

Employment Navigator Data Entry I

Element Number	Element Name	Description
1	Unique ID	Automatically generated field from case management system
2	Social Security Number	The participant's Social Security Number
3	Client Type	Enter the correct code value for the participant
4	Date of First Contact	Record the date the participant first contacted an Employment Navigator
5	Separation Date	Enter the anticipated separation date if in the future, or the actual separation date if in the past.
6	Sex	Enter the gender of the participant
7	Year of Birth	Select the year the participant was born
8	Individual with a Disability	<p>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). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities.</p> <p>Record 0 if the participant indicates that he/she does not have a disability that meets the definition.</p> <p>Record 9 if the participant did not self-identify.</p>
9	Highest Education Attained	Select the highest level of education attained by the participant at the time of service.

10	Branch of Service	Select the military branch in which the participant currently serves, or most recently served.
11	AD/NG/Reserve Status (Last Duty Status)	Select the current or most recent duty status of the participant.
12	Military Paygrade	Select the current or most recent military paygrade of the participant.
13	Current Location Installation	Select the location in which the participant has received services
14	Home State	Enter the participant's home state. Home state is defined as the last state resided in before joining the military.
15	First Name	Enter the participant's first name
16	Last Name	Enter the participants last name
17	Personal Phone Number	Enter the phone number of the participant
18	Personal Email Address	Enter the non-military email address of the participant
19	Personal Email Address #2 (optional)	Enter a second personal email address, if desired
20	Preferred Contact Method	Enter a value for the preferred method to contact the participant, if necessary.
21	Preferred Post-Military Location City1	Enter the most desired city the participant wishes to move to after military transition
22	Preferred Post-Military Location State1	Enter the most desired state the participant wishes to move to after military transition
23	Preferred Post-Military Location Country1	Enter the most desired country the participant wishes to move to after military transition

24	Preferred Post-Military Location City2	Enter the second-most desired city the participant wishes to move to after military transition
25	Preferred Post-Military Location State2	Enter the second-most desired state the participant wishes to move to after military transition
26	Preferred Post-Military Location Country2	Enter the second-most desired country the participant wishes to move to after military transition
27	Occupation of Interest	Identify the occupation the participant is most interested in pursuing post-transition
28	Industry of Interest	Identify the industry the participant is most interested in pursuing post-transition
29	Date Attended Employment Workshop	Enter the date the participant attended the TAP Employment Workshop. Leave blank if not attended.

30	Date Attended Career and Credential Exploration (C2E) Workshop	Enter the date the participant attended the TAP C2E. Leave blank if not attended.
31	Work Availability Date	Enter the date the participant is available to begin work.
32	Career Goal	Indicate the most desired post-transition goal.
33	Career Pathway: Networking	Indicate if the participant would benefit from networking exposure as part of the career pathway.
34	Career Pathway: Mentorship	Indicate if the participant would benefit from mentorship as part of the career pathway.
35	Career Pathway: Job Training	Indicate if the participant would benefit from job training as part of the career pathway.
36	Career Pathway: Job Placement	Indicate if the participant would benefit from direct job placement services as part of the career pathway.
37	Career Pathway: Apprenticeship	Indicate if the participant would benefit from an apprenticeship program as part of the career pathway.
38	Career Pathway: Hiring Events	Indicate if the participant would benefit from attending a hiring event/fair as part of the career pathway.
39	Career Pathway: Wrap-Around Services	Indicate if the participant would benefit from any additional supportive services, such as: housing assistance, logistics and transportation, recreation/fitness, child care, financial aid, etc. as part of the career pathway.
40	Services Received: Resume Review	Indicate the most recent date that resume review was provided to the participant by an Employment Navigator. Leave blank if not provided.

41	Services Received: Skills & Interest Assessment Review	Indicate the most recent date that the skills and interest assessment was provided by an Employment Navigator and/or reviewed if previously done. Leave blank if not provided.
42	Services Received: Labor Market Information	Indicate the most recent date that labor market information was provided by an Employment Navigator to the participant. Leave blank if not provided.
43	Services Received: Apprenticeship Overview	Indicate the most recent date that information regarding potential apprenticeship opportunities was provided by an Employment Navigator to the participant. Leave blank if not provided.
44	Services Received: Application submittal (employer or apprenticeship program)	Indicate the most recent date that an application was submitted on behalf of the participant. Leave blank if not provided.
45	Not Interested/Refusal Reason	If the participant refused any of the above services, record reason for refusal.
46	Not Interested/Refusal Reason (Other)	If data element #XX = 6, please identify the reason as provided by the participant.
47	Warm Handover or Connection Type	Select the type of entity that was referred to the participant
48	Warm Handover or Connection Entity	Select the entity that was referred to the participant
49	Employment Navigator Referral Source	Select the primary sources of how the participant heard about the Employment Navigator program. Select all that apply.

50	Placed into Employment	Indicate if the participant was placed into an employment opportunity as a result of Employment Navigator Services. Do not complete this field if participant is referred to a partner.
51	Placement Location - State	Indicate the state in which the participant was placed into employment.
52	Placement Location - City	If known, indicate the city in which the participant was placed into employment.
53	Hourly Wage of Job Placement	If the participant was placed into employment or an Apprenticeship program, indicate the starting wages per hour
54	Other Notes	Optional field. Insert any notes on services provided that may assist other Employment Navigators or partners
55	Case Closed	Select the reason for participant case closure.
56	Future Service Date	Select a future date at which the participant will receive additional Employment Navigator services. A value in this field will keep the participant record in 'open' status
57	Special Project Identifier	Placeholder for any future enhancements to filter out participants based on a set criteria

*Data Type Codes: AN = Alpha-Numeric; IN = Integer; Number behind code represents the overall length allowed*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information if it does not display a valid OMB control number. The reporting burden for this collection of information is estimated to average 0.25 hours per response, including reviewing the data needed, and completing and reviewing the collection of information. The obligation to provide information is subject to the collection of information, including suggestions for reducing the burden, send comments to Washington, DC 20503 or email [murren.luke@dol.gov](mailto:murren.luke@dol.gov) and reference the OMB Control Number.

