APPENDIX: TRADE ACTIVITY PARTICIPANT REPORT

OMB 1205-0392 Expires: 06/30/2016

				Expires: 06/30/2016
No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
SECTIO	N A - INDIVIDUA	L INFORMAT	ION	
Section A	A.01: Identifying Da	ta		
100	Unique Participant Identifier	AN 12	(1) Record the unique identification number assigned to the participant which, at a minimum, must be the same for every period of participation in the WIOA Title I programs, including National Dislocated Worker Grants, and in every local area across the state and where the participant is receiving services or benefits financially assisted by the Wagner-Peyser, Veterans Employment and Training Service, and/or Trade Adjustment Assistance (TAA) programs; and (2) Provide unique identification number of potential "non participant" records, including those identified through Veteran "covered entrants" and TAA applicants that may or may not receive a participant service.	XXXXXXXXXX
101	State Code of Residence	AN 2	Record the 2-letter FIPS alpha code of the state of the primary domicile of the participant. For example, the State of Alabama would be represented as "AL." Primary domicile is that location established or claimed as the permanent residence or "home" of the participant. 00 = All Other Countries 88 = Mexico 99 = Canada For persons on active military duty, states should record the two-letter Air/Army Post Office (APO) or Fleet Post Office (FPO) as defined by the Military Postal Service Agency.	xx
102	County Code of Residence	IN 3	Record the 3-digit FIPS Code of the County of the primary domicile of the participant. Primary domicile is that location established or claimed as the permanent residence or "home" of the participant. If primary domicile is outside the United States, use the following codes: 777 = All Other Countries 888 = Mexico 999 = Canada	000
103	Zip Code of Residence	IN 5	Record the 5-digit zip code of the primary domicile of the participant. Primary domicile is that location established or claimed as the permanent residence or "home" of the participant. If primary domicile is outside the United States, use the following codes: 77777 = All Other Countries 88888 = Mexico 99999 = Canada For persons on active military duty, states should record the zip code associated with the APO or FPO as defined by the Military Postal Service Agency.	00000
105	ETA-Assigned Local Workforce Board/Statewide Code	IN 5	Record the 5-digit ETA assigned Local Board/Statewide code where the participant received his/her first benefit or service financially assisted by the program. If the participant was served by the local area and also by other non-local funds (e.g., statewide funds or a national emergency grant), record the code for the Local Board. If participant record is a liable state record, record 99999.	00000
Section A	A.02: Equal Opporti	unity Information	on	
200	Date of Birth	DT 8	Record the participant's date of birth. Leave "blank" if the individual declines to provide the information and it is not required for determining eligibility for a particular program.	YYYYMMDD

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
201	Gender	IN 1	Record 1 if the participant indicates that he is male. Record 2 if the participant indicates that she is female. Record 9 if the participant does not self-identify gender. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Male 2 = Female 9 = Participant did not self-identify
202	Individual with a Disability	IN 1	Record 1 if the participant indicates that he/she has any "disability," as defined in section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). See the discussion of that definition in Section III(A) of the Handbook. Record 0 if the participant indicates that he/she does not have a disability that meets the definition. Record 9 if the participant does not wish to disclose his/her disability status. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No 9 = Participant did not disclose
203	Category of Disability	IN 1	Record 1 if the impairment is primarily physical, including mobility and sensory impairments. Record 2 if the impairment is primarily mental, including cognitive and learning impairments. Record 3 if the individual reports having both physical and mental impairments. Record 9 if the participant does not wish to disclose his/her type of disability. Leave "blank" if the individual is not a participant, or the information is not available. Additional Reporting Instructions: For definitions and examples of "physical or mental impairment" and "major life activities," see the discussion of the definition of "disability" in Section III(A) of the Handbook.	1 = Physical Impairment 2 = Mental Impairment 3 = Both Physical and Mental Impairments 9 = Participant did not disclose
204	Ethnicity Hispanic / Latino	IN 1	Record 1 if the participant indicates that he/she is of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant does not self-identify his/her ethnicity. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No 9 = Participant did not self-identify
205	American Indian or Alaskan Native	IN 1	Record 1 if the participant indicates that he/she is a person having origins in any of the original peoples of North America and South America (including Central America), and who maintains cultural identification through tribal affiliation or community recognition. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant does not self-identify his/her ethnicity. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No 9 = Participant did not self-identify
206	Asian	IN 1	Record 1 if the participant indicates that he/she is a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent (e.g., India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant does not self-identify his/her ethnicity. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No 9 = Participant did not self-identify
207	Black or African American	IN 1	Record 1 if the participant indicates that he/she is a person having origins in any of the black racial groups of Africa. Record 0 if the participant indicates that he/she does not meet any of these conditions. Record 9 if the participant does not self-identify his/her ethnicity. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No 9 = Participant did not self-identify

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208	Native Hawaiian or Other Pacific Islander	IN 1	Record 0 if the participant indicates that he/she does not meet any of these	1 = Yes 0 = No 9 = Participant did not self-identify
209	White		Record 0 if the participant indicates that he/she does not meet any of these	1 = Yes 0 = No 9 = Participant did not self-identify

