

**PROGRAM STATUS SUMMARY REPORT
ETA FORM 9095**

WIA Program Status Summary
 Title I-D, Section 167- National Farmworker Jobs
 Program (NFJP)

U.S. Department of Labor
 Employment and Training Administration



a. Grantee Name and Address	b. Grant Number	OMB Approval No: 1205-0425 Expires: 12/31/2009	
	c. Period of Grant From: _____ To: _____		d. Reporting Period From: _____ To: _____

I. Participation Summary	Previous Period	Current Period	Grant Cumulative
	(A)	(B)	(C)
A. Total Participants Served (excluding individuals who <u>only</u> receive a determination of eligibility)			
1. New Participants			
2. Participants Carried Over From Previous Grant			
B. Total Number of Participants Exiting Program			
II. Participant Outcomes			
A. Placed in Unsubsidized Employment			
B. Completed Training Services			
III. Total Current Participants (End of Period)			
IV. Participant Enrollments In Program Services			
A. Core Services			
B. Intensive Services			
C. Training Services			
D. Related Assistance Services (<u>only</u>)			

Remarks:

III. CERTIFICATION I certify that to the best of my knowledge this report is correct and complete as set forth in the grant agreement.

Name and Title of Authorized Official	Phone Number ()	Signature	Date Submitted (Month, Day, Year)
---------------------------------------	---------------------	-----------	--------------------------------------

Public Burden Statement
 Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control Number. Obligation to reply is required to obtain or retain benefits (PL 105-220, Sec 185(a)). Public reporting burden for this collection is estimated to average 7 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed, and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden, to the U.S. Department of Labor, Migrant and Seasonal Farmworker Program, Room S4209, 200 Constitution Avenue, NW, Washington, DC 20210.

See Reverse Side for Instructions

ETA 9095
 Revised 2006

Instructions for Completing NFJP, WIA Program Status Summary (PSS) Report

General Instructions. The PSS is required to be electronically submitted on a quarterly basis, cumulative by the Program Year quarters (i.e., beginning July 1, October 1, January 1, and April 1). Reports are due no later than 45 days after the end of each reporting quarter (20 CFR 667.300(3)(d)). Please submit via the Internet at www.etareports.doleta.gov

a. Grantee Name and Address – NO ENTRY REQUIRED

b. Grant Number – NO ENTRY REQUIRED

c. Period of Grant – NO ENTRY REQUIRED

d. Reporting Period – NO ENTRY REQUIRED

Section I. Participation Summary

LINE I. A. Total Participants - Enter in column B the total number of participants in the program.

Participant is any individual who is determined eligible to participate in the program and receives a service funded by the program. Participant counts do not include individuals who only receive a determination of eligibility to participate in the program.

LINE I. A.1. New Participants – Enter in column B the number of new participants during the reporting period.

LINE I. A.2. Participants Carried Over From Previous Grant - Enter in column B the number of participants in the program on the last day of the previous program year whose participation continued in this program year. This number remains constant for the program year.

LINE I. B. Total Number of Participants Exiting the Program - Enter in column B the number of participants who have exited the program.

Exit from the program occurs when a participant has not received any services funded by the program or a partner program for 90 consecutive calendar days and has no gap in service and is not scheduled for future services. The date of exit is applied retroactively to the last day on which the individual received a service funded by the program or a partner program.

Section II. Participant Outcomes.

Line II. A. Placed in Unsubsidized Employment –Enter in column B the number of participants placed in unsubsidized employment.

Line II. B. Completed Training Services – Enter in column B the number of participants who completed at least one training service.

Section III. Total Current Participants (End-of-Period) - NO ENTRY REQUIRED

Section IV. Participant Enrollments in Program Services

LINE IV. A. Core Services - Enter in column B the number of participants who received at least one core service during the reporting period. **Core Services are identified in WIA Section 134(d)(2).**

LINE IV. B. Intensive Services - Enter in column B the number of participants who received at least one intensive service during the reporting period. **Intensive Services are identified in WIA Section 134(d)(3)(C) and 20 CFR Section 669.370.**

LINE IV. C. Training Services - Enter in column B the number of participants who received at least one training service during the reporting period. **Training Services are identified in WIA Section 134(d)(4)(D) and Section 167(d) and 20 CFR Section 669.410.**

LINE IV. D. Related Assistance Services (only) – Enter in column C, the cumulative number of participants who received one or more related assistance services only during the grant period. **Related Assistance services are identified in 20 CFR Section 669.430.**