None Selected
Exit Wizard
<< Back
Next >>
Select the correct Program:
ADF: LA: RISE Youth Academy
*Office Location:
None Selected
Attended a Rapid Response group orientation:
Yes
No
Event Search:
Rapid Response Event Search
Rapid Response Event Number:
*Meets Program Eligibility:
None Selected
None Selected
AAE -Youth Work Experience Program
AAI -Regional LA:RISE
AAC -L.A.: Rise 3.0
ADF -LA:RISE YOUTH Academy
LAS -(LAI) LA Summer Youth
LAR -(LAI) LA:RISE
LAY -(LAI) Summer Youth 2016
LAI -(LAI) LA RISE 2.0
Services
For Individuals

Contact Information



LA RISE – Youth Academy Application Question

LA:RISE YOUTH Academy

LA:RISE is administered by the City of Los Angeles. The LA:RISE provides transitional employment services and supportive services and career development services to combat homelessness. The LA:RISE Youth Academy will focus on serving specifically individuals 18 to 24 years of age who are experiencing homelessness or at-risk of experiencing homelessness. Every young adult participant will be linked to education, employment, and social well-being services while permanent housing is being established to move them to a future of self-sufficiency and economic mobility. The services will include:

I. Educational, career, and social wellbeing assessments
II. Case management
III. Support services and barrier removal
IV. Work readiness and vocational training
V. Subsidized employment
VI. Job placement services

***1: Registration Date:** Today

***2: Social Enterprise (SE)/Transitional Employment Provider: (Please select one response):**

- ○ CRCD Enterprises
- ○ Goodwill SoCal
- ○ Los Angeles LGBT Center
- ○ Sun Valley YouthSource Center
- ○ West Los Angeles – UCLA YouthSource Center
- ○ YWCA Digital Learning Academy

***3: Partnering WorkSource/YouthSource Center: (Please select one response):**

- ○ Hollywood WorkSource Center
- ○ Northeast Los Angeles WorkSource Center
- ○ Sun Valley YouthSource Center
- ○ Vernon Central/LATTC WorkSource Center
- ○ West Los Angeles – UCLA YouthSource Center

***4: Date of Birth:** Today

***5: Age:**

* **6: Gender: (Please select one response):**

- ○ Female
- ○ Male
- ○ Transgender
- ○ Agender
- ○ Aliagender
- ○ Androgyne
- ○ Bigender
- ○ Cisgender
- ○ Prefer Not to Disclose
- ○ Other

7: If Other was selected above, please indicate below:

[ ]

* **8: How do you self-identify? (Please select one response):**

- ○ Bi-sexual
- ○ Gay
- ○ Lesbian
- ○ Queer/Questioning
- ○ Straight
- ○ Prefer Not to Disclose

* **9: Race (Select all that apply):**

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Other
- ☐ Prefer Not to Disclose

* **10: Ethnicity (Please select one response):**

- ○ Hispanic or Latino
- ○ Not Hispanic or Latino
- ○ Prefer Not to Disclose

* **11: Highest Education Level Achieved (Please select one response):**

- ○ No school completed
- ○ Primary school completed
- ○ Middle school completed
- ○ Some high school completed
- ○ HS diploma
- ○ HS equivalency completed (GED)
- ○ Vocational school certificate
- ○ Associate's degree
- ○ Bachelor's degree
- ○ Master's degree
- ○ Doctorate degree

* **12: Do you have children in your custody under the age of 18?**

○ Yes ○ No

* **13: Previous or Current Involvement with the Criminal Justice System: (Please select all that apply):**

- ☐ Arrested, not charged
- ☐ Arrested, charges dropped/dismissed
- ☐ Charged, acquitted/not guilty
- ☐ Charged, convicted
- ☐ Incarcerated in prison or jail
- ☐ Parole
- ☐ Probation
- ☐ No previous history
- ☐ Prefer not to disclose

