

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION ¹																				
					Reportable Individual*	Wagner-Peyser	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Employment Programs - CST (NEPP)	National Employment Programs - Training (NEPT)	National Employment Programs - Job Training (NEPJ)	Indian and Native American Program (INAA) - Adult	Indian and Native American Program (INAA) - Youth	Recent Employment Opportunities (REO) (Adult)	Recent Employment Opportunities (REO) (Youth)	YouthBuild	Job for Veterans State Grants (JVSG)	HEB	Job Corps	Incumbent Worker (Adult) (IWI)	SCSEP	Apprenticeship
SECTION A - INDIVIDUAL INFORMATION																									
SECTION A.01 - IDENTIFYING DATA																									
N/A	GBS Number	IN 9	Record a unique nine integer number for each record to support processing.	000000000 (No hyphens)	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
100	Unique Individual Identifier (WIOA)	AN 12	Record the unique identification number assigned to the participant. At a minimum, this identifier for a person must be the same for each program entry and exit (i.e., "period of participation") that an participant has during a program year so that a unique count of participants may be calculated for the program year. NOTE: For Titles I, II, and III, unless specifically directed in program guidance, this field cannot contain a social security number.	XXXXXXXXXXXX	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
101	State Code of Residence (WIOA)	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. If primary domicile is outside the United States, use the following numeric codes: 77 = 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. AE (ZPs 962xx - 966xx) for Armed Forces Europe which includes Canada, Middle East, and Africa AP (ZPs 962xx - 966xx) for Armed Forces Pacific AA (ZPs 940xx) for Armed Forces (Central and South) Americas	XX	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
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	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
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	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
104	Economic/Labor Market Area and Physical Location Code	IN 9	Record the code (maximum of 9-digits) of the economic/labor market area and physical location in which the participant received his/her first service with significant staff involvement and is financially assisted by the program. Grantees have the flexibility to use the first 5-digits of this field for identifying the economic region or labor market area in which the participant began receiving services with significant staff involvement. The next 4-digits of this field should be used to identify the physical location in which the participant began receiving services with significant staff involvement. Unless otherwise specified by ETA, codes contained within this field are determined by the grantee. Record 999999999 to indicate "statewide/virtual office" if the participant only received remote or virtual self-service or informational activities. Record 000000000 if not known. A physical location means a designated One-Stop Career Center, an affiliated One-Stop partner site, or other specialized centers and sites designed to address special customer needs, such as a company work site for dislocated workers.	000000000	R	R							R	R											R
105	Special Project ID - 1	AN 7	Record the 7-digit alpha-numeric ID assigned by DOL for Special Projects or populations served under this program. Refer to ETA guidance for instructions on its use.	XXXXXXXX	R	R	R	R	R	R	R	R													
106	Special Project ID - 2	AN 7	Record the 7-digit alpha-numeric ID assigned by DOL for Special Projects or populations served under this program. Refer to ETA guidance for instructions on its use. Use this second Project ID in the event that a participant falls under more than one Special Project category.	XXXXXXXX	R	R	R	R	R	R	R	R													
107	Special Project ID - 3	AN 7	Record the 7-digit alpha-numeric ID assigned by DOL for Special Projects or populations served under this program. Refer to ETA guidance for instructions on its use. Use this third Project ID in the event that a participant falls under more than two Special Project categories. NOTE: If Data Element 930 (Pay-for-Performance) = 1, Record Pay-for-Performance Provider ID in this field.	XXXXXXXX	R	R	R	R	R	R	R	R													
108-A	ETA-Assigned 1st Local Workforce Board Code	IN 5	Record the 5-digit ETA assigned Local Board/Statewide code where the participant was determined eligible to participate in the program and received his/her first 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 Dislocated Worker Grant), record the code for the Local Board. If participant record is a liable state record, record 99999. This is the primary ETA Assigned Local Workforce Board Code. It triggers inclusion in state reports as well as the identified Local Area reports.	00000	R	R	R	R	R	R	R	R													
108-B	ETA-Assigned 2nd Local Workforce Board Code	IN 5	Record the 5-digit ETA assigned Local Board where the participant was determined eligible to participate in the program and received his/her first 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 Dislocated Worker Grant), record the code for the Local Board. If participant record is a liable state record, record 99999. This is the secondary ETA Assigned Local Workforce Board Code. It triggers inclusion in the reports for the identified Local Area only.	00000	R	R	R	R	R	R	R	R													
108-C	ETA-Assigned 3rd Local Workforce Board Code	IN 5	Record the 5-digit ETA assigned Local Board where the participant was determined eligible to participate in the program and received his/her first 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 Dislocated Worker Grant), record the code for the Local Board. If participant record is a liable state record, record 99999. This is the tertiary ETA Assigned Local Workforce Board Code. It triggers inclusion in the reports for the identified Local Area only.	00000	R	R	R	R	R	R	R	R													
SECTION A.02 - EQUAL OPPORTUNITY INFORMATION																									
200	Date of Birth (WIOA)	DT 8	Record the participant's date of birth.	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
201	Sex (WIOA)	IN 1	Record 1 if the participant indicates that they were assigned male at birth. Record 2 if the participant indicates that they were assigned female at birth. Record 3 if the participant indicates that they were assigned intersex at birth. Record 9 if the participant did not self-identify their sex.	1 = Male 2 = Female 3 = Intersex 9 = Participant did not self-identify	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
202	Individual with a Disability (WIOA)	IN 1	Record 1 if the participant indicates that they have 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. Record 0 if the participant indicates that he/she does not have a disability that meets the definition. Record 9 if the participant did not self-identify.	1 = Yes 0 = No 9 = Participant did not self-identify	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
203	Category of Disability	IN 9	For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the impairment is primarily physical, due to a chronic health condition. Record 2 if the impairment is primarily physical, including mobility. Record 3 if, because of a mental illness, psychiatric disability, or emotional condition, the participant has serious difficulty concentrating, remembering, or making decisions. Record 4 if the participant is blind or has serious difficulty seeing. Record 5 if the participant is deaf or has serious difficulty hearing. Record 6 if the participant has a learning disability. Record 7 if the participant has a cognitive or intellectual disability. Record 9 if the participant does not wish to disclose his/her category of disability. Record 0 if the participant has no disability. Record all that apply if the participant has more than one impairment.	1 = Physical/Chronic Health Condition 2 = Physical/Mobility Impairment 3 = Mental or Psychiatric Disability 4 = Vision-related disability 5 = Hearing-related disability 6 = Learning Disability 7 = Cognitive/Intellectual disability 9 = Participant did not disclose type of disability 0 = No disability	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
204	Individual With A Disability SDOA Services	IN 1	For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has received services funded by the State Developmental Disabilities Agency (SDOA). Record 0 if the participant does not meet any of the conditions described above. Leave blank if this data element does not apply to this participant.	1 = SDOA 0 = No	R	R	R	R	R	R	R	R													
205	Individual With A Disability LSMHA Services	IN 1	For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has received services funded by a local or state mental health agency (LSMHA). Record 0 if the participant does not meet any of the conditions described above. Leave blank if this data element does not apply to this participant.	1 = LSMHA 0 = No	R	R	R	R	R	R	R	R													
206	Individual With A Disability Medicaid HCBS Services	IN 1	For those participants where Individual With A Disability (WIOA) = 1: Record 1 if the participant has received services funded via a state Medicaid HCBS waiver. Record 0 if the participant does not meet any of the conditions described above. Leave blank if this data element does not apply to this participant.	1 = HCBS waiver 0 = No	R	R	R	R	R	R	R	R													

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

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					Reportable Individual	Warner Payee	WIDA Adults	WIDA Dislocated Workers	WIDA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFP)	National Farmworker Jobs Program - Housing (NJP)	Indian and Native American Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	
					R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
336	Military-Connected Individual	IN 1	<p>Record 1 if participant is the spouse of a member of the Armed Forces on active duty (as defined in section 3016d(1) of title 10, United States Code).</p> <p>Record 2 if the participant is the spouse, child, parent, or next of kin of a veteran who is the primary caregiver for a veteran undergoing medical treatment, recuperation, or therapy for a serious injury or illness who was a member of the Armed Forces (including a member of the National Guard or Reserve) and who was discharged or released under conditions other than dishonorable.</p> <p>Record 3 if the participant is the spouse, child, parent, or next of kin of a service member who died while on active duty, or from a service-connected disability following discharge or release under conditions other than dishonorable.</p> <p>Record 4 if the participant is married to a retired or separated member of the Armed Forces who was discharged or released under conditions other than dishonorable, so long as the marriage occurred prior to or during the service member's active service.</p> <p>Record 0 if the participant does not meet any one of the conditions described above.</p>	1 = Active Duty Military Spouse Yes 2 = Military Caregiver 3 = Survivor 4 = Veteran Spouse 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
SECTION 4.04 - EMPLOYMENT AND EDUCATION INFORMATION																										
400	Employment Status at Program Entry (WIOA)	IN 1	<p>Record 1 if the participant, at program entry, (a) is currently performing any work at all as a paid employee, (b) is currently performing any work at all in his or her own business, profession, or farm, (c) is currently performing any work as an unpaid worker in an enterprise operated by a member of the family, or (d) is one who is not working, but currently has a job or business from which he or she is 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.</p> <p>Record 2 if the participant, at program entry, is a person who, 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 (i.e., within 12 months of separation or 24 months of retirement).</p> <p>Record 3 if the participant, at program entry, is not in the labor force (i.e., those who are not employed and are not actively looking for work, including those who are incarcerated).</p> <p>Record 0 if the participant, at program entry, is not employed but is seeking employment, makes specific efforts to find a job, and is available for work.</p>	1 = Employed 2 = Employed, but Received Notice of Termination of Employment or Military Separation is pending 3 = Not in labor force 0 = Unemployed	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