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
Section A	A.03: Veteran Chara	ecteristics		
301	Eligible Veteran Status	IN 1	Record 2 if the participant served on active duty for a period of more than 180 days	2 = Yes, Eligible Veteran 3 = Yes, Other Eligible Person
302	Campaign Veteran	IN 1	Record 1 if the participant is an eligible veteran (i.e., coding value 1 in Eligible Veteran Status) who served on active duty in the U.S. armed forces during a war or in a campaign or expedition for which a campaign badge or expeditionary medal has been authorized as identified and listed by the Office of Personnel Management (OPM). A current listing of the campaigns can be found at OPM's website http://www.opm.gov/veterans/html/vgmedal2.asp Record 0 if the participant does not meet the condition described above or is not a TAA participant.	1 = Yes 0 = No
303	Disabled Veteran	IN 1	forces and who is entitled to compensation regardless of rating (including those rated at 0%); or who but for the receipt of military retirement pay would be entitled to	1 = Yes 2 = Yes, special disabled 0 = No
304	Date of Actual Military Separation	DT 8	Record the date on which the participant separated from active duty with the U.S. armed forces. Leave "blank" if the data element does not apply to the participant, or the individual is not a participant, or the information is not available.	YYYYMMDD

No.	Data Element	Field Type /	Data Element Name/Definition	Code Value
	Name	Length		
305	Transitioning Service Member	IN 1	Record 1 if the participant is an active military duty status (including separation leave) with the U.S. armed forces and within 24 months of retirement or 12 months of separation from the armed forces. Record 0 if the participant does not meet the condition described above. Leave "blank" if the data element does not apply to the participant, or the individual is not a participant or the information is not available.	1 = Yes 0 = No
306	Covered Person Entry Date	DT 8	Record the date on which the covered person first made contact with the workforce system, either at a physical location or through an electronic resource. Leave "blank" if this data element does not apply.	YYYYMMDD
307	Date 45 Days Following Covered Person Entry Date	DT 8	Record the date that falls 45 days following the Covered Person Entry Date. Leave "blank" if this data element does not apply.	YYYYMMDD
308	TAP Workshop in 3 Prior Years	IN 1	Record 1 if the Veteran or TSM attended a Transition Assitance Program (TAP) Workshop in 3 year period prior to Date of Participation. Leave "blank" if the individual is not a participant.	1 = Yes 0 = No
Section A	A.04: Employment a	and Education	Information	
400	Employment Status at Participation	IN 1	Record 1 if the participant either: (a) did any work at all as a paid employee; (b) did any work at all in his or her own business, profession or farm; (c) worked as an unpaid worker in an enterprise operated by a member of the family; or (d) is one who was not working, but has a job or business from which he or she was temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time-off, and whether or not seeking another job. Record 2 if the participant, although employed, either (a) has received a notice of termination of employment or the employer has issued a Worker Adjustment and Retraining Notification (WARN) or other notice that the facility or enterprise will close; or (b) is a transitioning service member. Record 0 if the participant does not meet any one of the conditions described above. Leave "blank" if the individual is not a participant or the information is not available.	2 = Employed, but Received Notice of Termination of Employment or Military Separation 0 = Not Employed
401	UC Eligible Status	IN 1	Record 1 if the participant (a) filed a claim and has been determined monetarily eligible for benefit payments under one or more State or Federal Unemployment Compensation (UC) programs and whose benefit year or compensation, by reason of an extended duration period, has not ended and who has not exhausted his/her benefit rights, and (b) was referred to service through the State's Worker Profiling and Reemployment Services (WPRS) system. Record 2 if the participant meets condition (a) described above, but was not referred to service through the State's WPRS system. Record 3 if the participant has exhausted all UC benefit rights for which he/she has been determined monetarily eligible, including extended supplemental benefit rights. Record 0 if the participant was neither a UC Claimant nor an Exhaustee. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Claimant Referred by WPRS 2 = Claimant Not Referred by WPRS 3 = Exhaustee 0 = Neither Claimant nor Exhaustee

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
402	Highest School Grade Completed	IN 2	participant. Record 87 if the participant attained a high school diploma. Record 88 if the participant attained a GED or equivalent. Record 89 if the participant with a disability receives a certificate of attendance/completion as a result of successfully completing an Individual Education Plan (IEP). Record 90 if the participant attained other post-secondary degree or certification. Record 91 if the participant attained an associates diploma or degree (AA/AS). Record 00 if no school grades were completed. Leave "blank" if the individual is not a participant or the information is not available.	1 - 12 = Number of elementary/secondar y school grades completed 13 - 15 = Number of college, or full-time technical or vocational school years completed 16 = Bachelors degree or equivalent 17 = Education beyond the Bachelors degree 87 = Attained High School Diploma 88 = Attained GED or Equivalent 89 = Attained Certificate of Attendance/Completi on 90 = Attained Other Post-Secondary Degree or Certification 91 = Attained Associates Diploma or Degree 00 = No school grades completed
Section A	A.06: Public Assista	ance Informatio	on .	
600	Temporary Assistance to Needy Families (TANF)	IN 1	Record 1 if the participant is listed on the welfare grant or has received cash assistance or other support services from the TANF agency in the last six months prior to date of participation. Record 0 if the participant does not meet the condition described above. Leave "blank" if the individual is not a participant or the information is not available.	1 = Yes 0 = No
601	Supplemental Security Income (SSI) / Social Security Disability Insurance (SSDI)	IN 1	Social Security Act in the last six months prior to date of participation. Record 2 if the individual is receiving or has received SSDI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the	1 = SSI only 2 = SSDI only 3 = Yes, Both SSI and SSDI 0 = No
602	Other Public Assistance Recipient	IN 1	Record 1 if the participant is receiving or has received cash assistance or other support services from one of the following sources in the last six months prior to date of participation: General Assistance (State/local government), Refugee Cash Assistance, or Supplemental Nutrition Assistance Program. Do not include foster child payments. Record 0 if the participant does not meet the above criteria. Leave "blank" if the individual is not a participant or the information is not available.	1 = Yes 0 = No