*** 14: Currently on Probation or Parole: (Please select one response):**

- ○ No
- ○ Yes - Adult Probation (18 & over)
- ○ Yes - Youth Probation (18 & under)
- ○ Yes – Parole
- ○ Prefer not to disclose

*** 15: Employment History: (Please select one response):**

- ○ Currently unemployed – have not worked in past 3 months
- ○ Currently unemployed – have not worked in past 6 months
- ○ Currently unemployed – have not worked in past 12 months
- ○ Currently underemployed (20 hours or less)
- ○ Never been employed

*** 16: Do you or anyone in your house currently receive public assistance from any of the following programs? Please select all that apply:**

- ☐ General Relief
- ☐ CalFresh/SNAP
- ☐ SSI or SSDI
- ☐ CalWORKS/TANF (Cash Assistance)
- ☐ Unemployment compensation
- ☐ Veteran Benefits
- ☐ None
- ☐ Other

*** 17: Housing Status at Enrollment: (Please select one response):**

- ○ Currently Homeless in shelter
- ○ Currently Homeless on street
- ○ Rapid Rehousing (time limited financial assistance)
- ○ At-risk of homelessness (currently unstably housed, subsidized housing or permanent supportive housing, transitional Housing, Halfway Home, Staying at someone else's apartment, room, or house)

* **18: Was a referral made to stabilized housing?** ○ Yes ○ No

19: If Yes, indicate name of referral site or housing program.

* **20: Support Services Need Identified: (Please select all that apply):**

- ☐ Child/Dependent Care Assistance
- ☐ Clothing Assistance
- ☐ Expungement Services
- ☐ Health Services
- ☐ Housing Assistance
- ☐ Mental Health
- ☐ Public Assistance
- ☐ Substance Abuse Treatment
- ☐ Transportation Assistance
- ☐ None
- ☐ Other

21: If Other was selected above, please indicate below:

* **22: Receiving support services from SE or Transitional Employment Provider?** ○ Yes ○ No

* **23: Support Services provided by SE or Transitional Employment Provider: (Please select all that apply):**

- [ ] Child/Dependent Care Assistance
- [ ] Clothing Assistance
- [ ] Expungement Services
- [ ] Health Services
- [ ] Housing Assistance
- [ ] Mental Health
- [ ] Substance Abuse Treatment
- [ ] Transportation Assistance
- [ ] None
- [ ] Other

24: If Other was selected above, please indicate below:

* **25: Enrolled in GED or in credit recovery or basic skills remediation program? (Please select one response):**

- ○ Yes
- ○ No
- ○ Not applicable (has HS diploma or higher education)

26: If yes, indicate Enrollment Date: Today

27: If yes, indicate Completion Date: Today

* **28: Enrolled in Transitional Subsidized Employment?**

○ Yes ○ No

* **29: Hours Worked in Transitional Subsidized Employment:**

- ○ Transitional Employment not started
- ○ 1-100 hours
- ○ 101-200 hours
- ○ 201-300 hours
- ○ 301-400 hours

30: 300 Hours of Transitional Subsidized Employment Completion Date: Today

*31: Job Readiness Assessment - Meets Job Readiness Standards (Scored 3 or higher on TWO JRAs) (Please select one response):

- ◯ Not Complete – Minimum two assessments have not been completed
- ◯ Not Pass – Assessments completed and did not pass two
- ◯ Pass – Two assessments completed and passed both

32: Job Readiness Standards Pass Date: [ ] Today

*33: Enrolled in a certificated education or vocational skills training program? ◯ Yes ◯ No

34: If yes, type of certificated training program: [ ]

*35: Enrollment Date: [ ] Today

36: Completion Date: [ ] Today

*37: Housing Status at Exit: (Please select one response):

- ◯ Halfway house/transitional house
- ◯ Homeless in shelter
- ◯ Homeless on street
- ◯ Own apartment, room or house
- ◯ Rent apartment, room or house
- ◯ Staying at someone else's apartment, room or house
- ◯ Permanent Supportive housing (subsidized rent)
- ◯ Rapid Rehousing (time limited financial assistance)
- ◯ Residential Treatment
- ◯ No change in Housing Status

*38: Active Status: Is this participant still active? ◯ Yes ◯ No

39: If no, indicate reason: (Please select one response):

- ◯ Never enrolled in the program
- ◯ Dropped the program
- ◯ Cannot reach participant
- ◯ Planned services completed

*40: Placed in un-subsidized competitive employment?