401	UC Eligible Status	IN 5	<p>Record 1 if the participant is a person who (a) filed a claim and has been determined 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) received staff-assisted services provided by the Reemployment Services and Eligibility Assessment (RESEA) program.</p> <p>Record 2 if the participant is a person who (a) filed a claim and has been determined 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 Profiles and Reemployment Services (WRPS) system.</p> <p>Record 3 if the participant is a person who meets condition 2 (a) described above, but was not referred to service through the state's WRPS system or did not receive a RESEA provided staff-assisted service.</p> <p>Record 4 if the participant meets condition (a), but has exhausted all UC benefit rights for which he/she has been determined eligible, including extended supplemental benefit rights.</p> <p>Record 5 if the participant is a claimant who is exempt from normal work search requirements according state law, and does not have to perform work search activities.</p> <p>Record 0 if the participant was neither a UC Claimant nor an Exhautee.</p> <p>Leave blank if this data element does not apply to the participant.</p>	1 = Claimant Referred by RESEA 2 = Claimant Referred by WRPS 3 = Claimant Not Referred by RESEA or WRPS 4 = Exhautee 5 = Claimant is Exempt 0 = Neither Claimant nor Exhautee	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
402	Long-Term Unemployed at Program Entry (WIOA)	IN 1	<p>Record 1 if the participant, at program entry, has been unemployed for 27 or more consecutive weeks.</p> <p>Record 2 if the participant, at program entry, has not been unemployed for 27 or more consecutive weeks, but meets a Disaster DWG grantee's unique definition of long-term unemployed.</p> <p>Record 0 if the participant has been unemployed for 27 or more non-consecutive weeks within the past 12 months.</p> <p>Record 0 if the participant does not meet the condition described above.</p> <p>Note: Code values 2 and 3 may only be used when the applicable code is allowed by programmatic requirements.</p>	1 = Yes, Unemployed ≥ 27 consecutive weeks 2 = Yes, other Disaster DWG LTU definition 3 = Yes, Unemployed ≥ 27 non-consecutive weeks in past 12 months 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
403	Occupational Code of Most Recent Employment Prior to Participation (if available)	AN 8	<p>Record the 8-digit O'NET SOC 2019 taxonomy occupational code (database version 25.1 or later) that matches the participant's employment prior to participation. This information is based on the most recent job held before participating in the program.</p> <p>Leave blank if occupational code is not available or not known, or the data element does not apply.</p> <p>Additional Notes: This information must be based on the most recent job held prior to participating in the program and only applies to adults, and dislocated workers. If all 8 digits of the occupational skills code are not collected, record at least the first 6 digits. If the participant had multiple jobs, use the occupational skills code of the job where the participant earned the highest gross wage.</p>	00000000	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
404	Industry Code of Employment 1st Quarter Prior to Participation	IN 6	<p>Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If the participant had multiple jobs, then the NAICS associated with the highest gross wage should be reported.</p> <p>Enter 999999 if Wages 1st Quarter Prior to Participation Quarter exist and NAICS Code is not known.</p> <p>Leave blank if this data element does not apply to the person.</p>	000000	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R				
405	Industry Code of Employment 2nd Quarter Prior to Participation	IN 6	<p>Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If the participant had multiple jobs, then the NAICS associated with the highest gross wage should be reported.</p> <p>Enter 999999 if Wages 2nd Quarter Prior to Participation Quarter exist and NAICS Code is not known.</p> <p>Leave blank if this data element does not apply to the person.</p>	000000	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
406	Industry Code of Employment 3rd Quarter Prior to Participation	IN 6	<p>Record the 4 to 6-digit industry code that best describes the participant's employment using the North American Industrial Classification System (NAICS). If the participant had multiple jobs, then the NAICS associated with the highest gross wage should be reported.</p> <p>Enter 999999 if Wages 3rd Quarter Prior to Participation Quarter exist and NAICS Code is not known.</p> <p>Leave blank if this data element does not apply to the person.</p>	000000	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
407	Highest School Grade Completed at Program Entry (WIOA)	IN 2	<p>Use the appropriate code to record the highest school grade completed by the participant at program entry.</p> <p>Record 1 - 12 for the number of school grades completed by the participant.</p> <p>Record 0 if no school grades were completed.</p>	1 = 12 = Number of school grades completed 0 = No school grades completed	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
408	Highest Educational Level Completed at Program Entry (WIOA)	IN 1	<p>Use the appropriate code to record the highest educational level completed by the participant at program entry.</p> <p>Record 1 if the participant attained a secondary school diploma.</p> <p>Record 2 if the participant attained a secondary school equivalency.</p> <p>Record 3 if the participant has a disability and obtained a certificate of attendance/completion as a result of successfully completing an Individualized Education Program (IEP).</p> <p>Record 4 if the participant completed one or more years of postsecondary education.</p> <p>Record 5 if the participant attained a postsecondary certification, license, or educational certificate (non-degree).</p> <p>Record 6 if the participant attained an Associate's degree.</p> <p>Record 7 if the participant attained a Bachelor's degree.</p> <p>Record 8 if the participant attained a degree beyond a Bachelor's degree.</p> <p>Record 0 if no educational level was completed.</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 or 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 degree beyond a Bachelor's degree 0 = No Educational Level Completed	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
409	School Status at Program Entry (WIOA)	IN 1	<p>Record 1 if the participant, at program entry, has not received a secondary school diploma or its recognized equivalent and is attending an primary or secondary school (including elementary, intermediate, junior high school, whether full or part-time), or is between school terms and intends to return to school.</p> <p>Record 2 if the participant, at program entry, has not received a secondary school diploma or its recognized equivalent and is attending an alternative high school or an alternative course of study approved by the local educational agency whether full or part-time, or is between school terms and is enrolled to return to school.</p> <p>Record 3 if the participant, at program entry, has received a secondary school diploma or its recognized equivalent and is attending a postsecondary school or program (whether full or part-time), or is between school terms and is enrolled to return to school.</p> <p>Record 4 if the participant, at program entry, is not within the age of compulsory school attendance, and is no longer attending any school and has not received a secondary school diploma or its recognized equivalent.</p> <p>Record 5 if the participant, at program entry, is not attending any school and has either graduated from secondary school or has attained a secondary school equivalency.</p> <p>Record 6 if the participant, at program entry, is within the age of compulsory school attendance, but is not attending school and has not received a secondary school diploma or its recognized equivalent.</p>	1 = In-school, secondary school or less recognized equivalent 2 = In-school, alternative school 3 = In-school, postsecondary school 4 = Not attending school or secondary school dropout 5 = Not attending school, secondary school graduate or has a recognized equivalent 6 = Not attending school within age of compulsory school attendance	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
410	Date of Actual Dislocation	DT 8	<p>Record the participant's date of actual dislocation from employment. This date is the last day of employment at the dislocation job.</p> <p>Leave blank if there is no dislocation job (e.g., displaced homemaker) or this data element does not apply to the participant.</p>	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
411	Most Recent Date of Qualifying Separation	DT 8	<p>Record the participant's most recent date of separation from trade-impacted employment that qualifies the participant to receive benefits and/or services under the Trade Act.</p> <p>Leave blank if there is no qualifying separation date or the separation date is the same as the Date of Actual Dislocation or this data element does not apply to the participant.</p>	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
412	Tenure with Employer at Separation	IN 3	<p>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".</p> <p>Leave blank if this data element does not apply to the participant.</p>	000	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			

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					Reportable Individual	Wagner Payee	WIDA Adults	WIDA Educated Workers	WIDA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFP)	National Farmworker Jobs Program - Housing (NFP)	Indian and Native American Program (INA)	Indian and Native American Youth Program (INAY)	Bechtel Employment Opportunities (BEO) (AAAF)	Bechtel Employment Opportunities (BEO) (YOUTH)	YouthBuild	Job for Veterans State Grant (JVS)	HEB	Job Corps	Incumbent Worker (IWI) (AAAF)	SCRP	Apprenticeship
413	Migrant and Seasonal Farmworker Designation as defined at 20 CFR 651.10	IN 1	Record 1 If the participant is a seasonal farmworker, meaning an individual who is employed, or was employed in the past 12 months, in farmwork (as described at 20 CFR 651.10) of a seasonal or other temporary nature and is not required to be absent overnight from his/her permanent place of residence. Non-migrant individuals who are full-time students are excluded. Labor is performed on a seasonal basis where, ordinarily, the employment pertains to, or is of the kind exclusively performed at certain seasons, or periods of the year and which, from its nature, may not be continuous or carried on throughout the year. A worker, who moves from one seasonal activity to another, while employed in farmwork, is employed on a seasonal basis even though he/she may continue to be employed during a major portion of the year. A worker is employed on other temporary basis where he/she is employed for a limited time only or his/her performance is contemplated for a particular piece of work, usually of short duration. Generally, employment which is contemplated to continue indefinitely is not temporary. Record 2 If the participant is a migrant farmworker, meaning a seasonal farmworker (as defined above) who travels to the job site that the farmworker is not reasonably able to return to his/her permanent residence within the same day. Full-time students traveling in organized groups rather than with their families are excluded. Record 0 If the participant does not meet the condition described above. Leave blank if this data element does not apply to the individual.	1 = Seasonal Farmworker 2 = Migrant 0 = No		R																	R	
SECTION A.05 - PUBLIC ASSISTANCE INFORMATION																								
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 state agency in the last six months prior to participation in the program. Record 0 If the participant does not meet the condition described above. Leave blank if this data element does not apply to the participant.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
601	Exhausting TANF Within 2 Years (Part A Title IV of the Social Security Act) at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, is within 2 years of exhausting lifetime eligibility under part A of Title IV of the Social Security Act (42 U.S.C. 4011 et seq.), regardless of whether receiving these benefits at program entry. Record 0 If the participant does not meet the condition described above. Record 9 If the data element does not apply to the participant (i.e., the participant has never received TANF, or if the participant has already exhausted lifetime TANF eligibility).	1 = Yes 0 = No 9 = Not applicable		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