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
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703	A.07: Additional Re Limited English Language Proficiency	IN 1	Record 1 if the participant has limited ability in speaking, reading, writing or understanding the English language and (a) whose native language is a language other than English, or (b) who lives in a family or community environment where a language other than English is the dominant language. Record 0 if the participant does not meet the conditions described above. Leave "blank" if the individual is not a participant or the information is not available.	1 = Yes 0 = No
707	Most Recent Date of Qualifying Separation	DT 8	Record the participant's most recent date of separation from trade-impacted employment that qualifies the individual to receive benefits and/or services under the Trade Act. Leave "blank" if the individual is not a participant or the information is not available.	YYYYMMDD
708	Tenure with Employer at Separation	IN 3	Record the total number of months that the participant was employed with the employer of record as of the participant's most recent qualifying date of separation. Employment of at least one day but less than one month should be recorded as "1". Leave "blank" if the participant has not been separated from trade affected employment, or if the individual is not a participant or the information is not available.	000
SECTIO	ON B - ONE-STO	P PROGRA	M PARTICIPATION INFORMATION	
Section I	B.01: One-Stop Part	ticipation Data		
900	Date of Participation/ Date of First Case Management and Reemployment Service	DT 8	Record the date on which the TAA participant begins receiving his/her first service financially assisted by TAA or a partner program. Leave "blank" if the individual is not a participant.	YYYYMMDD
901	Date of Exit	DT 8	Record the date on which the last service financially assisted by the program or a partner program is received by the participant. Once a participant has not received any services financially assisted 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 financially assisted by the program or a partner program. Leave "blank" if the participant has not yet exited, or if the individual is not a participant.	YYYYMMDD
902	Adult (local formula)	IN 1	Record 1 if the participant received services financially assisted under WIOA section 133(b)(2)(A). Record 0 if the participant did not receive services under the condition described above. Leave "blank" if the individual is not a participant or the information is not available.	1 = Yes 0 = No
903	Dislocated Worker (local formula)	IN 1	Record 1 if the participant received services financially assisted under WIOA section 133(b)(2)(B). Record 0 if the participant did not receive services under the condition described above. Leave "blank" if the individual is not a participant or the information is not available.	1 = Yes 0 = No
921	Rapid Response	IN 1	Record 1 if the individual participated in rapid response activities authorized at WIOA section 134(a)(2)(A)(i). Record 0 if the participant did not receive services under the condition described above. Leave "blank" if the individual is not a participant or the information is not available.	1 = Yes 0 = No

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
922	Rapid Response (Additional Assistance)	IN 1	Record 1 if the individual participated in a program financially assisted by WIOA section 134(a)(2)(A)(ii). Record 0 if the participant did not participate in a program or otherwise receive services under the condition described above, or received services by a local area with statewide funds passed down from the state to the local area. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No
923	NDWG Project ID	AN 4	Record the first Project I.D. Number where the participant received services financially assisted under a National Dislocated Worker Grant (NDWG). (For example, Utah projects may be numbered UT-02, so the TAPR entry would be UT02). Record 0000 if the participant/individual did not receive any services financially assisted by a NDWG. Leave "blank" if the individual is not a TAA participant.	xxxx
924	Second NDWG Project ID	AN 4	Record the second Project I.D. Number where the participant received services financially assisted under a NDWG. If the individual received services financially assisted by more than two NDWGs, record only the first two Project I.D. Numbers. Record 0 if the participant did not receive any services financially assisted by a NDWG or it is not known. Record 0000 if the participant did not receive services financially assisted under a second NDWG or if the individual is not a participant. Leave "blank" if the individual is not a TAA participant.	xxxx
925	Special ETA Project ID	AN 4	Record the special ETA Project I.D. number (code to be assigned by ETA where applicable) where the participant received services financially assisted under a special state demonstration or pilot project. Record TACT if the participant received training funded by the Trade Adjustment Assistance Community and Career College Training (TAACCCT) Grant Program. Record 0000 if the participant/individual did not receive services financially assisted under a Special ETA Project. Leave "blank" if the individual is not a TAA participant, or the information is not available.	xxxx
926	Rapid Response Event Number	AN 12	LEAVE ELEMENT BLANK PENDING FURTHER INSTRUCTION FROM ETA. Record the 12-digit unique number of the event through which rapid response services were provided to the participant. This unique identification number is the same one provided to the State or local area through the USDOL Rapid Response Information Network. For example, a Maryland rapid response event will be numbered as RR-MD-2006-0001, where the last 4-digits are incremented as each new rapid response event is entered during that calendar year (so the TAPR entry would be RRMD20060001). If the individual received services through more than one rapid response event within the same period of participation, then the last (or most recent) rapid response event number should be recorded. Record 0 if the rapid response event number is not known or if the individual is not a participant.	XXXXXXXXXX
940	Veterans' Programs	IN 1	Outreach Program (DVOP). Record 2 if the participant only received services financially assisted by the LVER	1 = Yes, Both LVER and DVOP 2 = Yes, LVER only 3 = Yes, DVOP only 0 = No