○ Yes ○ No

41: Placement Date:

Today

42: Name of Employer:

43: Sector: (Please select one response):

- ○ Construction
- ○ Film and Digital Media
- ○ Education
- ○ Health Care Services
- ○ Hospitality and Tourism
- ○ Manufacturing
- ○ Retail
- ○ Transportation/Logistics
- ○ Solar
- ○ Professional Services (financial, clerical, information, etc.)
- ○ Other

44: If Other was selected above, please indicate below:

*45. Is this participant WIOA co-enrolled?

○ Yes ○ No

46. If WIOA co-enrolled, Date of WIOA Application?

Today

***47. If WIOA co-enrolled, what is the WorkSource Center or YouthSource Center?**

- ○ Canoga Park/South Valley WSC
- ○ Pacoima/North Valley WSC
- ○ Sun Valley WSC
- ○ West Valley WSC
- ○ Boyle Heights/East WSC
- ○ Downtown Pico-Union WSC
- ○ Hollywood WSC
- ○ Northeast Los Angeles WSC
- ○ Wilshire Metro WSC
- ○ Harbor Gateway WSC
- ○ South Los Angeles WSC
- ○ Southeast Los Angeles WSC
- ○ Vernon Central WSC
- ○ Watts/Los Angeles WSC
- ○ West Adams WSC
- ○ West Los Angeles WSC
- ○ South Valley - Goodwill Industries
- ○ South LA/Exposition Park AYE
- ○ South LA/Crenshaw Brotherhood

- ○ East S.F. Valley -El Proyecto
- ○ South – CRCD
- ○ Harbor - Pacific Gateway
- ○ Northeast L.A.- Para Los Niños
- ○ Central - Para Los Niños
- ○ West Los Angeles - UCLA
- ○ South L.A. Watts – WLCAC
- ○ Boyle Heights - YOM BH
- ○ Southeast L.A.-YO Watts
- ○ Central - Pico Union AYE
- ○ North S.F. Valley - El Proyecto
- ○ Not Co-enrolled in a YSC OR WSC – If Not Applicable Q's 45 should be No

<< Back Next >>

Staff Information

Staff Attestation:

I certify that all the entries made by me are true, complete and accurate; supported by written documentation, which I have in my possession. I have checked the application against the relevant eligibility rules and this individual is eligible for the program selected. Further, I UNDERSTAND THAT ANY FRAUDULENT OR IRREGULAR ENTRIES ON THIS DOCUMENT MAY BE PUNISHABLE BY LAW (U.S. CODE - TITLE 18 - CRIMES AND CRIMINAL PROCEDURE 665. THEFT OR EMBEZZLEMENT FROM MANPOWER FUNDS, IMPROPER INDUCEMENT.) ,33, Department Of Employment Services.

Staff Position: Staff

Staff Created ID: 4554

Date Created: 08/27/2019

Staff Edited ID: 4554

Date Last Edited: 08/27/2019

Current Case Manager: Case currently Not Assigned to a Case Manager

Assign Case Manager

NOT Required for LAI - City Enrollments

Assign Me

Remove Case Manager Assignment

Previous Case Manager:

Case Note:

[Add a new Case Note | Show Filter Criteria]

ID	Create Date	Subject	Action
No data found.			