602	Supplemental Security Income (SSI) / Social Security Disability Insurance (SSDI)	IN 1	Record 1 If the participant is receiving or has received SSI under Title XVI of the Social Security Act in the last six months prior to participation in the program. Record 2 If the participant is receiving or has received SSI benefit payments under Title XIX of the Social Security Act in the last six months prior to participation in the program. Record 3 If the participant is receiving or has received both SSI and SSDI in the last six months prior to participation in the program. Record 4 If the participant is receiving or has received SSI under Title XVI of the Social Security Act in the last six months prior to participation in the program and is a Ticket to Work Program Ticket Holder issued by the Social Security Administration. Record 5 If the participant 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 program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. Record 6 If the participant is receiving or has received both SSI and SSDI in the last six months prior to participation in the program and is a Ticket to Work Program Ticket holder issued by the Social Security Administration. Record 0 If the participant does not meet any of the conditions described above.	1 = SSI 2 = SSDI 3 = Both SSI and SSDI 4 = SSI and Ticket Holder 5 = SSDI and Ticket Holder 6 = Both SSI and SSDI and A Ticket Holder 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
603	Supplemental Nutrition Assistance Program (SNAP)	IN 1	Record 1 If the participant is receiving assistance through the Supplemental Nutrition Assistance Program (SNAP) under the Food and Nutrition Act of 2008 (7 USC 2011 et seq.). Record 0 If the participant does not meet the above criteria.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
604	Other Public Assistance Recipient	IN 1	Record 1 If the participant is a person who is receiving, or has received cash assistance or other support services from one of the following sources in the last six months prior to participation in the program: General Assistance (GA) (State/local government), or Refugee Cash Assistance (RCA). Do not include foster child payments. Record 0 If the participant does not meet the above criteria. Leave blank if this data element does not apply to the participant.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
SECTION A.06 - ADDITIONAL YOUTH CHARACTERISTICS																								
701	Pregnant or Parenting Youth	IN 1	Record 1 If the participant is a youth who is pregnant or a youth parenting one or more dependents under age 18. An individual who is parenting can be a custodial or non-custodial parent or guardian. Record 0 If the participant does not meet the conditions described above. Leave blank if the data is not available.	1 = Yes 0 = No							R	R	R	R	R	R	R	R	R	R	R	R	R	
702	Youth Who Needs Additional Assistance	IN 1	Record 1 If the participant is an out-of-school youth who requires additional assistance to enter or complete an educational program, or to secure and hold employment or an in-school youth who requires additional assistance to complete an educational program or to secure or hold employment as defined by State or local policy. If the State Board defines a policy, the policy must be included in the State Plan. Record 0 If the participant does not meet the conditions described above. Leave blank if this data element does not apply to the participant.	1 = Yes 0 = No					R			R		R									R	
704	Foster Care Youth Status at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, is a person aged 24 or under who is currently in foster care or has aged out of the foster care system. Record 0 If the participant does not meet the conditions described above.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
SECTION A.07 - ADDITIONAL REPORTABLE CHARACTERISTICS																								
800	Homeless participant, Homeless Children and Youths, or Runaway Youth at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry: (a) Lacks a fixed, regular, and adequate nighttime residence; this includes a participant who: (i) is sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; (ii) is living in a motel, hotel, trailer park, or campground due to a lack of alternative adequate accommodations; (iii) is living in an emergency or transitional shelter; (iv) is abandoned in a hospital; or (v) is awaiting foster care placement; (b) Has a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, such as a car, park, abandoned building, bus or train station, airport, or camping ground; (c) Is a migratory child who in the preceding 56 months was required to move from one school district to another due to changes in the parent's or parent's spouse's seasonal employment in agriculture, dairy, or fishing work; or (d) Is under 18 years of age and absents himself or herself from home or place of legal residence without the permission of his or her family (i.e., runaway youth). This definition does not include a participant imprisoned or detained under an Act of Congress or State law. A participant who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be categorized as homeless. Record 0 If the participant does not meet the conditions described above. Note: WIOA youth who meet the definition of homeless as defined in WIOA section 681.210(c)(5) and 681.220(d)(4) are reported in this data element.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
801	Ex-Offender Status at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, is a person who either (a) has been subject to any stage of the criminal justice process for committing a status offense or delinquent act; or (b) requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction. Record 0 If the participant does not meet any one of the conditions described above. Record 9 If the participant did not disclose.	1 = Yes 0 = No 9 = Did not disclose		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
802	Low Income Status at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, is a person who: (a) Receives, or in the 6 months prior to application to the program has received, or is a member of a family that is receiving or in the past 6 months prior to application to the program has received: (i) Assistance through the supplemental nutrition assistance program (SNAP) under the Food and Nutrition Act of 2008 (7 USC 2011 et seq.); (ii) Assistance through the temporary assistance for needy families program under part A of Title IV of the Social Security Act (42 U.S.C. 4011 et seq.); (iii) Assistance through the supplemental security income program under Title XVI of the Social Security Act (42 USC 1381); or (iv) State or local income-based public assistance. (b) Is in a family with total family income that does not exceed the higher of the poverty line or 70% of the lower living standard income level; (c) Is an individual who receives, or is eligible to receive a free or reduced price lunch under the Richard B. Russell National School Lunch Act (42 USC 1751 et seq.); (d) Is a foster child on behalf of whom State or local government payments are made; (e) Is a participant with a disability whose own income is the poverty line but who is a member of a family whose income does not meet this requirement; (f) Is a homeless participant or a homeless child or youth or runaway youth (see Data Element #800); or (g) Is a youth living in a high-poverty area. Record 0 If the participant does not meet the criteria presented above.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
803	English Language Learner at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, is a person who has limited ability in speaking, reading, writing or understanding the English language and also meets at least one of the following two conditions: (a) his or her native language is a language other than English, or (b) he or she 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.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
804	Basic Skills Deficient/Low Levels of Literacy at Program Entry (WIOA)	IN 1	Record 1 If the participant is, at program entry: (A) a youth, who has English reading, writing, or computing skills at or below the 8th grade level on a generally accepted standardized test; or (B) a youth or adult, who is unable to compute and solve problems, or read, write, or speak English at a level necessary to function on the job, in the participant's family, or in society. Record 0 If the participant does not meet the conditions described above.	1 = Yes 0 = No		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
805	Cultural Barriers at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, perceives him or herself as possessing attitudes, beliefs, customs or practices that influence a way of thinking, acting or working that may serve as a hindrance to employment. Record 0 If the participant does not meet the conditions described above. Record 9 If the participant did not self-identify.	1 = Yes 0 = No 9 = Participant did not self-identify		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
806	Single Parent at Program Entry (WIOA)	IN 1	Record 1 If the participant, at program entry, is single, separated, divorced or a widowed individual who has primary responsibility for one or more dependent children under age 18 (including single pregnant women). Record 0 If the participant does not meet the condition described above. Record 9 If the participant did not self-identify.	1 = Yes 0 = No 9 = Participant did not self-identify		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																						
					Reportable Individual	Warmer Prayer	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFP)	National Farmworker Jobs Program - Housing (NFP)	Indian and Native American Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)	Indian and Native American Youth Program (INA)				
					Y	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
807	Displaced Homemaker at Program Entry (WIOA)	IN 1	Record 1 if the participant, at program entry, has been providing unpaid services to family members in the home and who: (A) has been dependent on the income of another family member but is no longer supported by that income; or (B) is the dependent spouse of a member of the Armed Forces on active duty (as defined in section 101(d)(1) of title 10, United States Code) and whose family income is significantly reduced because of a deployment (as defined in section 971(d) of title 10, United States Code, or pursuant to paragraph (4) of such section), a call or order to active duty pursuant to a provision of law referred to in section 101(a)(1)(3)(B) of title 10, United States Code, a permanent change of station, or the service-connected (as defined in section 101(16) of title 38, United States Code) death or disability of the member; (B) is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment. Record 0 if the participant does not meet the conditions described above.	1 = Yes 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R						
808	Migrant and Seasonal Farmworker Status	IN 1	Record 1 if the participant, at program entry, is a low-income individual (I) who for the 12 consecutive months out of the 24 months prior to application for the program involved, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment; and (II) faces multiple barriers to economic self-sufficiency. Record 2 if the participant, at program entry, is a seasonal farmworker and whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day. Record 3 if the participant is a migrant farmworker or seasonal farmworker (as defined above) aged 14-24. Record 4 if the participant is an adult program participant and a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above. Record 5 if the participant is a youth program participant and a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above. *Note: This element is used both by the NFP Program eligibility status type and by other programs to identify participants with this (WIOA, sec. 1) defined barrier to employment.	1 = Seasonal Farmworker Adult 2 = Migrant Farmworker Adult 3 = MSFW Youth 4 = Dependent Adult 5 = Dependent Youth 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R					
SECTION B - ONE STOP CENTER PROGRAM PARTICIPATION INFORMATION																											
900	Date of Program Entry (WIOA)	DT 8	Record the date on which an individual became a participant as referenced in 20 CFR 677.150 satisfying applicable programmatic requirements for the provision of services. Leave blank if this data element does not apply.	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
901	Date of Program Exit (WIOA)	DT 8	Record the last date the participant received services that are not self-service, information-only, or out-of-school youth that received services under WIOA section 128(a)(1). If there are no future services, that are not self-service, information-only, or follow up services, planned from the program. For Tables I, II, and III, record the last date of funded services. For Vocational Rehabilitation programs, record the date when the participant's record of service is closed pursuant to 34 CFR 361.43 or 361.56. Leave blank if this data element does not apply to the participant.	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
902	Date of First Case Management and Employment Service	DT 8	Record the date on which the participant begins receiving his/her first case management and employment service funded by a program following a determination of eligibility to participate in the program.																								