Layout

Valid Values	Data Type/Field Length
XXXXXXXXXX	AN10
XXXXXXXXX	AN9
1 = Transitioning Service Member 2 = Spouse 3 = Transitioning Service Member (Warm Handover)	IN1
MMDDYYYY	Date8
MMDDYYYY	Date8
1 = Male 2 = Female 3 = Other, or did not disclose	IN1
YYYY	IN4
<p>1 = Yes 0 = No 9 = Participant did not self-identify</p>	IN1
<p>1 = Attained secondary school diploma 2 = Attained a secondary school equivalency 3 = The participant with a disability receives a certificate of attendance/completion as a result of successfully completing an Individualized Education Program (IEP) 4 = Completed one of more years of postsecondary education 5 = Attained a postsecondary technical or vocational certificate (non-degree) 6 = Attained an Associate's degree 7 = Attained a Bachelor's degree 8 = Attained a Masters degree 9 = Attained more than a Masters degree</p> <p>0 = No Educational Level Completed</p>	IN1

1 = Air Force 2 = Army 3 = Coast Guard 4 = Marine Corps 5 = Navy	IN1
1 = Active Duty 2 = National Guard 3 = Reserve	IN1
E-E9; O1-O10; W1-W5	AN3
NS Norfolk, VA Camp Pendleton, CA JB Pearl Harbor-Hickam, HI MCAS Miramar, CA Fort Benning, GA Fort Sill, OK Cherry Point, NC Travis AFB, CA MCAB Okinawa, Japan USAG Bavaria, Germany CFA Yokosuka, Japan Joint Base Charleston, SC Kadena AB, Okinawa, Japan	AN50
Drop-down list of 50 state mailing codes, plus PR, VI, DC.	AN2
XXXXXXXXXX	AN50
XXXXXXXXXX	AN50
(XXX)XXX-XXXX	IN10
<a href="#">XXXXXX@XXX.XXX</a>	AN50
<a href="#">XXXXXX@XXX.XXX</a>	AN50
1 = Call personal phone 2 = Text personal phone 3 = Email address #1 4 = Email address #2	
City	AN50
State	AN50
Country	AN50



City	AN50
State	AN50
Country	AN50
Agriculture, Food & Natural Resources Architecture & Construction Arts, Audio/Video Technology & Communications Business Management & Administration Education & Training Finance Government & Public Administration Health Science Hospitality & Tourism Human Services Information Technology Law, Public Safety, Corrections & Security Manufacturing Marketing Science, Technology, Engineering & Mathematics <u>Transportation, Distribution &amp; Logistics</u>	AN50
1 = Agriculture, Forestry, Fishing and Hunting 2 = Mining, Quarrying, and Oil and Gas Extraction 3 = Utilities 4 = Construction 5 = Manufacturing 6 = Wholesale Trade 7 = Retail Trade 8 = Transportation & Warehousing 9 = Information 10 = Finance & Insurance 11 = Real Estate, Rental, & Leasing 12 = Professional, Scientific, and Technical Services 13 = Management of Companies and Enterprises 14 = Administrative and Support and Waste Management and Remediation Services 15 = Educational Services 16 = Health Care and Social Assistance 17 = Arts, Entertainment, and Recreation 18 = Accommodation and Food Services 19 = Other Services (except Public Administration) 20 = Public Administration	AN50
YYYYMMDD	Date8



YYYYMMDD	Date8
YYYYMMDD	Date8
YYYYMMDD	Date8
YYYYMMDD	Date8
1 = Doesn't think this will help them 2 = Cost factor is an issue 3 = Service isn't available in the desired/future location 4 = Doesn't have available time to participate in the service or activity 5 = Not enough information or not ready to make an informed decision 6 = Other	
Insert Text	AN50
1= American Job Center (Warm Handover) 2 = Approved DOL Partner (non-AJC) 3 = VA Partner (e.g. benefits counselor) 4= DoD Partner 5 = Education entity 6 = Technical Training 7 = Other 8 = No Warm Handover or Connection	IN1
(System will generate drop-down choices based on specific partners registered)	AN50
1 = DOL TAP Courses 2 = Social Media - Facebook 3 = Social Media - LinkedIn 4 = Social Media - Twitter 5 = Email/Text Notification 6 = Word of Mouth 7 = Warm Handover from Commander 8 = American Forces Network / Television 9 = Other	IN8

1 = Placed into employment 2 = Placed into an Apprenticeship program 3 = Not placed	IN1
XX (state postal code)	AN2
XXXXXXXX	AN50
\$XXX.XX	IN5
XXXXXXXX	AN500
1 = Closed due to job placement or referral to partner 2 = Closed due to Participant no longer interested 3 = Closed due to participant inactivity of 90 days with no future services scheduled	IN1
YYYYMMDD	Date8
XXXXX	AN5

vable for the field.

ormation unless such collection displays a valid OMB control number. Public  
; time for reviewing instructions, searching existing data sources, gathering and  
respond to this collection is required to obtain or retain benefit. Send  
uggestions for reducing this burden, to the U.S. Department of Labor, 200  
ontrol Number 1293-0NEW.