Exit Wizard

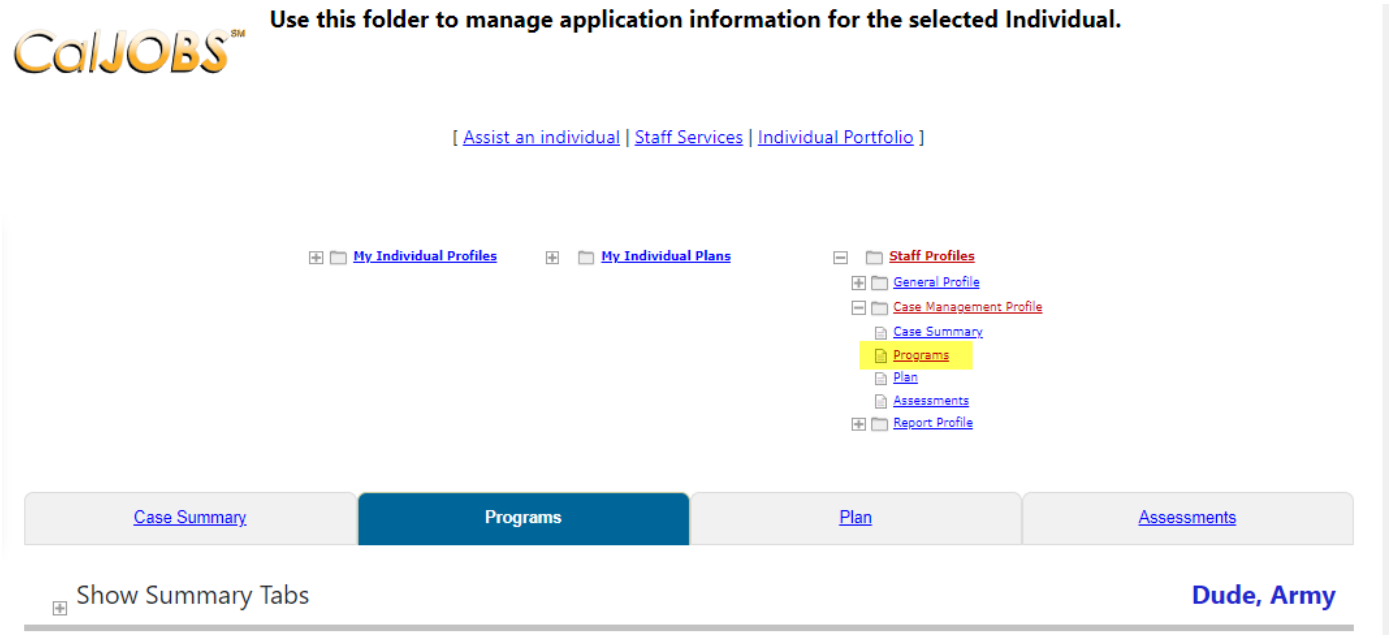
<< Back Finish Print

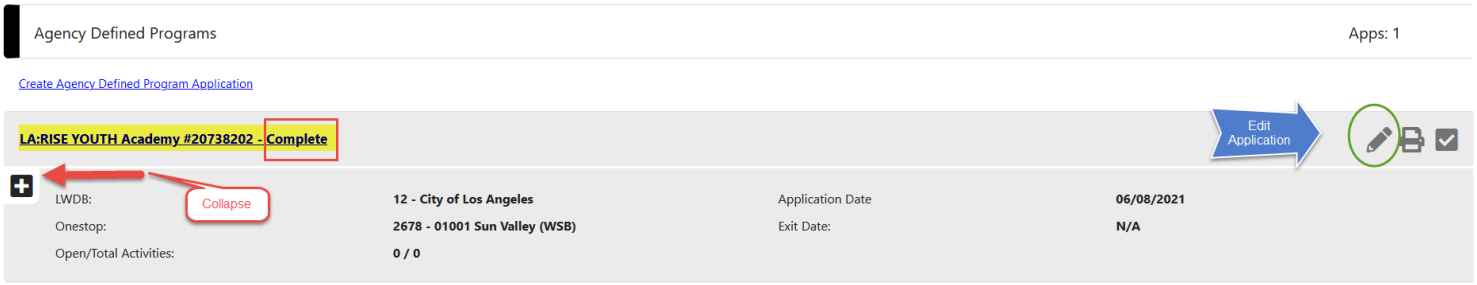
Finish Application

The applications have been successfully saved. Please select below where you want to go next.