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
942	Petition Number	IN 8	Record the petition number of the certification which applies to the individual's group. If there is more than one petition number e.g., certifications under both the TAA and NAFTA-TAA programs), record the petition number of the program from which the training is paid, unless a waiver was issued. Do NOT include any alphanumeric suffix; record the petition number ONLY.	XXXXXXX
943	Vocational Education	IN 1	Record 0 if the participant did not receive any services under the condition described	1 = Yes 0 = No 9 = Participant did not disclose Blank = not available
944	Vocational Rehabilitation	IN 1	of Title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.), WIOA title IV, and section 121(b)(1)(B)(vii)). Record 2 if the participant received services financially assisted by the Vocational Rehabilitation and Employment (VR&E) Program authorized by 38 U.S.C. Chapter 31. Record 3 if the participant received services from both vocational rehabilitation programs.	1 = Yes 2 = VR&E 3 = Both VR and VR&E 0 = No 9 = Participant did not disclose. Blank = not available
951	Wagner-Peyser Act	IN 1	Record 1 if the participant received services financially assisted under the Wagner-Peyser Act (29 U.S.C. 49 et seq.) WIOA section 121 (b)(1)(B)(ii) during period of participation. Record 0 if the participant did not receive services financially assisted under the Wagner-Peyser Act. Leave "blank" if the individual is not a participant, or the information is not available.	1 = Yes 0 = No
956	Other WIOA or Non-WIOA Programs	IN 1	WIOA or non-WIOA program not listed above that provided the individuals with services during the period of participation. Record 2 if the participant received services financially assisted in full or in part by funds from the American Recovery and Reinvestment Act (ARRA) of 2009 during the period of participation. Record 3 if the participant received services financially assisted from any other	1 = Yes, Other WIOA or Non-WIOA Programs 2= Yes, ARRA 3= Yes, Both Other WIOA or Non-WIOA Programs and ARRA 0 = No

No.	Data Element	Field Type /	Data Element Name/Definition	Code Value
	Name	Length		
971	Other Reasons for Exit (at time of exit or during 3-quarter measurement period following the quarter of exit)	IN 2	at least 90 days. Record 2 if the participant is receiving medical treatment that precludes entry into unsubsidized employment or continued participation in the program. Theis does not include temporary conditions expected to last for less than 90 days. Record 3 if the participant was found to be deceased or no longer living. Record 4 if the participant is providing care for a family member with a health/medical condition that precludes entry into unsubsidized employment or continued participation in the program. This does not include temporary conditions expected to last for less than 90 days. Record 5 if the participant is a member of the National Guard or other reserve military unit of the armed forces and is called to active duty for at least 90 days. Record 6 if a Youth and was relocated to Mandated Residential Program. Record 7 if individual was determined ineligible for TAA. Record 8 if individual received no TAA benefits or services for 180 days following report quarter of eligibility determination. Record 9 if participant began receiving TAA benefits or services under a new petition certification. Record 98 if the participant entered retirement at the end of the program without seeking employment.	Called to Active Duty 6 = Relocated to Mandated Residential Program 7=Determined Ineligible for TAA 8=Did Not Receive Services for 180 Days After Report Quarter That Established Eligibility 9=Began Receiving
980	TAA Application Date	DT 8	Record the date on which the individual first applied for Trade Act services/benefits under the applicable certification.	YYYYMMDD
981	Date of First TAA Benefit or Service	DT 8	Record the date of the first Trade funded benefit or service received after the individual was determined eligible to participate. Leave "blank" if the individual is not a TAA participant.	YYYYMMDD
982	Liable/Agent State Identifier	IN 1	The definition for liable State can be found in 20 CFR 617. 26(a).	1 = Liable State 2 = Agent State 0 = Both
983	Date of Eligibility Determination	DT 8	Record the date upon which the individual was determined to be (or not) an adversely affected worker.	YYYYMMDD
984	Determined Eligible	IN 1	Record 1 if the individual was determined eligible for the Trade Program. Record 0 if the individual was determined not eligible.	1 = Yes 0 = No

No.	Data Element	Field Type /	Data Element Name/Definition	Code Value				
	Name	Length						
985	Benefit Under Prior Certification Last 10 Years	IN 1		1 = Yes 0 = No				
SECTIO	ON C - ONE-STO	P SERVICE	S AND ACTIVITIES					
Section	ection C. 03: Intensive and Training Services							
1208	Date Entered Training #1	DT 8	Record the date on which the participant's first training service actually began. Leave "blank" if the individual did not receive training services, or if the individual is not a participant.	YYYYMMDD				
1209	Type of Training Service #1	IN 1	Leave "blank" if this data element does not apply to the participant or if the individual is not a participant.	1 = On-the-Job Training 2=Skill Upgrading 3=Entrepreneurial Training 4=ABE or ESL in conjunction with Training (non-TAA funded) 5 = Customized Training 6 = Occupational Skills Training 7 = Remedial Training (ABE and ESL) 8=Prerequisite Training 9=Apprenticeship Training 10=Other basic skills training (WIOA Youth) 0 = No training service Blank = not a TAA participant.				
1210	Occupational Skills Training Code #1	IN 8	Enter the 8 digit O*Net 4.0 (or later versions) code that best describes the training occupation for which the participant received training services. Leave "blank" if this data element does not apply to the participant or the individual is not a participant.	00000000				
1211	Training Completed #1	IN 1	Record 1 if the individual completed approved training. Record 0 if the individual did not complete training (withdrew). Leave "blank" if the individual did not receive training services; if the participant has not yet completed training; or the individual is not a participant.	1 = Yes 0 = No (Withdrew)				
1212	Date Completed, or Withdrew from, Training #1	DT 8	Record the date when the participant completed training or withdrew permanently from training. Leave "blank" if the individual did not receive training services; if the participant has not yet completed training; or the individual is not a participant.	YYYYMMDD				
1213	Date Entered Training #2	DT 8	Record the date on which the individual's second training service actually began. Leave "blank" if the individual did not receive a second training service or if the individual is not a participant.	YYYYMMDD				

