Ohio Department of Job and Family Services

WIOA YOUTH PROGRAM ELIGIBILITY APPLICATION

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| Applicant Name *(First, MI, Last)* | | | | | |
| Mailing Address | City | | | State | Zip Code |
| Phone Number (###) ### - #### | | Alternate Phone Number (###) ### - #### | | | |
| Additional Contact | | Contact Person’s Phone Number (###) ### - #### | | | |
| Applicant Email Address | Driver’s License?  Yes  No | | Type | | |
| **Demographic Information** | **WIOA Eligibility Information** | | | | |
| **1. What is your date of birth?**  **2. What is your gender?**  Male  Female  **3.** **What is your** **ethnicity?**  Hispanic/Latino  Not Hispanic/Latino  **4.** **What is your race?**  *(check all that apply)*  Black/African American  White  Asian Alaskan Native  American Indian  Hawaiian Islander or Other Pacific Islander  Other  **5. What is your native or primary language?**  **6. If you are a male over 18 years old, have you registered Selective Service**  Yes SSR #:        No  N/A  **7. Citizenship:**  US Citizen  Documented  Undocumented  Refugee  Other Legal Alien  Other | 1. **Have you been or are you a member of a family who received public  cash assistance or SNAP in the last 6 months?**  Yes  No    **2. Do you have a disability?**  Yes  No  ADA Major Life Activity Impairment  ADA and Employment Impediment  **3. Are you pregnant?**  Yes  No  **4. Do you have any minor children?**  Yes  No  **5. If English is not your native or primary language, do you need help learning to speak/write/use English?**  Yes  No  **6.** **Are you homeless?**  Yes  No  **7. Are you a runaway?**  Yes  No  **8. Are you in foster care or were you previously in foster care?**  Yes  No  **9. Are you involved or were you involved in the juvenile court or adult justice system?**  Yes  No   1. **Do you receive or are you eligible to receive free or reduced price lunch?**  Yes  No | | | | |
| **Educational Information** | **Additional WIOA Intake Information** | | | | |
| 1. **What is your education level?**   Withdrew from high school, no HS diploma  Current high/junior high school student  Completed12th grade, but no HS diploma  Obtained GED or equivalent  High school graduate  Some post high school education, no degree  College degree -  Associate  Bachelor  Masters/Prof. | 1. **Do you need reliable child care?**  Yes  No 2. **Are you a single parent?**  Yes  No 3. **Do you have stable housing?**  Yes  No 4. **Do you use recreational drugs regularly?**  Yes  No 5. **Do you drink alcohol regularly?**  Yes  No 6. **Do you have reliable transportation?**  Yes  No 7. **Are you caring for an adult relative with a disability?**   Yes  No   1. **Do you need reliable dependent care?**  Yes  No | | | | |
| **2. What is your education status?**  I am not a student  I am a student at a college or technical school  I am a student in a GED program  I am a high school student, at grade level  I am a high school student, behind grade level  I am not attending high school |

**WIOA Eligibility Information** - *This section determines eligibility for the WIOA program.*

1. Please answer the following questions. (You must complete this section regardless of your age)

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| --- | --- |
| Do you provide more than 50% of your own support? | YES  NO |
| Are you married or separated but not divorced? | YES  NO |
| Do you have children who receive more than half of their support from you? | YES  NO |
| Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you? | YES  NO |
| Do you live in your own residence or in a residence without support from a parent(s) or a guardian(s)?\* | YES  NO |
| Are you currently serving on active duty in the U.S. Armed Forces or are you serving on active duty as an enlistee of the National Guard or Reserve for purposes other than training? | YES  NO |
| Are you a veteran of the U.S. Armed Forces? | YES  NO |

Did you answer "Yes" to any of the questions above?  YES  NO

\*If you answered "Yes", you are independent of a parent or guardian and only your income will be used to determine WIOA youth eligibility. Additionally, if you are disabled, only your income will be used.