Return to Programs Tab

Program Page





Click on the Activity Tab to open the box and click the link to add an activity.

CalJOBS℠ **Activity Enrollment - General Information**
This page displays activity information for the specified participant.

General Information | Service Provider | Enrollment Cost | Financial Aid | Enrollment Budget | Budget Planning | Closure Information

General Information

Participant User Name: GIJOSEPH

Participant State ID: 1126

Last Name, First Name MI: Dude, Army G

Social Security Number: 0016

Address: 1234 Army Lane
San Bernardino, CA 92401

Application Summary: **Program:**Regional LA:RISE
Application Date:08/27/2019
Eligibility Date:08/27/2019

* **Customer Program Group:** ADF - LA: RISE Youth Academy

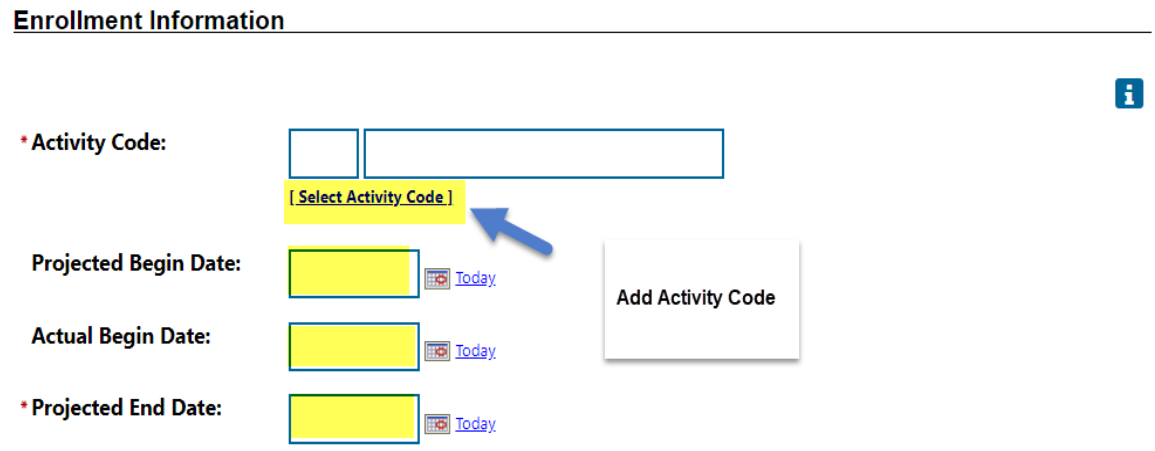
* **LWDB:** City of Los Angeles
LWDB cannot be modified if staff has local region assignment.

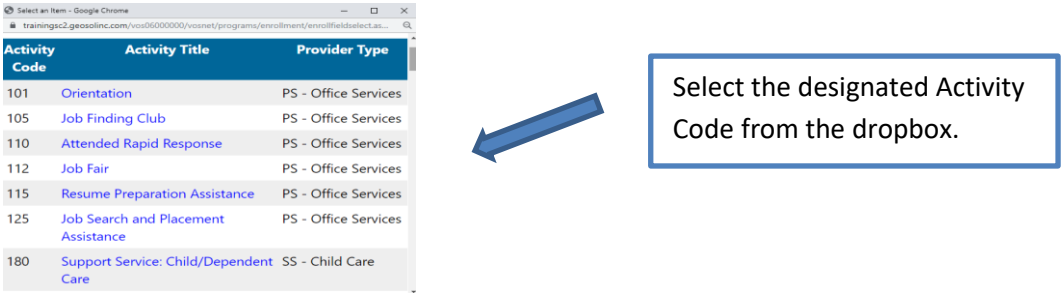
* **Office Location:** 00308 Wilshire Metro Worksource Center