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
1214	Type of Training Service #2	IN 1		1 = On-the-Job Training 2=Skill Upgrading 3=Entrepreneurial Training 4=ABE or ESL in conjunction with Training (non-TAA funded) 5 = Customized Training 6 = Occupational Skills Training 7 = Remedial Training (ABE and ESL) 8=Prerequisite Training 9=Apprenticeship Training 10=Other basic skills training (WIOA Youth) 0 = No training service Blank = not a TAA participant.
1215	Occupational Skills Training Code #2	IN 8	Enter the 8 digit O*Net 4.0 (or later versions) code that best describes the training occupation for which the participant received training services. Leave "blank" if data element does not apply to the participant, or the individual is not a participant.	00000000
1216	Training Completed #2	IN 1	Record 1 if the individual completed approved training. Record 0 if the individual did not complete training (withdrew). Leave "blank" if the individual did not receive a second training service;the participant has not yet completed training; or the individual is not a participant.	1 = Yes 0 = No (Withdrew)
1217	Date Completed, or Withdrew from, Training #2	DT 8	Record the date when the participant completed training or withdrew permanently from training. Leave "blank" if the individual did not receive a second training service; the participant has not yet completed training; or the individual is not a participant.	YYYYMMDD
1218	Date Entered Training #3	DT 8	Record the date on which the individual's third training service actually began. If the individual received more than 3 training services, record the date on which the individual actually began the last (or most recent) training service. Leave "blank" if the individual did not receive a third training service or the individual is not a participant.	YYYYMMDD

No.	Data Element	Field Type /	Data Element Name/Definition	Code Value
	Name	Length		
1219	Type of Training Service #3	IN 1	If the participant received a third type of training, record the appropriate code to indicate the type of approved training being provided to the participant. Record 0 if the participant did not receive a third service. Leave "blank" if the individual is not a participant. Additional Note: If the participant receives more than three training services, record the last (or most recent) training services received by the participant in this field.	1 = On-the-Job Training 2=Skill Upgrading 3=Entrepreneurial Training 4=ABE or ESL in conjunction with Training (non-TAA funded) 5 = Customized Training 6 = Occupational Skills Training 7 = Remedial Training (ABE and ESL) 8=Prerequisite Training 9=Apprenticeship Training 10=Other basic skills training (WIOA Youth) 0 = No training service Blank = not a TAA participant.
1220	Occupational Skills Training Code #3	IN 8	Enter the 8 digit O*Net 4.0 (or later versions) code that best describes the training occupation for which the participant received training services. Leave "blank" if occupational code if this data element does not apply to the participant or the individual is not a participant.	00000000
1221	Training Completed #3	IN 1	Record 1 if the individual completed approved training. Record 0 if the individual did not complete training (withdrew). Leave "blank" if the individual did not receive a third training service; the participant has not yet completed training; or the individual is not a participant.	1 = Yes 0 = No (Withdrew)
1222	Date Completed, or Withdrew from, Training #3	DT 8	Record the date when the participant completed training or withdrew permanently from training. If multiple training services were received, record the most recent date on which the individual completed training. Leave "blank" if the individual did not receive a third training service; the participant has not yet completed training; or the individual is not a participant.	YYYYMMDD
1224	Pell Grant Recipient	IN 1	Record 1 if the individual is or has been notified s/he will be receiving a Pell Grant at any time during participation in the program. This information may be updated at any time during participation in the program. Record 0 if the individual does not meet the condition described above. Leave "blank" if the individual is not a TAA participant.	1 = Yes 0 = No
1225	Waiver from Training Requirement-Type	IN 1	Use the appropriate code to indicate the reason for which a waiver from the training requirements was issued to the individual. Record 0 if the participant did not receive a training waiver. Leave "blank" if the individual is not a participant.	1 = Recall 2 = Marketable Skills 3 = Retirement 4 = Health 5 = Enrollment Unavailable 6 = Training Not Available 0 = No
1226	Date Individual Service Plan Created	DT 8	Record the date on which the participant's Individual Service Plan (ISP) was created or otherwise established to identify the participant's employment goals, the appropriate achievement objectives, and the appropriate combination of services for the participant to achieve the employment goals. Otherwise, leave "blank" if a service plan was not created for the participant or if the individual is not a participant.	YYYYMMDD

No.	Data Element Name	Field Type <i>l</i> Length	Data Element Name/Definition	Code Value
1227	Date of Most Recent Case Management and Reemployment Service	DT 8	Record the date on which the participant received his or her most recent Case Management and Reemployment Service. Leave "blank" if the individual is not a participant.	YYYYMMDD
1228	Waiver from Training Requirement - Current Quarter	IN 1	Record 1 if a waiver was issued in report quarter. Record 0 if no waiver was received. Leave "blank" if the individual is not a participant.	1 = Yes 0 = No
1229	Current Quarter Training Expenditures	DE 7.2	Record the dollar amount of training expenditures accrued in the current report quarter for the participant. Accrued expenditures are defined as the sum of actual cash disbursements for direct charges for goods and services; the amount of indirect expenses charged to the award; minus any rebates, refunds, or other credits; plus the total costs of all goods and property received or services performed, whether an invoice has been received or a cash payment has occurred. Accrued expenditures are to be recorded in the reporting quarter in which they occur, regardless of when the related cash receipts and disbursements take place. This item includes: (1) Tuition (facility and training costs, books and laboratory fees, and/or equipment expenses approved by the State agency); (2) Travel allowances; and (3) Subsistence allowances. Leave "blank" if this data element does not apply.	0000000.00
1230	Total Training Expenditures	DE 7.2	Record the dollar amount of training expenditures accrued thus far in participant's training. Accrued expenditures are defined as the sum of actual cash disbursements for direct charges for goods and services; the amount of indirect expenses charged to the award; minus any rebates, refunds, or other credits; plus the total costs of all goods and property received or services performed, whether an invoice has been received or a cash payment has occurred. Accrued expenditures are to be recorded in the reporting quarter in which they occur, regardless of when the related cash receipts and disbursements take place. This item includes: (1) Tuition: facility and training costs, books and laboratory fees, and/or equipment expenses approved by the State agency; (2) Travel allowances (3) Subsistence allowances. Leave "blank" if this data element does not apply to the participant of if the individual is not a TAA participant.	0000000.00
1231	Training Costs- Amount of Overpayment	DE 7.2	Record the amount of the Training Cost Overpayment. This amount may be updated on a cumulative basis. Leave "blank" if this data element does not apply to the participant.	0000000.00
1232	Training Costs - Overpayment Waiver	IN 1		1 = Yes 0 = No
1233	Distance Learning	IN 1	Record 1 if the participant received training through distance learning during the report quarter. Record 0 if the participant did not receive any services under the condition described above. Leave "blank" if the individual is not a participant.	1 = Yes 0 = No
1234	Part Time Training	IN 1	Record 1 if the participant received part time training in the report quarter. Record 0 if the participant did not receive any services under the condition described above. Leave "blank" if the individual is not a participant.	1 = Yes 0 = No
1235	Adversely Affected Incumbent Worker	IN 1	Record 1 if the participant received training prior to his or her separation date from qualifying trade affected employment. Record 0 if the participant did not receive any services under the condition described above. Leave "blank" if the individual is not a participant.	1 = Yes 0 = No