903	Adult (WIOA)	IN 1	Record 1 if the participant received services under WIOA section 1330(b)(2)(A) as an individual who is not less than age 18 at the time of program entry. Record 2 if the participant received services under WIOA section 1330(a)(1). Record 3 if the participant received services under WIOA sections 1330(b)(2)(A) and 1330(a)(1). Record 4 if the individual has demonstrated an intent to use program services and meets one of the following criteria: (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive services under the condition described above.	1 = Yes, Local Formula 2 = Yes, Statewide 3 = Yes, Both Local Formula and Statewide 4 = Reportable Individual 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
904	Dislocated Worker (WIOA)	IN 1	Record 1 if the participant received services under WIOA Section 1330(b)(2)(B) as a person who— (A)(i) has been terminated or laid off, or who has received a notice of termination or layoff, from employment; (ii) is eligible for or has exhausted entitlement to unemployment compensation; or (iii) has been employed for a duration sufficient to demonstrate, to the appropriate entity at a one-stop center referred to in section 121(e), attachment to the workforce, but is not eligible for unemployment compensation due to insufficient earnings or having performed services for an employer that were not covered under a State unemployment compensation law; and (iv) is unlikely to return to a previous industry or occupation; (B)(i) has been terminated or laid off, or has received a notice of termination or layoff, from employment as a result of any permanent closure of, or any substantial layoff at, a plant, facility, or enterprise; (ii) is employed at a facility at which the employer has made a general announcement that such facility will close within 180 days; or (iii) for purposes of eligibility to receive services other than training services described in WIOA Sec. 134(c)(3), career services described in WIOA Sec. 134(c)(2)(A)(iii), or supportive services, is employed at a facility at which the employer has made a general announcement that such facility will close; (C) was self-employed (including employment as a farmer, a rancher, or a fisherman) but is unemployed as a result of general economic conditions in the community in which the participant resides or because of natural disasters; (D) is a displaced homemaker; or (E) is the spouse of a member of the Armed Forces on active duty (as defined in section 101(d)(1) of title 10, United States Code), and who has experienced a loss of employment as a direct result of relocation to accommodate a permanent change in duty station of such member or (ii) is the spouse of a member of the Armed Forces on active duty and who meets the criteria described in WIOA Section 316(a)(8). Record 2 if the participant received services under WIOA section 1331(a). Record 3 if the participant received services under WIOA sections 1330(b)(2)(B) and 1331(a). Record 4 if the individual has demonstrated an intent to use program services and meets one of the following criteria: (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive services under the condition described above.	1 = Yes, Local Formula 2 = Yes, Statewide 3 = Yes, Both Local Formula and Statewide 4 = Reportable Individual 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
905	Youth (WIOA)	IN 1	Record 1 if the participant is an eligible youth defined in WIOA Section 3(18) as an in-school youth or out-of-school youth that received services under WIOA section 128(a). Record 2 if the participant is an eligible youth defined in WIOA Section 3(18) as an in-school youth or out-of-school youth that received services under WIOA section 128(a). Record 3 if the participant is an eligible youth defined in WIOA Section 3(18) as an in-school youth or out-of-school youth that received services under WIOA sections 128(b) and 128(a). Record 4 if the individual fails to complete the program requirements for eligibility or for participation. Record 0 if the participant did not receive services under the conditions described above.	1 = Yes, Local Formula 2 = Yes, Statewide 3 = Yes, Both Local Formula and Statewide 4 = Reportable Individual 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
906	Date of First WIOA Youth Service	DT 8	Record the date on which the participant began receiving his/her first WIOA youth service (i.e., 1 of the 14 youth program elements in WIOA 129(c)(2)). Leave blank if the participant did not receive services funded by the WIOA Youth program.	YYYYMMDD																							
907	Recipient of Incumbent Worker Training	IN 1	Record 1 if the participant received Incumbent Worker training services under WIOA section 134(a)(2)(A)(i) and/or 134(a)(2)(A)(ii). Record 2 if the participant received Incumbent Worker training services by Local Formula funds under WIOA section 134(d)(4). Record 3 if the participant received Incumbent Worker training services under both Statewide funds (Governor's Reserve and/or Rapid Response) WIOA section 134(a)(3)(A)(i) and/or 134(a)(2)(A)(i) and Local Formula funds under WIOA section 134(d)(4). Record 4 if the participant received Incumbent Worker training services under a National Dislocated Worker Grant (DWG) (WIOA section 170). Record 5 if the participant received Incumbent Worker training services under a National Farmworker Job Program (NFWJ) (WIOA section 147). Record 6 if the participant received Incumbent Worker training services under an grant funded through apprenticeship appropriated funds. Record 7 if the participant did not 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.	1 = Statewide 15% and/or Rapid Response 25% only 2 = Local Formula only (20%) 3 = Both Statewide and Local Formula 4 = I-18 funded grant 5 = DWG funded grant 6 = NFP funded grant 7 = Apprenticeship appropriated funded grant 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
908	Rapid Response	IN 1	Record 1 if the participant participated in rapid response activities authorized at WIOA section 134(a)(2)(A)(ii). Record 0 if the participant did not receive services under the condition described above. Record 9 if grantee is unable to track enrollment in the program. Leave blank if this data element does not apply to the participant.	1 = Yes 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
909	Rapid Response (Additional Assistance)	IN 1	Record 1 if the individual participated in a program by WIOA section 134(a)(2)(A)(iii). 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. Record 9 if grantee is unable to track enrollment in the program. Leave blank if this data element does not apply to the individual.	1 = Yes 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
910	Adult Education (WIOA)	IN 1	Record 1 if the participant received services under WIOA Title II defined as academic instruction and education services below the postsecondary level that increases an individual's ability to: (A) read, write, and speak in English and perform mathematics or other activities necessary for the attainment of a secondary school diploma or its recognized equivalent; (B) transition to postsecondary education and training; and (C) obtain employment. Record 0 if the participant did not receive any services under the conditions described above. Record 9 if the grantee is unable to track enrollment in the program.	1 = Yes 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
911	Job Corps (WIOA)	IN 1	Record 1 if the participant received services under Title I, chapter 4, subtitle C of WIOA. Record 2 if the individual received reportable individual services (as defined in program specific guidance). Record 0 if the individual did not receive any services under the conditions described above. Record 9 if grantee is unable to track enrollment in the program.	1 = Yes 2 = Reportable Individual 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																					
					Reportable Individual	Wagner-Peyser	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFJP)	National Farmworker Jobs Program - Housing (NFJP)	Indian and Native American Program (INA)	Indian and Native American Program (INA) - Youth	Senior Employment Opportunities (SEO) (AAAI)	Senior Employment Opportunities (SEO) (AAAI)	Senior Employment Opportunities (SEO) (AAAI)	YouthBuild	Job For Veterans State Grant (JFVSG)	HB	Job Corps	Incumbent Worker (IWI) (IWI)	SCIP	Apprenticeship	Demonstration Grants
912	National Farmworker Jobs Program	AN 14	Record the 13 or 14 character grant FAIN number if the participant received services under WIOA Title I-D, Section 167. There are two grant number formats based on when the grant was awarded: Older grant FAIN number formats start with two letters, are 14 characters, and should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-24). Newer grant FAIN numbers start with two numbers, are 13 characters, and should be entered in the following format without dashes: Two numeric characters representing the fiscal year when the grant was awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the type of grant awarded-Two alphabetic characters representing the grant program code-Six numeric characters (12-A-55-AA-123456). If the grant number is unknown, please enter 999999999999. Leave blank if the participant did not receive services funded by this program.	XXXXXXXXXXXX	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
913	Indian and Native American Programs	IN 1	Record 1 if the participant received services under WIOA Title I-D, Section 166 Record 2 if the individual has demonstrated an intent to use program services and meets one of the following criteria: (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Leave blank if the participant did not receive services funded by this program.	1 = Yes 2 = Reportable Individual	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
914	Veterans Programs	IN 2	Record 1 if the participant received services from a Disabled Veterans Outreach Program specialist (DVOP specialist) or a Consolidated Disabled Veterans Outreach Program (DVOP)/Local Veterans Employment Representative (LVER) Record 0 if the participant did not receive services under any of the conditions described above. Record 9 if grantee is unable to track enrollment in the program.	1 = Yes, DVOP specialist or Consolidated DVOP/LVER 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
915	TAA Petition Number	AN 29	Record the petition number (and full alphabetical suffix, if applicable) of the certification which applies to the participant's grant. If there is more than one petition number, list all petition numbers in the order in which they were received delimited by a pipe character (i.e.,). If there are more than three petition numbers, list the first petition and the most recent two petition numbers. Leave blank if this data element does not apply to the participant.	XXXXXXXXXX	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
916	Vocational Education	IN 1	Record 1 if the participant received services under the Carl D. Perkins Vocational and Applied Technology Education Act (20 USC 2301 et seq.) Record 0 if the participant did not receive services under the condition described above. Record 9 if unknown. Leave blank if this data element does not apply to the participant.	1 = Yes 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
917	Vocational Rehabilitation (WIOA)	IN 1	Record 1 if the participant received services under parts A and B of title I of the Rehabilitation Act of 1973 (29 USC 720 et seq.), WIOA title IV, and Sec. 41101(15) defined as transition services for students with disabilities, that facilitate the transition from school to postsecondary life, such as achievement of an employment outcome in competitive integrated employment, or pre-employment transition services. Record 2 if the participant received services from the Vocational Rehabilitation and Employment (VR&E) Program authorized by 38 USC Chapter 41. Record 3 if the participant received services from both vocational rehabilitation programs. Record 0 if the participant did not receive any services under the conditions described above. Record 9 if unknown.	1 = Yes 2 = VR&E 3 = Both VR and VR&E 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