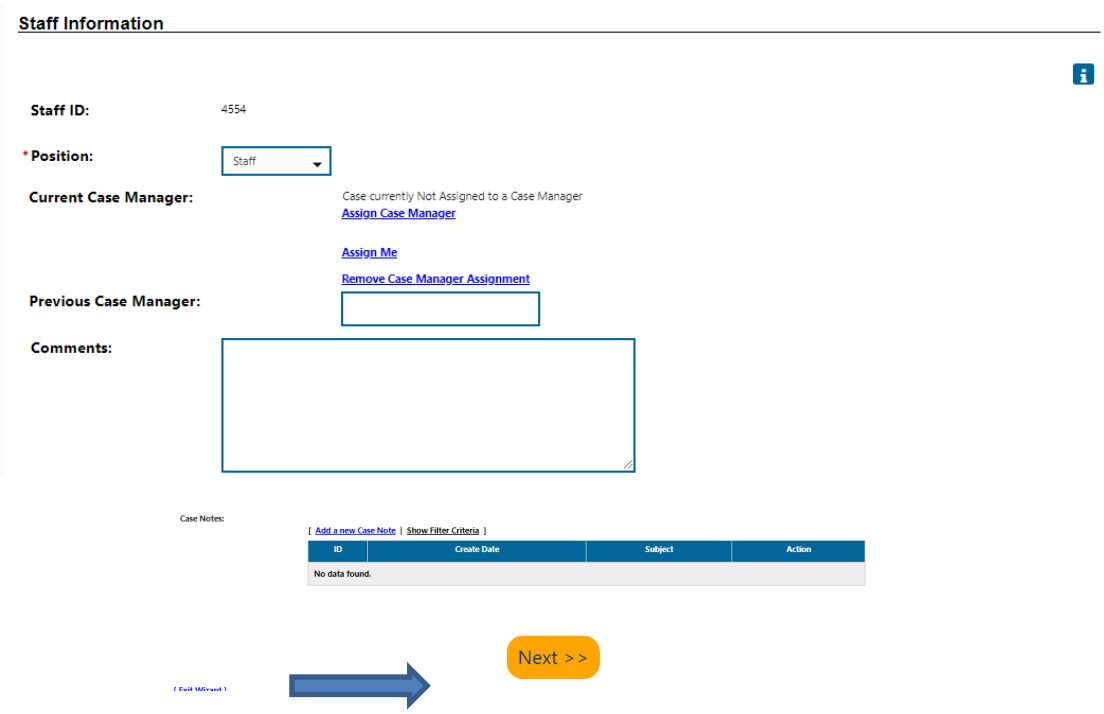
Agency Code Search: Click Here

Agency Code: -

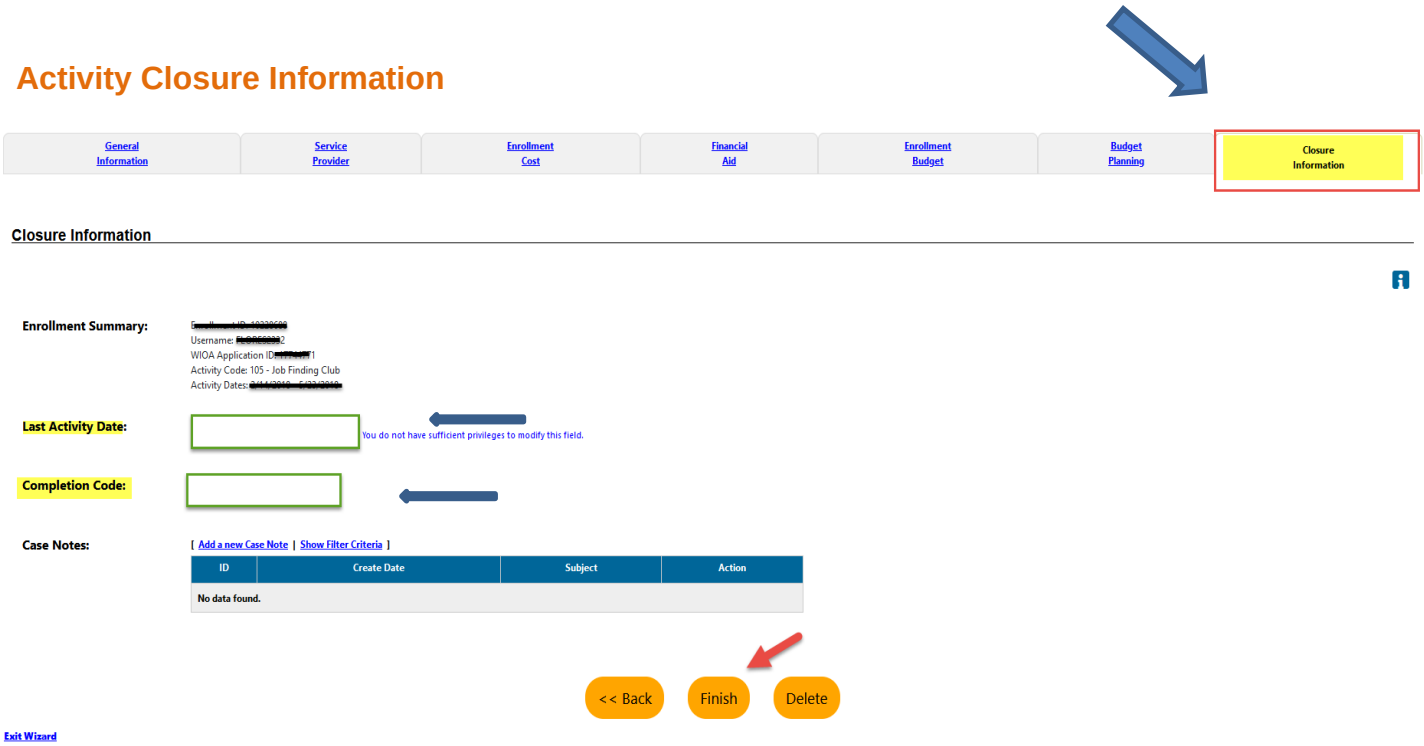
Click on the **Select Activity Code** link to select the appropriate activity for the enrollment. Make sure to include all dates for the activity.