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
1236	Training Leading to an Associate's Degree	IN 1	Record 1 if the participant is enrolled in training that will lead to an associate's degree. Record 0 if the participant did not receive any services under the condition described above or if the individual. Leave "blank" if the individual is not a participant.	1 = Yes 0 = No
Section	C 05 Other Polate	d Accietance a	and Support Services	
1400	Received Supportive Services (except needs-related payments)	IN 1	Record 1 if the participant received supportive services (WIOA section 134(d)(2),	1 = Yes 0 = No
1401	Received Needs- Related Payments	IN 1		1 = Yes 0 = No
1404	Travel While in Training	IN 1		1 = Yes 0 = No
1405	Subsistence While in Training	IN 1		1 = Yes 0 = No
1410	Job Search Allowance-Count	IN 2	Record the total number of job search allowances paid to the participant in the current report quarter. Record a "0" if the participant did not receive a job search allowance in the quarter. Leave "blank" if the data element does not apply to the individual.	00
1411	Job Search Allowance Current Quarter - Costs	DE 7.2	Record the dollar value of Job Search Allowance paid in the current quarter. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	0000000.00
1412	Job Search Allowance -Total Costs	DE 7.2	Record the cumulative total dollar amount of job search costs paid for the participant. This field may be updated for each quarterly submission. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	
1415	Relocation Allowance Current Quarter-Recipient	IN 1		1 = Yes 0 = No
1416	Relocation Allowance -Total Cost	DE 7.2	Record the total dollar amount of relocation costs paid to relocate the participant including the lump sum payment. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	0
1420	Date Received First Basic TRA payment	DT 8	Record the date on which the participant received their first Basic TRA payment. Leave "blank" if the participant did not receive a Basic TRA Payment, or if the individual is not a TAA participant.	YYYYMMDD
1421	Weeks Paid This Quarter - Basic TRA	IN 2	Record the total number of weeks of Basic TRA paid in the current quarter. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	00

No.	Data Element	Field Type /	Data Element Name/Definition	Code Value
	Name	Length		
1422	Total Weeks Paid Cumulative - Basic TRA	IN 2	Record the total number of weeks of Basic TRA paid to the individual. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	00
1423	Amount Paid Current Quarter- TRA Basic	DE 7.2	Record the dollar amount of Basic TRA paid in the current report quarter. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	0000000.00
1424	Total Amount Paid - Basic TRA	DE 7.2	Record the total dollar amount of Basic TRA paid to the individual. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	0000000.00
1425	Date Received First Additional TRA Payment	DT 8	Record the date on which the participant received their first Additional TRA payment. Leave "blank" if the participant did not receive a Additional TRA Payment, or if the individual is not a TAA participant.	YYYYMMDD
1426	Weeks Paid This Quarter - Additional TRA	IN 2	Record the total number of weeks of Additional TRA paid in the current quarter. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	00
1427	Total Weeks Paid Cumulative - Additional TRA	IN 2	Record the total number of weeks of Additional TRA paid to the individual. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	00
1428	Amount Paid This Quarter - Additional TRA	DE 7.2	Record the dollar amount of Additional TRA paid in the current report quarter. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	0000000.00
1429	Total Amount Paid - Additional TRA	DE 7.2	Record the total dollar amount of Additional TRA paid to the individual. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	0000000.00
1430	Date Received First Remedial/ Prerequisite TRA Payment	DT 8	Record the date on which the participant received their first Remedial/Prerequisite TRA payment. Leave "blank" if the participant did not receive a Remedial/Prerequisite TRA Payment, or if the individual is not a TAA participant.	YYYYMMDD
1431	Weeks Paid This Quarter- Remedial/Prerequi site TRA	IN 2	Record the total number of weeks of Remedial/Prerequisite TRA paid in the current quarter. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	00
1432	Total Weeks Paid Cumulative - Remedial/Prerequi site TRA	IN 2	Record the total number of weeks of Remedial/Prerequisite TRA paid to the individual. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	00
1433	Amount Paid This Quarter - Remedial/Prerequi site TRA	DE 7.2	Record the dollar amount of Remedial/Prerequisite TRA paid in the current report quarter. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	0000000.00
1434	Total Amount Paid - Remedial/ Prerequisite TRA	DE 7.2	Record the total dollar amount of Remedial/Prerequisite TRA paid to the individual. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	0000000.00
1440	Date Received First Completion TRA Payment	DT 8	Record the date on which the participant received their first Completion TRA payment. Leave "blank" if the participant did not receive a Remedial/Prerequisite TRA Payment, or if the individual is not a TAA participant.	YYYYMMDD
1441	Weeks Paid This Quarter - Completion TRA	IN 2	Record the total number of weeks of Completion TRA paid in the current quarter. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	00

