

**PY 2023-2024
LA:RISE 9.0**

- Measure H Fund – County
- City General Fund –City

**Social Enterprise/ Transitional Employment Provider
Participant File Checklist- Section 1**

Participant: _____ **SS#:** XXX-XX-_____

Enrollment Date: _____ CalJOBSSM ID#: _____

A. Eligibility Documentation/ Enrollment Application

- Participant Eligibility Form (signed and dated by participant)
- If not co-enrolled into WIOA, check here
- Right to Work documents (ID, social security card, US passport, I-9 form, etc.)

B. General Customer Orientation and Onboarding

As specified by City of LA EWDD's Policies or Directives

- Agency Complaint Resolution Procedures
- Equal Opportunity is the Law Discrimination Policy
- Sexual Harassment in the Work Place Policy

C. Transitional Employment Services and Activities Verification

- Worksite Review Checklist (Compliance- ADA, Health & Safety)
- Worksite WEX Agreement (as applicable)
- Participant Notification Letter (optional)
- Worksite Acknowledgement Form (new hire orientation & onboarding)
- LA:RISE Job Readiness Assessment (JRA)/ Evaluation Form
 - JRA #1
 - JRA #2
 - JRA #3
- Other Specific Assessments (Optional)

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Social Enterprise/ Transitional Employment Provider
Program Group-Participant File Checklist- Section 2

Participant: _____ **SS#: XXX-XX-** _____

D. Transitional Employment Hours Worked Verification

- Print-out of payroll records for proof of up to 300 hours worked at City's minimum wage
- Timesheets
- Copies of Participant Check Stubs or other receipts of payments received by participant
- LA:RISE Graduation/ Certificate

E. Job Placement (Unsubsidized Employment Verification Support Documents)

- Job Placement Verification (Copy of Pay Stub or Employer Verification Hire Letter)
- Placement Services (Job Referrals, Job Club, Industry Recruitments, etc.)
- Other support documents

F. Services and Activities Verification

- Copy of Trainings / Certifications, as applicable
- Attendance records for group orientations/ workshops
- Copy of Referrals (Housing referral, legal, child care services, etc.)
- Supportive Service Verification Form and Support Documentation, as applicable
- Education Stipend Verification as applicable
- Training Agreement and Certificate of Completion, as applicable
- Miscellaneous: _____

G. Case Notes

- Electronic print-outs from CalJOBS.org, monthly notes, as requested by EWDD
- E-mails, Letters, Other
- Success Stories/ Testimonials
- Participant Testimonial and Photo Consent Forms

H. LA:RISE Partner Shared Forms

- Other Skills Assessments or Individual Employment Plan (IEP)
- LA:RISE Participant Placement and Outcomes Form

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**WORKFORCE PARTNER (WSC)
Participant File Checklist- Section 1**

Participant: _____ **SS#: XXX-XX-** _____

Enrollment Date: _____ CalJOBSSM ID#: _____

A. WIOA Title 1 or WIOA Application (Co-Enrollment)

- WIOA Title 1 Application (required for all applicants)
- WIOA Co-Enrollment
 - Application and support documents (printed copy optional or as requested by EWDD)
 - Eligibility and Right to Work documents (ID, social security card, US passport, I-9 form, selective service, etc.)

B. WIOA General Customer Orientation and Onboarding

As specified by EWDD's Policies or Directives

- Agency Complaint Resolution Procedures
- Equal Opportunity is the Law Discrimination Policy
- Sexual Harassment in the Work Place Policy

C. Work Readiness Services and Activities Verification

- Participant Resume
- WIOA IEP and Assessments: Basic Skills, Interests, etc. (optional)
- Work Readiness Workshop(s) Attendance Sign- in Sheets (as applicable)
- Training Documentation, including ITA, OJT, training cohort, etc. (as applicable)
- Copy of Trainings/Certifications/Referrals/etc. (as applicable)
- LA:RISE Targeted Recruitment Flyers and Sign-In Sheets
- Miscellaneous: _____

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**WORKFORCE PARTNER (WSC)
Participant File Checklist- Section 2**

Participant: _____ **SS#: XXX-XX-** _____

D. Job Placement (Unsubsidized Employment Verification Support Documents)

- LA:RISE Participant Placement and Outcomes Form
- Job Placement Verification (Copy of Pay Stub or Employer Verification Hire Letter)
- Placement Services (Job Referrals, Job Club, Industry Recruitments, etc.)
- Other support documents

E. Other Services and Activities

- Supportive Service Verification Form/ Proof of Issued Supportive Services (as applicable)
- Other Referrals or supports (as applicable)

F. Case Notes & Testimonials

- Electronic print-outs from CalJOBS.org, monthly notes, as requested by EWDD
- Success Stories/ Testimonials
- Participant Testimonial and Photo Consent Forms

G. Partner Shared Forms

- Other Skills Assessments or Individual Service Plan
- Job Readiness Assessments

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**Job Retention and Personal Support Provider
Participant File Checklist**

Participant: _____ **SS#:** XXX-XX-_____

Enrollment Date: _____ CalJOBSSM ID#: _____

A. Job Retention Support and Support Documents for Job Placed Participants

- Employment Verification (example Check Stubs and/or Employer Hire Verification Letter)
- Employment Retention Incentives Tracking Log; dated and signed by participant

B. Services and Activities Verification

- Attendance record for group orientations/ workshops, as applicable
- Referrals
- Supportive Service Verification Form and Support Documentation
- Workshops provided in-house (flyer, sign-in sheets, etc.)
- Training Agreement and Certificate of Completion, if applicable
- Education Stipend/Incentives Verification, if applicable
- Miscellaneous: _____

C. Case Notes & Testimonials

- Case Notes Electronic print-outs from CalJOBS.org, monthly notes, as requested by EWDD
- E-mails, Letters, Other
- Success Stories/ Testimonials
- Participant Testimonial and Photo Consent Forms

D. Partner Shared Forms