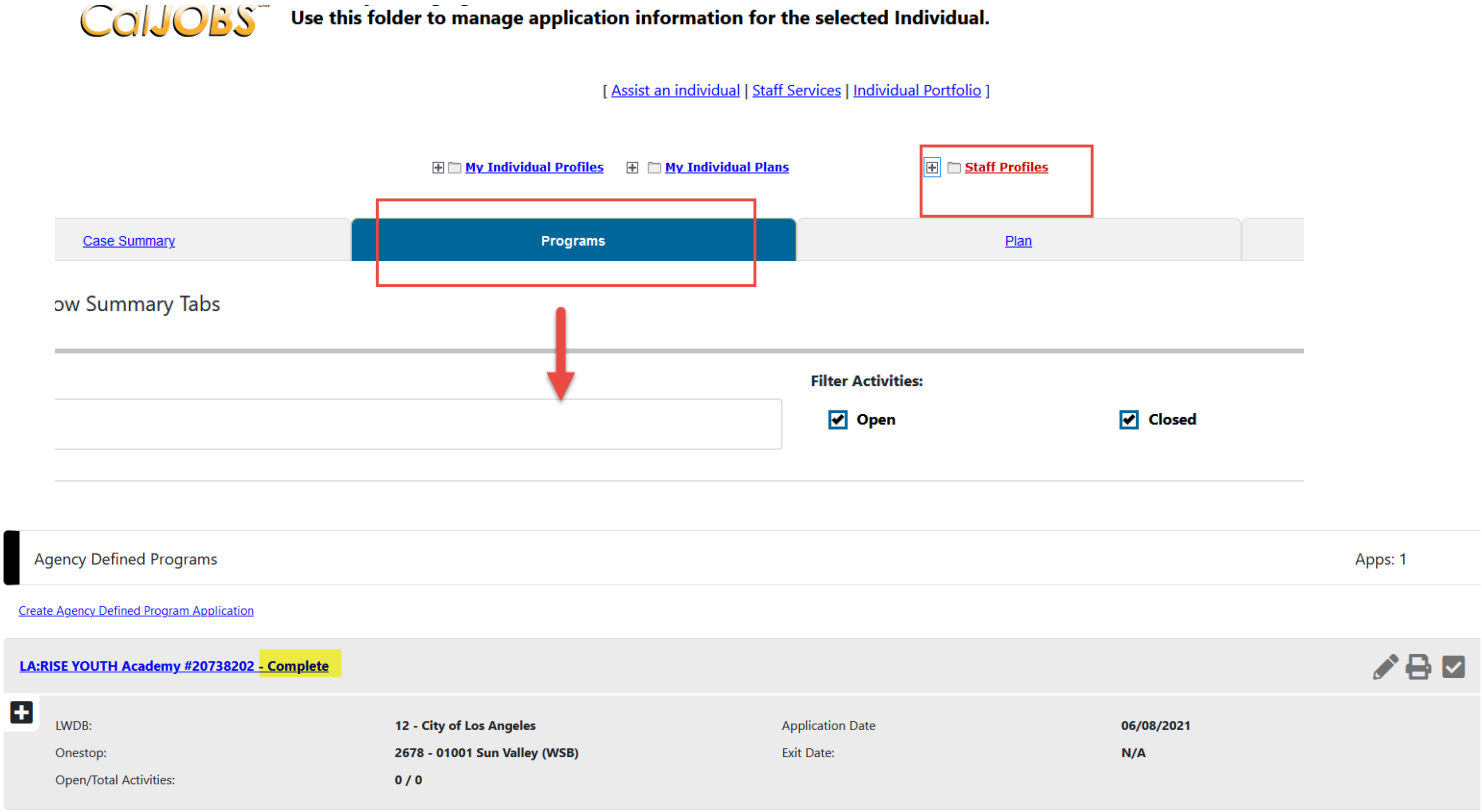




Activity Closure Information



Program Page



At this point, the LA RISE Youth Academy Application has been completed.

Sample Activity Codes

Status	Activity / Provider	Actions	Funding / Grant	Projected Begin Date	Actual Begin Date	Projected End Date	Actual End Date
C	105 - Job Finding Club No Provider Information	W	LA RISE Youth Academy	02/14/2018	02/14/2018	12/31/2018	05/23/2018 Unsuccessful Completion
C	115 - Resume Preparation Assistance No Provider Information	W	LA RISE Youth Academy	02/14/2018	02/14/2018	02/14/2018	02/14/2018 Successful Completion
C	102 - Initial Assessment No Provider Information	W	LA RISE Youth Academy	02/14/2018	02/14/2018	02/14/2018	02/14/2018 Successful Completion
C	101 - Orientation No Provider Information	W	LA RISE Youth Academy	02/09/2018	02/09/2018	02/09/2018	02/09/2018 Successful Completion

Page 1 of 1 Rows: 10

The activity codes above are a sample of services. These may not be the exact activity codes required for the LA RISE Youth Academy Program. To view the required services, refer to the LA RISE Youth Academy Activity Codes.

Closure Tab

The Closure tab is the final form that will need to be entered once the client has completed the program.