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
1442	Total Weeks Paid Cumulative - Completion TRA	IN 2	Record the total number of weeks of Completion TRA paid to the individual. "0" if this data element does not apply to the participant. Leave "blank" if the individual is not a TAA participant.	00
1443	Amount Paid Current Quarter - TRA Completion	DE 7.2	Record the dollar amount of Completion TRA paid in the current report quarter. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	0000000.00
1444	Total Amount Paid - Completion TRA	DE 7.2	Record the total dollar amount of Completion TRA paid to the individual. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	0000000.00
1450	TRA Overpayment	IN 1	Record 1 if there was an overpayment established under any type of TRA during the course of participation in the quarter in which it is first identified and to continue through last quarter of reporting. Record 0 if there was no TRA overpayment. Leave "blank" if this does not apply to the participant, or the individual is not a participant.	1 = Yes 0 = No
1451	Amount of TRA Overpayment	DE 7.2	Record the dollar amount of the TRA overpayment. This amount may be updated on a cumulative basis.	0000000.00
1452	TRA Overpayment Waiver	IN 1	Record 1 if there was a TRA overpayment waiver to be recorded in the quarter it is issued and to continue through last quarter of reporting. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	1 = Yes 0 = No
1470	Date Received First A/RTAA Payment	DT 8	Record the date on which the participant received their first Alternative/Reemployment Trade Adjustment Assistance (A/RTAA) payment. Leave "blank" if this does not apply to the participant, or the individual is not a participant.	YYYYMMDD
1471	Number of A/RTAA Payments Current Quarter	IN 2	Record the number of A/RTAA payments paid to the participant in the current report quarter. "0" if this data element does not apply to the participant Leave "blank" if the individual is not a TAA participant.	00
1472	Current Quarter A/RTAA Payments	DE 7.2	Record the total dollar amount of A/RTAA paid to the participant in the report quarter. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	0000000.00
1473	Number of A/RTAA Payments Total	IN 3	Record the number of A/RTAA payments made to the participant through the current quarter of participation. This field may be updated for each quarterly submission. Record 0 if there was no TRA overpayment. Leave "blank" if the individual is not a TAA participant.	000
1474	Total Amount Paid - A/RTAA	DE 5. 2	Record the total dollar amount of A/RTAA paid to the individual. Record 0 if there was no TRA overpayment. Leave "blank" if the individual is not a TAA participant.	00000.00
1475	Frequency of Payments	IN 1	Record 3 if monthly.	1 = Weekly 2 = Bi-Weekly 3 = Monthly 4 = Other
1476	Maximum A/RTAA Benefit Reached	IN 1	Record 1 if the participant reached their maximum benefit amount prior to their two- year eligibility limitation. Record 0 if the participant did not reach their maximum benefit prior to their two-year eligibility limitation. Leave "blank" if this does not apply to the participant, or the individual is not a participant.	1 = Yes 0 = No

No.	Data Element	Field Type /	Data Element Name/Definition	Code Value
	Name	Length		
1477	A/RTAA Overpayment Current Quarter	IN 1		1 = Yes 0 = No
1478	Amount of A/RTAA Overpayment	DE 5. 2	Record the amount of the A/RTAA overpayment. This amount may be updated on a cumulative basis. Leave "blank" if this data element does not apply.	00000. 00
1479	A/RTAA Overpayment Waiver	IN 1		1 = Yes 0 = No
SECTIO	N D - PROGRA	M OUTCOM	ES INFORMATION	
Section D	0.01: Employment a	and Job Retent	ion Information	
1500	Employed in 1st Quarter After Exit Quarter	IN 1	Record 0 if the participant was not employed in the first quarter after the quarter of exit.	1 = Yes 0 = No 3 = Information not yet available
1501	Type of Employment Match 1st Quarter After Exit Quarter	IN 1	quarter. If participants are not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the first quarter after the quarter of exit. Leave blank if this does not apply. Additional Note: If the participant is found employed in a wage record source (e.g., Federal, Military) that cannot be translated into quarterly earnings amounts, States should treat these employment matches as supplemental data and use coding value 5 = Supplemental through case management, participant survey, and/or verification with the employer.	(In-State & WRIS) 2 = Federal Employment Records (OPM, USPS) 3 = Military Employment Records (DOD) 4 = Other Administrative Wage Records 5 = Supplemental through case management,
1507	Employed in 2nd Quarter After Exit Quarter	IN 1	exit. Record 0 if the participant was not employed in the second quarter after the quarter	1 = Yes 0 = No 3 = Information not yet available