918	Wagner-Peyser Employment Service (WIOA)	IN 1	Record 1 if the participant received services under the Wagner-Peyser Act (29 USC 49 et seq.) Record 2 if the individual has demonstrated an intent to use program services and meets one of the following criteria: (A) Individuals who provide identifying information; (B) Individuals who only use the self-service system; or (C) Individuals who only receive information-only services or activities. Record 0 if the participant did not receive services under the Wagner-Peyser Act. Record 9 if the grantee is unable to track enrollment in the program.	1 = Yes 2 = Reportable Individual 0 = No 9 = Unknown	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
919	YouthBuild (WIOA)	AN 14	Record the 13 or 14 character grant FAIN number if the participant received services under the YouthBuild Program as authorized under WIOA section 171. There are two grant number formats based on when the grant was awarded: Older grant FAIN number formats start with two letters, are 14 characters, and should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-24). Newer grant FAIN numbers start with two numbers, are 13 characters, and should be entered in the following format without dashes: Two numeric characters representing the fiscal year when the grant was awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the type of grant awarded-Two alphabetic characters representing the grant program code-Six numeric characters (12-A-55-AA-123456). If the grant number is unknown, please enter 99,999999999999. Leave blank if the participant did not receive services funded by this program.	XXXXXXXXXXXX	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
920	Senior Community Service Employment Program	AN 14	Record the 13 or 14 character grant FAIN number if the participant received services under Title V of the Older Americans Act of 2006, the Senior Community Service Employment Program (SCSEP). There are two grant number formats based on when the grant was awarded: Older grant FAIN number formats start with two letters, are 14 characters, and should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-24). Newer grant FAIN numbers start with two numbers, are 13 characters, and should be entered in the following format without dashes: Two numeric characters representing the fiscal year when the grant was awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the type of grant awarded-Two alphabetic characters representing the grant program code-Six numeric characters (12-A-55-AA-123456). If the grant number is unknown, please enter 99999999999999. Leave blank if the participant did not receive services funded by this program.	XXXXXXXXXXXX	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
921	Employment and Training Services Related to SNAP	IN 1	Record 1 if the participant received employment and training (E&T) services from the Supplemental Nutrition Assistance Program (SNAP) (7 USC 2015(d)(4)). NOTE: This refers to the SNAP E&T program, NOT simply a SNAP recipient. Record 0 if the participant did not receive any services under the condition described above. Leave blank if it is not known.	1 = Yes 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
922	Other WIOA or Non-WIOA Programs	IN 1	Record 1 if the participant received services from any other WIOA or non-WIOA program not listed above that provided the participant with services during their period of participation. Record 2 if the participant received services from the Intellectual and/or Developmental Disability Program, Mental Health Program, or other Employment First State Leadership Mentoring Program (ESLMP) during the period of participation. Record 0 if the participant did not receive any services under either of the conditions described above.	1 = Yes, Other WIOA or Non-WIOA Programs 2 = I/DD, MH or other disability programs 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
923	Other Reasons for Exit (WIOA)	IN 2	Record 01 if the participant exits the program because he or she has become incarcerated in a correctional institution or has become a resident of an institution or facility providing 24-hour support such as a hospital or treatment center during the course of receiving services as a participant. Record 02 if the participant exits the program because of medical treatment and that treatment is expected to last longer than 90 days and precludes entry into unsubsidized employment or continued participation in the program. Record 03 if the participant is deceased. Record 04 if the participant exits the program because 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 05 if the participant is in the foster care system as defined in 45 CFR 1355.20(a), and exits the program because the participant has moved from the area as part of such a program or system (Youth participants only). Record 06 if the participant, who was determined to be eligible, is later determined not to have met eligibility criteria. For Titles I, II, and III program eligibility is determined at the time an individual becomes a participant. Record 07 if the participant is a criminal offender in a correctional institution under section 225 of WIOA. Record 00 if the participant meets none of the above conditions.	01 = Institutionalized 02 = Health/Medical 03 = Deceased 04 = Reserve Forces called to Active Duty 05 = Foster Care 06 = Ineligible 07 = Criminal Offender 00 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
924	TAA Application Date	DT 8	Record the date on which the individual first applied for Trade Act services/benefits under the applicable certification.	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
925	Date of First TAA Benefit or Service	DT 8	Record the date of the first Trade funded benefit or service received after the participant was determined eligible to participate.	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
926	TAA Liable/Agent State Identifier	IN 1	Record 1 if the reporting State is serving the participant exclusively as a liable state. The definition for liable state can be found under 20 CFR 617.26(a). Record 2 if the reporting State is serving the participant as an agent state. The definition for agent state can be found under 20 CFR 617.26(b). Record 0 if the reporting State is both the paying state for UI (liable) as well as the State providing services (agent). Leave blank if the individual is not a participant in the TAA Program	1 = Liable State 2 = Agent State 0 = Both	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
927	TAA Date of Eligibility Determination	DT 8	Record the first date upon which the individual was determined to be (or not) eligible for TAA benefits or services.	YYYYMMDD	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
929	Benefit Under Prior Certification Last 10 Years (TAA)	IN 1	Record 1 if the participant received a benefit under a prior certification in any of the previous 10 fiscal years. Record 0 if the participant did not receive any services under the condition described above. Leave blank if the individual is not a TAA participant.	1 = Yes 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
930	Pay-For-Performance	IN 1	Record 1 if the participant received training services from a WIOA Title I service provider engaged in a contract with a local board which includes pay-for-performance strategies. Record 0 if the participant did not receive services described under the condition described above.	1 = Yes 0 = No	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	

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DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																						
					Reputable Individual	Wagner-Peyser	WIDA Adults	WIDA Adult/Disadvantaged Workers	WIDA Youth	Disadvantaged Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFP)	National Farmworker Jobs Program - Housing (NFP)	Indian and Native American Program (INA)	Indian and Native American Youth Program (INA)	Adult	Senior Employment Opportunities (SEO) (AIA)	Senior Employment Opportunities (SEO) (Youth)	YouthBuild	Job for Veterans State Grant (JVS)	HB	Job Corps	Incumbent Worker (IWI) (IWI)	SCSEP	Apprenticeship	Demonstration Grants	
1814	Date Attained Graduate/Post Graduate Degree (WIDA)	DT8	Record the date a participant attained a masters' degree after receiving education or training services. Leave blank if data element does not apply to the participant. NOTE: Diplomas, degrees, licenses or certificates must be attained either during participation or within one year of exit. This data element applies to the Credential Rate for RSA programs.	YYYYMMDD		R	R	R	R	R															R		
SECTION D.04 - ADDITIONAL OUTCOME DATA																											
1900	Youth 2nd Quarter Placement (Title I) (WIDA)	IN 1	Record 1 if the participant is enrolled in occupational skills training (including advanced training). Record 2 if the participant is enrolled in postsecondary education. Record 3 if the participant is enrolled in secondary education. Record 0 if the participant was not placed in any of the above conditions.	1 = Occupational Skills Training 2 = Postsecondary Education 3 = Secondary Education 0 = No placement					R											R	R				R	R	
1901	Youth 4th Quarter Placement (Title I) (WIDA)	IN 1	Record 1 if the participant is enrolled in occupational skills training (including advanced training). Record 2 if the participant is enrolled in postsecondary education. Record 3 if the participant is enrolled in secondary education. Record 0 if the participant was not placed in any of the above conditions.	1 = Occupational Skills Training 2 = Postsecondary Education 3 = Secondary Education 0 = No placement					R												R	R				R	R
1902	Category of Assessment #1	IN 1	Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE) English Language Arts (ELA). Record 2 if the participant was assessed using approved tests for ABE Mathematics. Record 3 if the participant was assessed using approved tests for English-As-A-Second Language (ESL). Record 0 if the participant was not assessed. Leave blank if this data element does not apply to the participant.	1 = ABE ELA 2 = ABE Math 3 = ESL 0 = Not assessed							R										R	R				R	R
1903	Date of Pre-Test Score #1	DT8	Record the date that the participant took the pre-assessment test. Leave blank if the participant did not take a pre-assessment test. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	YYYYMMDD																	R	R	R			R	R
1904	Pre-Test Score #1	IN 3	Record the raw scale score achieved by the participant on the pre-assessment test. Leave blank if the participant was not assessed in literacy or numeracy or if this data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	000																	R	R	R			R	R
1905	Educational Functioning Level Pre-Test #1	IN 2	Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6																	R	R	R			R	R
1906	Date of Most Recent Post-Test Score #1	DT8	Record the date on which the post-test was administered to the participant during his/her first year of participation in the program. If multiple post-tests were administered, record the most recent date on which the functional area post-test was administered. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	YYYYMMDD																	R	R	R			R	R
1907	Post-Test Score #1	IN 3	Record the raw scale score achieved by the participant. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	000																	R	R	R			R	R
1908	Educational Functioning Level Post-Test #1	IN 2	Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6																	R	R	R			R	R
1909	Category of Assessment #2	IN 1	Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE) English Language Arts (ELA). Record 2 if the participant was assessed using approved tests for ABE Mathematics. Record 3 if the participant was assessed using approved tests for English-As-A-Second Language (ESL). Record 0 if the participant was not assessed. Leave blank if this data element does not apply to the participant.	1 = ABE ELA 2 = ABE Math 3 = ESL 0 = Not assessed																	R	R	R			R	R
1910	Date of Pre-Test Score #2	DT8	Record the date that the participant took the pre-assessment test. Leave blank if the participant did not take a pre-assessment test. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	YYYYMMDD																	R	R	R			R	R
1911	Pre-Test Score #2	IN 3	Record the raw scale score achieved by the participant on the pre-assessment test. Leave blank if the participant was not assessed in literacy or numeracy or if this data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	000																	R	R	R			R	R
1912	Educational Functioning Level Pre-Test #2	IN 2	Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6																	R	R	R			R	R