1. Including yourself, who is in your family? What is their relationship to you? What is their income within the past 6 months? *If you are not attending high school or college/technical school, skip this question.*

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| --- | --- | --- |
| **Name** | **Relationship** | **6 Month Income** |
|  | Self |  |
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1. Disclosure of Relationship - Do you have a business/personal relationship with any individual who is a:

* Local elected official (mayor or county commissioner);
* Workforce Development Board member or subcommittee member;
* WIOA executive, supervisor or employee;
* OhioMeansJobs center partner employee, WIOA sub-recipient and/or contractor; or
* CDJFS or other county employee?

YES If yes, provide name:        NO

**TANF Funding Eligibility** *- This section determines initial and ongoing eligibility for TANF-funded services.*

1. Are you currently receiving cash assistance or SNAP?  YES  NO

\*If your answer is "No" you can verify your income by self-attesting that your household income is less than 200% of the federal poverty level guidelines for TANF funding eligibility in question two. If your answer is “Yes” skip question two.

2. Find your household size below. Was your household's gross income during the past 30 days less than the monthly amount shown below for your household size?  YES  NO

|  |  |
| --- | --- |
| **200% of Federal Poverty Guidelines (2018)** | |
| **Household Size** | **Monthly** |
| 1 | $2,024 |
| 2 | $2,744 |
| 3 | $3,464 |
| 4 | $4,184 |
| 5 | $4,904 |
| 6 | $5,624 |
| 7 | $6,344 |
| 8 | $7,064 |
| 9 | $7,784 |
| 10 | $8,504 |

3. Do you have a child under age 18?  YES  NO Number of children       Oldest child age

4. Are you one of the following: a minor child; a parent, specified relative, legal guardian or legal custodian of a minor child; a non-custodial parent; a pregnant individual; or an individual age 18-24 that is part of a family that includes a minor child?

YES  NO

5. Have you been given the opportunity to register to vote?  YES  NO

6. Are you currently repaying fraudulent public assistance (cash)?  YES  NO

**Acknowledgement**

By signing, I attest that the information stated above is true and accurate. I understand that if the information or income provided was misrepresented, it may be grounds for immediate termination in the CCMEP program and/or penalties as specified by law. If the applicant is under age 18, the parent/guardian signature below gives permission for the youth to participate in CCMEP services and activities.

**Parent/Guardian Signature**: (Required if applicant is under age 18)

|  |  |
| --- | --- |
| Parent/Guardian Signature *(If applicant is under age 18)* | Date |
| Applicant Signature | Date |

|  |  |
| --- | --- |
| **To be completed by eligibility staff person only:**  **WIOA Funding Eligibility Determination**:  Is the individual attending school?  Yes  No  If yes, is the individual low-income or live in a high-poverty area under WIOA?  Yes  No  Does the individual have a documented barrier to employment?  Yes  No  Is the individual basic skills deficient? (If yes, may need income data)  Yes  No  Does the individual require additional assistance as defined by your local area policy?  Yes  No  Is the individual authorized to work in the United States?  Yes  No  If the individual is a male over age 18, has he registered for Selective Service?  Yes  No  **TANF Funding Eligibility Determination**:  Is the household's monthly income under 200% of the Federal Poverty Guidelines? *Please use the current year’s table if different from above.*  Yes  No  Does the individual have a child under age 18?  Yes  No  Does the individual owe any fraudulent TANF assistance paid to the individual?  Yes  No  Is the individual one of the following: a minor child; a parent, specified relative, legal guardian or legal custodian of a minor child; a non-custodial parent; a pregnant individual; or an individual age 18-24 that is part of a family that includes a minor child?  Yes  No  **WIOA Funding Eligibility Decision:**  WIOA In-School Youth Program eligible and low income (Note: 25% limit on expenditures)  5% low-income exception for WIOA In-School Youth Program  WIOA Out-of-School Youth Program eligible  Ineligible for WIOA Funding  **TANF Funding Eligibility Decision:**  TANF Funding Eligible  Ineligible for TANF Funding | |
| **Signature of Eligibility Staff** | **Date** |