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
1508	Type of Employment Match 2nd Quarter After Exit Quarter	IN1	the exit quarter. If participants are not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the second quarter after the quarter of exit. Leave "blank" if this element does not apply. Additional Note: If the participant is found employed in a wage record source (e.g., Federal, Military) that cannot be translated into quarterly earnings amounts, States should treat these employment matches as supplemental data and use coding value 5 = Supplemental through case management, participant survey, and/or verification with the employer.	(In-State & WRIS) 2 = Federal Employment Records (OPM, USPS) 3 = Military Employment Records (DOD) 4 = Other Administrative Wage Records 5 = Supplemental
1509	Employed in 3rd Quarter After Exit Quarter	IN1	Record 1 if the participant was employed in the third quarter after exit. Record 0 if the participant was not employed in the third quarter after exit. Record 3 if the participant has exited but employment information is not yet available. Leave "blank" if the participant has not yet exited or if the individual is not a participant.	1 = Yes
1510	Type of Employment Match 3rd Quarter After Exit Quarter	IN1	will be the primary data source for tracking employment in the third quarter after the exit quarter. If participants are not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the third quarter after exit. Leave "blank" if this element does not apply. Additional Note: If the participant is found employed in a wage record source (e.g., Federal, Military) that cannot be translated into quarterly earnings amounts, states should treat these employment matches as supplemental data and use coding value 5 = Supplemental through case management, participant survey, and/or verification with the employer.	(In-State & WRIS) 2 = Federal Employment Records (OPM, USPS) 3 = Military Employment Records (DOD) 4 = Other Administrative Wage Records
1511	Employed in 4th Quarter After Exit Quarter	IN1	Record 3 if the participant has exited but employment information is not yet	1 = Yes 0 = No 3 = Information not yet available

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
1512	Type of Employment Match 4th Quarter After Exit Quarter	IN1	will be the primary data source for tracking employment in the fourth quarter after the exit quarter. If participants are not found in the wage records, grantees may then use supplemental data sources. If the participant is found in more than one source of employment using wage records, record the data source for which the participant's earnings are greatest. Record 0 if the participant was not employed in the fourth quarter after the quarter of exit. Leave "blank" if this element does not apply. Additional Note: If the participant is found employed in a wage record source (e.g., Federal, Military) that cannot be translated into quarterly earnings amounts, States should treat these employment matches as supplemental data and use coding value 5 = Supplemental through case management, participant survey, and/or verification with the employer.	(In-State & WRIS) 2 = Federal Employment Records (OPM, USPS) 3 = Military Employment Records (DOD) 4 = Other Administrative Wage Records 5 = Supplemental through case
1513	Recalled by Layoff Employer	IN 1	Record 1 if the participant was recalled by the employer where the qualifying separation took place at any point from the point of participation through the last performance quarter. Record 0 if the participant does not meet the condition described above. Leave blank if the individual is not a participant.	1 = Yes 0 = No
1514	Occupational Code of Employment 2nd Qtr After Exit Quarter (if available)	IN 8	Record the 8-digit occupational code that best describes the individual's employment using the O*Net Version 4.0 (or later versions) classification system. Record "00000000" or leave "blank" if this element does not apply.	xxxxxxxx
1515	Industry Code of Employment 2nd Qtr After Exit Quarter	IN 6	Record the 4 to 6-digit industry code that best describes the individual's employment using the North American Industrial Classification System (NAICS). If more than one NAICS is reported, then the NAICS associated with the highest gross wage should be reported. Record "0000" or leave "blank" if this element does not apply.	xxxxx
Section I	D. 02 Wage Record	Data		
1600	Wages 3rd Quarter Prior to Participation Quarter	DE 8.2	Record total earnings from wage records for the third quarter prior to the quarter of participation. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	00000000.00
1601	Wages 2nd Quarter Prior to Participation Quarter	DE 8.2	Record total earnings from wage records for the second quarter prior to the quarter of participation. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	00000000.00
1602	Wages 1st Quarter Prior to Participation Quarter	DE 8.2	Record total earnings from wage records for the first quarter prior to the quarter of participation. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	00000000.00
1603	Wages 1st Quarter After Exit Quarter	DE 8.2	Record total earnings from wage records for the first quarter after the quarter of exit. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	00000000.00

No.	Data Element Name	Field Type / Length	Data Element Name/Definition	Code Value
		_09		
1604	Wages 2nd Quarter After Exit Quarter	DE 8.2	Record total earnings from wage records for the second quarter after the quarter of exit. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	00000000.00
1605	Wages 3rd Quarter After Exit Quarter	DE 8.2	Record total earnings from wage records for the third quarter after the quarter of exit. Leave "blank" if this data element does not apply to the participant or if the individual is not a TAA participant.	00000000.00
1606	Wages 4th Quarter After Exit Quarter	DE 8.2	Record total earnings from wage records for the fourth quarter after the quarter of exit. Leave "blank" if this data element does not apply to the participant.	00000000.00
Section I	D. 03 Education and	Credential Da	ta	
1700	Type of Recognized Credential #1	IN 1	Use the appropriate code to record the type of recognized diploma, degree, or certificate attained by the participant who received training services. Record 0 if this field does not apply to the participant who received training. Leave "blank" if this data element does not apply to the participant, or if the individual is not a participant. Diplomas, degree, or certificates must be attained either during participation or by the end of the fourth quarter after the quarter of exit from services (other than follow-up services).	1 = High School Diploma/GED 2 = AA or AS Diploma/Degree 3 = BA or BS Diploma/Degree 4= Post Graduate Degree 5 = Occupational Skills Licensure 6 = Occupational Skills Certificate 7= Other Recognized Diploma, Degree, or Certificate 0 = No recognized credential
1706	Type of Recognized Credential #2	IN 1	Use the appropriate code to record the type of recognized diploma, degree, or certificate attained by the participant who received training services. Record 0 if this field does not apply to the participant who received training. Leave "blank" if this data element does not apply to the participant, or if the individual is not a participant. Diplomas, degree, or certificates must be attained either during participation or by the end of the fourth quarter after the quarter of exit from services (other than follow-up services).	1 = High School Diploma/GED 2 = AA or AS Diploma/Degree 3 = BA or BS Diploma/Degree 4= Post Graduate Degree 5 = Occupational Skills Licensure 6 = Occupational Skills Certificate 7= Other Recognized Diploma, Degree, or Certificate 0 = No recognized credential