1913	Date of Most Recent Post-Test Score #2	DT8	Record the date on which the post-test was administered to the participant. If multiple post-tests were administered, record the most recent date on which the functional area post-test was administered. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	YYYYMMDD																	R	R	R			R	R
1914	Post-Test Score #2	IN 3	Record the raw scale score achieved by the participant. Leave blank if the participant did not receive a post-test during his/her first year of participation in the program or if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	000																	R	R	R			R	R
1915	Educational Functioning Level Post-Test #2	IN 2	Record the educational functioning level that is associated with the participant's raw scale score. Record 0 if the participant was not assessed in literacy or numeracy. Leave blank if the data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	0 = Not Assessed 1 = ABE Level 1 2 = ABE Level 2 3 = ABE Level 3 4 = ABE Level 4 5 = ABE Level 5 6 = ABE Level 6 7 = ESL Level 1 8 = ESL Level 2 9 = ESL Level 3 10 = ESL Level 4 11 = ESL Level 5 12 = ESL Level 6																	R	R	R			R	R
1916	Category of Assessment #3	IN 1	Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE) English Language Arts (ELA). Record 2 if the participant was assessed using approved tests for ABE Mathematics. Record 3 if the participant was assessed using approved tests for English-As-A-Second Language (ESL). Record 0 if the participant was not assessed. Leave blank if this data element does not apply to the participant.	1 = ABE ELA 2 = ABE Math 3 = ESL 0 = Not assessed																	R	R	R			R	R
1917	Date of Pre-Test Score #3	DT8	Record the date that the participant took the pre-assessment test. Leave blank if the participant did not take a pre-assessment test. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	YYYYMMDD																	R	R	R			R	R
1918	Pre-Test Score #3	IN 3	Record the raw scale score achieved by the participant on the pre-assessment test. Leave blank if the participant was not assessed in literacy or numeracy or if this data element does not apply to the participant. NOTE: This field is only necessary if the program is capturing a measurable skill gain based on an increase in Educational Functioning Level within the Educational Achievement Type of measurable skill gain.	000																	R	R	R			R	R

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIDA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																					
					Reportable Individual	Wagner Peyster	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFJP)	National Farmworker Jobs Program - Housing (NFJP)	Indian and Native American Program (INA)	Indian and Native American Program (INA) - Youth	Senior Employment Opportunities (SEO) (A&A)	Senior Employment Opportunities (SEO) (Youth)	YouthBuild	Job for Veterans State Grant (JVS)	HB	Job Corps	Incumbent Worker (IWI) State Grant	SCSEP	Apprenticeship	Demonstration Grants	
2200	For Those Who Were Placed in Employment: Job Covered by Unemployment Insurance	IN 1	Record 1 if the participant was placed into unsubsidized employment that is covered by Unemployment Insurance. Record 0 if the participant was placed into unsubsidized employment that is not covered by Unemployment Insurance. Leave blank if data element does not apply to the participant.	1 = Yes 0 = No							R														R	
2202	For Those Who Were Placed in Employment: Fringe Benefits Available/ Received	IN 1	Record 1 if the participant was placed into unsubsidized employment where the employer makes available (or will make available following the completion of a probationary period) to the participant (whether or not the participant accepts) fringe benefits, beyond those required by law (e.g., Unemployment Insurance, worker's compensation), including health insurance benefits, holiday or vacation pay, sick leave, or a pension plan (not including social security). Record 0 if the participant was placed into unsubsidized employment where the employer does not make available fringe benefits. Leave blank if data element does not apply to the participant. SPECIAL NOTE: For participants holding multiple jobs, this item should be recorded as 1 = Yes if any job provides fringe benefits.	1 = Yes 0 = No							R													R	R	
2203	For Those Who Were Placed in Employment: Hourly Wage at Placement	DE 9.2	Record the hourly wage at placement. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned. Record 00.00 if the participant was not placed into unsubsidized employment. SPECIAL NOTE: Decimal point in entry must be explicit. Leave blank if data element does not apply to the participant.	000000.00							R													R	R	
2204	For Those Who Were Placed in Employment: Hours Worked per Week	IN 2	Record the usual number of hours of work scheduled per week, including overtime. Record 0 if the participant was not placed into unsubsidized employment. Leave blank if data element does not apply to the participant.	00							R													R	R	
2205	For Those Who Were Placed in Employment: Self-Employment	IN 1	Record 1 if the participant was self-employed. Self-employment includes self-directed work in which goods or services produced by, or obtained by, the participant (or others working for him/her) are offered for sale. Record 0 if the participant was not self-employed. Leave blank if data element does not apply to the participant.	1 = Yes 0 = No																				R	R	
2206	For Those Who Were Placed in Employment: Entered Military Service	IN 1	Record 1 if the participant joined the Army, Navy, Air Force, Marines or Coast Guard, or entered into active duty from Reserve or National Guard units in cases of unplanned military buildup. Record 0 if the participant did not enter the military services. Leave blank if data element does not apply to the participant.	1 = Yes 0 = No																				R	R	
2207	For Those Who Were Placed in Employment: Entered Pre-Apprenticeship or Registered Apprenticeship Program	IN 1	Record 1 if the participant entered into a Pre-apprenticeship program. Record 2 if the participant entered into a Registered Apprenticeship program. The program must be registered with DOL Office of Apprenticeship (OA) or a federally-recognized State Apprenticeship Agency (SAA). Record 0 if the participant did not enter a Pre- or Registered Apprenticeship program. Leave blank if data element does not apply to the participant.	1 = Yes, Pre-apprenticeship 2 = Yes, Registered Apprenticeship 0 = No																				R	R	
2208	Category of Exit	IN 1	Record 1 if the participant received and/or completed any job-related career services, individualized career services, youth services, or training services. Record 2 if the participant received non staff-assisted non-job related services, without having received job-related career, individualized career services, or training services. Record 3 if the participant received significant staff-assisted assistance services. Record 4 if the participant withdrew application prior to assignment. Record 5 if the participant transferred to another project. Record 6 if the participant moved to another sub-grantee. Record 7 if the participant is dual enrollment. Record 8 if the participant did not complete the program and exited for other reasons. NOTE: Code values 4, 5, and 6 apply to SCSEP only. NOTE: For code value 2, participants are considered, a "reportable participant" and not included in performance calculations for the indicators of performance. For code value 3, participants are considered a "participant" and included in performance calculations for the indicators of performance.	1 = Employment and Training Exit 2 = Non staff-assisted related Assistance Services - ONLY Exit 3 = Significant staff-assisted related assistance services Exit 4 = Withdrew application prior to assignment 5 = Transferred to another project 6 = Moved to another sub-grantee 7 = Dual enrollment 8 = Other Reasons for Exit							R	R												R	R	
2209	Related assistance: Transportation	IN 1	Record 1 if the participant received transportation (public or private) assistance or cash paid to participants or members of their families for the purpose of transportation. Record 0 if the participant did not receive any transportation assistance.	1 = Yes 0 = No								R													R	
2210	Related assistance: Health Care	IN 1	Record 1 if the participant received health care services that includes, but is not limited to, preventive and clinical medical treatment, voluntary family planning, and necessary psychiatric, psychological and prosthetic services. Record 0 if the participant did not receive any health care assistance.	1 = Yes 0 = No								R													R	
2211	Family Care (including child care)	IN 1	Record 1 if the participant received related assistance services which help participants meet their family care needs during program participation. Family care ranges from adult to child care inside or outside the home to after-school programs (inside or outside the home). It usually includes supervision and shelter. Record 0 if the participant did not receive any family care assistance.	1 = Yes 0 = No								R													R	
2212	Housing Services	IN 1	Record 1 if the participant received temporary housing services as described in 20 CFR 685.360. Record 2 if the participant received permanent housing services as described in 20 CFR 685.360. Record 3 if the participant received both temporary housing services as described in 20 CFR 685.360 and permanent housing services as described in 20 CFR 685.360. Record 0 if the participant did not receive any housing services.	1 = Temporary Housing Services 2 = Permanent Housing Services 3 = Both Temporary and Permanent Housing Services 0 = No housing services								R	R												R	
2213	Related assistance: Nutritional Assistance	IN 1	Record 1 if the participant received related assistance services that includes the provision of food and other nutritional assistance (other than counseling) to eligible program participants and their dependents. Record 0 if the participant did not receive any nutritional assistance.	1 = Yes 0 = No								R														R
2214	Related assistance: Translation and Interpretation Services	IN 1	Record 1 if the participant received related assistance services which involves a bi-lingual agent who hears or reads the language of one party and speaks or writes another language for another party. One of the two parties will be a program participant. Record 0 if the participant did not receive any translation and interpretation services.	1 = Yes 0 = No								R														R
2215	Related assistance: Staff Assisted	IN 1	Record 1 if the participant received related assistance services with significant staff involvement. Record 0 if the participant did not receive any other related assistance services with significant staff involvement.	1 = Yes 0 = No								R														R
2216	Received Worker Safety Training	IN 1	Record 1 if the participant received any training that consists of instruction in any of the following: safe and proper ways to operate or maintain machinery, safe handling and use of toxic chemicals, proper use of protective clothing and devices, first aid, or other topics related to worker safety on the job site. Record 0 if the participant did not receive worker safety training.	1 = Yes 0 = No								R														R
2217	Work Experience funded by 167 grant	IN 4	Record the actual total hours the individual received work experience under the section 167 grant. Work experience includes short-term or part-time work activity that provides an individual with the opportunity to acquire appropriate work habits and behaviors.	0000								R														R
2218	On-the-job Training (OJT) funded by 167 grant	IN 4	Record the actual total hours the participant received On-the-job Training (OJT) under the section 167 grant. OJT includes training by an employer that is provided to a paid participant while engaged in productive work in a job that: (a) provides knowledge or skills essential to the full and adequate performance of the job; (b) provides reimbursement to the employer of up to 50 percent of the wage rate of the participant, for the extraordinary costs of providing the training and additional supervision related to the training; and (c) is limited in duration appropriate to the occupation for which the participant is being trained. Taking into account the content of the training, the prior work experience of the participant, and the service strategy of the participant as appropriate.	0000								R														R
