

**MS WORKS  
WIOA ENROLLMENT FORM**

1. First Name		Last Name		Suffix		2. Candidate ID (if known)	
3. Application Date		4. Eligibility Date		5. Single Parent Yes No		6. Offender Yes No	
				7. Selective Service Yes No		8. Homeless Yes No	
9. Contact Person			10. Contact Phone			11. Relation to Participant	
12. Participant Type Adult Dislocated Worker Youth		13. Workforce Area Local National Emergency Grant Statewide Statewide Rapid Response Local & Statewide Activities		14. Displaced Homemaker Yes No		15. Rapid Response Yes, (date) No	
				16. Dislocation Date		17. Rapid Resp. Additional Asst. Yes No	
18. Number in Family		19. Preprogram Wages/Per \$		20. Annualized Family Income \$			
21. TANF Participant Yes No		22. Foster Child Payments Yes No		23. Food Stamps Yes No		24. Other Public Asst. Yes No	
						25. E&T Services - Food Stamps Yes No	
26. Vocational Education Yes No		27. Adult Education Yes No		28. Other Non-WIOA Programs Yes No		29. Vocational Rehabilitation Yes VR & VR&E No Unknown VR&E	
30. Long-Term Unemployed Yes No		31. Exhausting TANF within 2 years Yes No		32. Low Levels of Literacy Yes No		33. Cultural Barriers Yes No	
<b>YOUTH ONLY SECTION</b>							
34. Runaway Yes No		35. Pregnant/Parenting Yes No		36. Underemployed Yes No		37. English Language Learner Yes No	
						38. Foster Care Youth Yes No	
39. Incarcerated at Program Entry Yes No		40. Date Released from Incarceration		41. Received SSI in last 6 months Yes No		42. Eligible for Free or Reduced Lunch Yes No	
						43. Requires Additional Assistance Yes No	
44. Education Status In School, H.S. or less In School, Alternative School In School, Post-High School Not Attending School and H.S. Dropout Not Attending School; H.S. Grad or Equiv. Not Attending School; within compulsory attendance age				45. Is Youth a Dropout? Yes No		46. Basic Skills Deficient Yes No	
						47. If Basic Skills Deficient is no, list tool used to determine this	
<b>COMMENTS:</b>							