2219	Integrated Basic/Occupational Skills Training funded by 167 grant	IN 4	Record the actual total hours the participant received integrated basic/occupational skills training under the section 167 grant. Integrated basic/occupational skills training combines elements of both Basic Skills Training and Occupational Skills Training (Non-OJT) as described immediately above.	0000								R														R
2220	Occupational Skills Training (Non-OJT) funded by 167 grant	IN 4	Record the actual total hours the participant received occupational skills training (excluding On-the-job training) under the section 167 grant. Occupational skills training includes vocational education and classroom training, designed to provide participants with the technical skills and information required to perform a specific job or group of jobs.	0000								R														R
2221	Basic Skills Training funded by 167 grant	IN 4	Record the actual total hours the participant received basic skills training under the section 167 grant. Basic skills training includes, but is not limited to, remedial reading, writing, communication, mathematics and/or English for non-English speakers.	0000								R														R
2222	Lacks Transportation	IN 1	Record 1 if the participant is a person who lacks access to adequate/reasonable transportation services, resulting in a barrier to receiving training or accepting employment. Record 0 if the participant does not meet the conditions described above.	1 = Yes 0 = No								R														R
2225	6 month pre-program earnings during the 6-months prior to date of application	DE 8.2	Record pre-program earnings during the 6-months prior to date of application. Earnings include salaries or wages, and also include any bonuses, tips, gratuities, commissions or overtime pay.	000000.00																						R
2226	Total pre-program earnings during 12-month eligibility determination period	DE 8.2	Record pre-program earnings during 12-month eligibility determination period. Earnings include salaries or wages, and also include any bonuses, tips, gratuities, commissions or overtime pay.	000000.00																						R
2227	Number of dependents in the family under age 18	IN 2	Record the number of dependents in the family under age 18.	00								R														R
2231	Date of Eligibility Determination	DT 8	Record the date upon which the participant was determined eligible to participate in the Section 167 program.	YYMMDD								R	R											R	R	

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																				
					Reportable Individual	Warner Payer	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFJP)	National Farmworker Jobs Program - Housing (NFJP)	Indian and Native American Program (INA) - Adult	Indian and Native American Program (INA) - Youth	Reentry Employment Opportunities (REG) (Adult)	Reentry Employment Opportunities (REG) (Youth)	YouthBuild	Job for Veterans State Grant (JVS)	HE	Job Corps	Incumbent Worker (IWI) (CST)	SCIP	Apprenticeship	Demonstration Grants
2232	Family status for NFJP Housing Services (WIOA Sec. 167)	IN 1	Record 1 if the individual is an eligible MSFW and the individual does not reside with a Family and receives NFJP funded permanent or temporary housing services. Record 2 if the individual is an eligible MSFW and the individual resides with a Family and receives NFJP funded permanent housing services or temporary housing services. Record 3 if the individual is not an eligible MSFW and the individual does not reside with a Family and receives NFJP funded permanent housing services. Record 4 if the individual is not an eligible MSFW and the individual resides with a Family and receives NFJP funded permanent housing services. Record 0 if the individual receives housing services through an NFJP career services and training grant. Note: While NFJP-funded permanent housing must be promoted and made widely available to an eligible MSFW family, occupancy is not restricted to eligible MSFW individuals or eligible MSFW Families. Migrant and Seasonal Farmworkers (MSFW) is described at WIOA Section 167. Family is defined at 20 CFR 685.110. Note: The indicators of performance for grantees providing NFJP housing services are described at 20 CFR 685.400	1 = MSFW (Individual) 2 = MSFW (Family) 3 = Other (individual) 4 = Other (Family) 0 = Housing through NFJP CST grant	R	R																	R		
2233	NFJP Grant Enrollment	IN 1	Record 1 if the participant was enrolled through a NFJP Employment and Training grant. Record 2 if the participant was enrolled through an NFJP Housing grant.	1 = NFJP Employment and Training Grant enrollee 2 = NFJP Housing Grant enrollee	R	R																	R		
SECTION E.04 - INDIAN AND NATIVE AMERICAN PROGRAM (INA)																									
2302	Tribal Affiliation	IN 6	Record the participant's tribal affiliation. Leave blank if the tribal affiliation code is unknown.	000000																				R	
2303	Public Assistance Recipient	IN 9	Record 1 if the participant receives general assistance (GA) from their state or local government. Record 2 if the participant receives Temporary Assistance to Needy Families (TANF). Record 3 if the participant receives Supplemental Security Income (SSI/SSA Title XVI). Record 4 if the participant receives Social Security Disability Insurance (SSDI). Record 5 if the participant receives Food Stamps (Food Stamp Act of 1977). Record 6 if the participant receives Foster Child Payments. Record 7 if the participant receives benefits from Tribal Work Experience Programs (TWE). Record 8 if the participant receives benefits from the USDA Commodity Program. Record 9 if the participant does not meet the conditions described above. Record 0 if that apply if the participant is receiving more than one type of public assistance.	1 = General Assistance (GA) 2 = TANF 3 = SSI/SSA Title XVI 4 = SSDI 5 = SNAP 6 = Foster Child Payments 7 = TWE 8 = USDA Commodity Program 0 = No																				R	
SECTION E.05 - REENTRY EMPLOYMENT OPPORTUNITIES (ADULT)																									
2400	In Work Release Program	IN 1	Record 1 if the participant was in a work-release program at the time enrollment. Record 0 if the participant does not meet the condition described above.	1 = Yes 0 = No																					R
2401	Employment Status at Incarceration	IN 1	Record 1 if the participant was working in unsubsidized employment upon incarceration (not including Registered Apprenticeship or the military). Record 2 if the participant was in a Registered Apprenticeship upon incarceration. Record 3 if the participant was in the military upon incarceration. Record 9 if employment participant prior to incarceration is unknown. Record 0 if the participant was not employed upon incarceration.	1 = Unsubsidized Employment 2 = Registered Apprenticeship 3 = Military 9 = Unknown 0 = Not employed																					R
2404	Alcohol/Drug Abuse at Enrollment	IN 1	Record 1 if the participant abused alcohol and/or drugs at the time of enrollment. Record 0 if the participant did not meet either of the conditions described above at the time of enrollment. Record 9 if the alcohol/drug abuse status is unknown at the time of enrollment.	1 = Yes 0 = No 9 = Unknown																					R
2412	Criminal Justice System Identifier	AN 1	Record the appropriate criminal justice system identifier as indicated in code values 1 through 6	1 = Federal ID 2 = State CJ Record ID 3 = State Prison ID 4 = Local Probation Agency ID 5 = Local Jail ID 6 = Other																					R
2413	Incarcerated at Program Entry (WIOA)	IN 1	Record 1 if the participant, at program entry, was a criminal offender in a correctional institution at program entry. Record 0 if this data element does not apply to the participant.	1 = Yes 0 = No				R																	R
2414	Date Released from Incarceration (WIOA)	DT 8	Record the date the participant was released from a correctional institution. Leave blank if participant remains in a correctional institution at program exit.	YYYYMMDD				R																	R
2415	Date of Anticipated Release From Incarceration	DT 8	Record the date that the participant is anticipated to be released from a correctional institution. Leave blank if this data element does not apply to the participant.	YYYYMMDD																					R
2416	Post-Release Status	IN 1	Record 1 if the participant's post-release status is parole. Record 2 if the participant's post-release status is probation. Record 3 if the participant's post-release status is out on bail. Record 4 if the participant's post-release status is without conditions. Leave blank if this data element does not apply to the participant. [I.e., if the person has yet to be released from incarceration, per 2415]	1 = Parole 2 = Probation 3 = Bail 4 = Without Conditions																					R
2417	Most Recent Type of Offense	IN 1	Record 1 if the participant was convicted of a property crime. Record 2 if the participant was convicted of a drug crime. Record 3 if the participant was convicted of a public order crime. Record 4 if the participant was convicted of another type of crime.	1 = Property Crime 2 = Drug Crimes 3 = Public Order Crime 4 = Other Offenses																					R
2422	Housing Status at Six Months After Program Entry	IN 1	Record the appropriate housing status for the participant at six months after program entry as indicated in code values 0 through 9. Leave blank if the participant did not specify due to exit or re-arrest.	1 = Own/rent apartment, room or house 2 = Staying at someone's apartment, room or house (stable) 3 = Transitional house 4 = Residential Treatment 5 = Homeless 6 = Staying at someone's apartment, room or house (unstable) 7 = Monitored home confinement 8 = Halfway house / residential re-entry center 9 = Family 0 = Jail/Prison																					R
2423	Housing Status at Enrollment	IN 1	Record the appropriate housing status for the participant at enrollment as indicated in code values 0 through 9	1 = Own/rent apartment, room or house 2 = Staying at someone's apartment, room or house (stable) 3 = Transitional house 4 = Residential Treatment 5 = Homeless 6 = Staying at someone's apartment, room or house (unstable) 7 = Monitored home confinement 8 = Halfway house / residential re-entry center 9 = Family 0 = Jail/Prison																					R
2424	Alcohol/Drug Abuse Six Months After Enrollment	IN 1	Record 1 if the participant abused alcohol and/or drugs at six months after enrollment. Record 0 if the above conditions do not apply to the participant.	1 = Yes 0 = No																					R
2433	Re-arrested within 12 months of Release for a New Crime	IN 1	Record 1 if the participant was re-arrested within 12 months of release for a new crime. Record 0 if the participant does not meet the condition described above.	1 = Yes 0 = No																					R
2434	Re-arrested for a previous crime	IN 1	Record 1 if the participant was re-arrested for a previous crime. Record 0 if the above condition does not apply to the participant. Record 9 if this information is not available.	1 = Yes 0 = No 9 = Unknown																					R
2435	Re-incarcerated for a revocation of the parole or probation order for violations of terms of sentence	IN 1	Record 1 if the participant was re-incarcerated for revocation of parole. Record 2 if the participant was re-incarcerated for revocation of probation order for violations of terms of sentence. Record 3 if the participant was re-incarcerated for other violations of the terms and conditions of their sentence. Record 0 if the above conditions do not apply to the participant.	1 = Revocation of Parole 2 = Revocation of Probation 3 = Other Violations 0 = No																					R
2436	Not Re-arrested	IN 1	Record 1 if the participant was not re-arrested. Record 0 if the above condition does not apply to the participant.	1 = Yes 0 = No																					R
2437	Date arrested for new/previous crime	DT 8	Record the date that the participant was arrested for a new or previous crime. Leave blank if the above condition does not apply to the participant.	YYYYMMDD																					R
2438	Convicted for new/previous crime	IN 1	Record 1 if the participant was convicted of a new crime. Record 2 if the participant was convicted of a previous crime. Record 0 if the above condition does not apply to the participant. Record 9 if this information is not available.	1 = Yes 0 = No																					R
2439	Date re-incarcerated	DT 8	Record the date which the participant became re-incarcerated. Leave blank if the above condition does not apply to the participant.	YYYYMMDD																					R
2440	Date charges dropped	DT 8	Record the date which charges against the participant were dropped. Leave blank if the above condition does not apply to the participant.	YYYYMMDD																					R
SECTION E.06 - REENTRY EMPLOYMENT OPPORTUNITIES (YOUTH)																									
2500	Secondary school enrollment status at arrest	IN 1	Record 1 if the participant was a secondary school student at the time of their arrest. Record 2 if the participant was a secondary school graduate at the time of their arrest. Record 3 if the participant was a secondary school dropout at the time of their arrest. Record 0 if the participant does not meet the conditions described above.	1 = Secondary school student 2 = Secondary school graduate 3 = Secondary school dropout 0 = No																					R
2502	Youth Offender status at enrollment	IN 1	Record 1 if the participant is currently in, returning from, or has been in a juvenile correctional facility. Record 2 if the participant is currently in, returning from, or has been in a juvenile detention facility. Record 3 if the participant is currently in, leaving, or has been on juvenile probation. Record 4 if the participant is currently in, leaving, or has been on juvenile alternative sentencing or diversion. Record 5 if the participant is currently in, returning from, or has been in an adult prison. Record 6 if the participant is currently in, leaving, or has been on adult probation. Record 7 if the participant is currently in, leaving, or has been in adult sentence or diversion. Record 8 if the at-risk participant is not an offender.	1 = Juvenile Correctional Facility 2 = Juvenile detention facility 3 = Juvenile probation 4 = Juvenile alternative sentencing or diversion 5 = Adult prison 6 = Adult jail 7 = Adult probation 8 = Adult sentence or diversion 0 = At-risk individual who is not an offender																					R
2503	Date released from correctional facility or placed on probation	DT 8	Record the date on which the participant was released from a correctional facility, detention or was placed on probation. Leave blank if this data element does not apply to the participant.	YYYYMMDD																					R
2505	Date verified Selective Service registration	DT 8	Enter date verified Selective Service Registration Leave blank for participants who are not required to sign up for selective service.	YYYYMMDD																					R
2506	Voter registration	IN 1	Record 1 if the participant is a registered voter at program entry. Record 2 if the participant became a registered voter during program participation. Record 0 if the participant is not a registered voter.	1 = Yes, at program entry 2 = Yes, during participation 0 = No																					R

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																					
					Reportable Individual†	Wagner-Prosper	WIDA Adults	WIDA Dislocated Workers	WIDA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFJP)	National Farmworker Jobs Program - Housing (NFJP)	Indian and Native American Program (INAA)	Indian and Native American Youth Program (INAY)	Reentry Employment Opportunities (REO) (ADAF)	Reentry Employment Opportunities (REO) (Youth)	Verified	Job for Veterans State Grant (JFVSG)	HE	JOB Corps	Incumbent Worker (IWI) State Grant	SCSEP	Apprenticeship	Demonstration Grants	
2816	Severely Limited Employment Prospects in Area of Persistent Unemployment	IN 1	Record 1 if applicant is a severely limited employment prospect in area of persistent unemployment. This element has two separate requirements: 1. Severely limited employment prospect, and 2. Residence in an area of persistent unemployment. Both must be met for a "yes" answer. Severely limited employment prospect means a substantially higher likelihood that an individual will not obtain employment without the assistance of the SCSEP or another workforce development program. Persons with severely limited employment prospects have more than one significant barrier to employment; significant barriers to employment may include but are not limited to: lacking a substantial employment history, basic skills, and/or English language proficiency, lacking a high school diploma or the equivalent, having a disability, being homeless, or residing in socially and economically isolated rural or urban areas where employment opportunities are limited. Persistent unemployment means that the annual average unemployment rate for a county or city is more than 20 percent higher than the national average for two out of the last three years. Record 0 if the applicant does not meet both conditions.	1 = Yes 0 = No																					R	R
2817	Date of Last Update (Severely Limited Employment Prospects in Area of Persistent Unemployment)	DT 8	Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant.	YYYYMMDD																				R	R	
2818	Limited English Proficiency	IN 1	Record 1 if the participant cannot speak or read English well enough to fully participate in all aspects of the program. Record 0 if the participant is able to participate in all aspects of the program. There is no substantive change in the definition. An LEP individual is one who does not speak English as his or her primary language and who has a limited ability to read, speak, write, or understand English. If you are in doubt, ask the participant.	1 = Yes 0 = No																				R	R	
2819	Date of Last Update (Limited English Proficiency)	DT 8	Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant.	YYYYMMDD																				R	R	
2820	Low Literacy Skills	IN 1	Record 1 if the participant calculates or solves problems, reads, writes, or speaks English at or below the 8th grade level or is unable to compute or solve problems, read, write, or speak at a level necessary to function on the job, in the individual's family, or in society. Record 0 if the participant does not meet above conditions.	1 = Yes 0 = No																				R	R	
2821	Date of Last Update (Low Literacy Skills)	DT 8	Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant.	YYYYMMDD																				R	R	
2822	Type of Placement	IN 1	Record 1 if participant is working full-time at placement. Record 2 if participant is working part-time at placement.	1 = Full-time 2 = Part-time											R	R							R	R		
2826	Approved Break Start	DT 8	Record the start date of any approved break in participation, such as a leave of absence without pay.	YYYYMMDD																				R	R	
2827	Approved Break End Date	DT 8	Record the end date of any approved break in participation.	YYYYMMDD																				R	R	
2828	Reason for Approved Break in Participation	IN 1	Record the reason for the leave of absence or other approved break in participation.	1 = Family/health 2 = Personal 3 = Administrative 4 = Other																				R	R	
2829	Participant Community Service Assignment	IN 1	Record where participant is assigned to for his or her community service assignment.	1 = Grantee or sub-recipient/ local project 2 = Workforce Partner 3 = Other host agency										R	R									R	R	
2830	Supportive Service Provider	IN 1	Record 1 if participant received supportive services from the grantee or sub-recipient/local project. Record 2 if participant received supportive services from the workforce partner. Record 3 if participant received supportive services from both the grantee or sub-recipient/local project and the workforce partner. Record 4 if participant received supportive services from other sources.	1 = Grantee or sub-recipient/local project 2 = Workforce partner 3 = Both 1 and 2 4 = Other																				R	R	
2831	Wage per Hour (Community Service Assignment)	DE 8.2	Record the current wage at the community service assignment.	000000.00																				R	R	
2832	Total Hours Paid at Community Service Assignment in 1st Quarter	IN 3	Record the total number of community service assignment hours for which the participant was paid wages in the 1st quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2833	Total Hours Paid at Community Service Assignment in 2nd Quarter	IN 3	Record the total number of community service assignment hours for which the participant was paid wages in the 2nd quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2834	Total Hours Paid at Community Service Assignment in 3rd Quarter	IN 3	Record the total number of community service assignment hours for which the participant was paid wages in the 3rd quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2835	Total Hours Paid at Community Service Assignment in 4th Quarter	IN 3	Record the total number of community service assignment hours for which the participant was paid wages in the 4th quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2836	Total Hours of Paid Training in 1st Quarter	IN 3	Record the total number of hours of paid training for which the participant was paid wages in the 1st quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2837	Total Hours of Paid Training in 2nd Quarter	IN 3	Record the total number of hours of paid training for which the participant was paid wages in the 2nd quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2838	Total Hours of Paid Training in 3rd Quarter	IN 3	Record the total number of hours of paid training for which the participant was paid wages in the 3rd quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2839	Total Hours of Paid Training in 4th Quarter	IN 3	Record the total number of hours of paid training for which the participant was paid wages in the 4th quarter of the program year as determined from the sub-grantee's wage records.	000																				R	R	
2840	Other Reasons for Exit (SCSEP-Only)	IN 1	Record the reason that applies at the time of exit.	1 = Moved from area 2 = For cause 3 = Voluntary 4 = Non-income eligible 5 = Duration limit 6 = Deceased 7 = Health/medical 8 = Family care 9 = Institutionalized																				R	R	
2841	Exclusion After Exit	IN 1	Record 1 if it was discovered that the participant was deceased after exit. Record 2 if it was discovered that the participant had medical condition after exit. Record 3 if it was discovered that the participant was caring for a family after exit. Record 4 if it was discovered that the participant was institutionalized after exit.	1 = Deceased 2 = Medical Condition 3 = Family Care 4 = Institutionalized																				R	R	
2843	Host Agency Employer	IN 1	Record 1 if the employer is a host agency. Unsubsidized employers that have served as a host agency for any participant (under any state or national grant) in the last 12 months will not be included in the customer service survey of employers. Record 0 if employer is not a host agency.	1 = Yes 0 = No																				R	R	
2845	Placement Start Date	DT 8	Record the date on which the participant began work with this employer. This will be the date of placement for measurement purposes.	YYYYMMDD										R	R									R	R	
2846	Placement End Date	DT 8	Record the date on which the unsubsidized employment with this employer ended. If there is additional unsubsidized employment within four quarters after the quarter of exit from SCSEP, all unsubsidized employment may be included in the performance measures.	YYYYMMDD																				R	R	
SECTION E.10 - REGISTERED APPRENTICESHIP																										
2900	RAPIDS Number	AN 12	Record the RAPIDS number for the participant who is a registered apprentice (Registered Apprenticeship Partners Information Data System). Leave blank if this data element does not apply. NOTE: There are no RAPIDS numbers for pre-apprentices. NOTE: Reportable individuals who benefit from registered apprenticeship programs are also assigned a RAPIDS Number. Grantees should report this here, if available.	XXXXXXXXXXXX																				R	R	
2901	Pre-Apprenticeship Program Status	IN 1	Record 1 for participants enrolled in a pre-apprenticeship program. Record 2 for participants who cancelled or withdrew from their pre-apprenticeship program. Record 3 for participants who completed their pre-apprenticeship program and did not continue into an apprenticeship program. Record 4 for participants who completed their pre-apprenticeship and continued into a registered apprenticeship program during program participation (RAP). Leave blank if this data element does not apply. Note: Status can change over time.	1 = Enrolled 2 = Cancelled or Withdrew 3 = Completed 4 = Completed and Continued into RAP																				R	R	
2902	Date Enrolled in Pre-Apprenticeship	DT 8	Record the date the participant started the pre-apprenticeship program. Leave blank if this data element does not apply.	YYYYMMDD																				R	R	
2903	Expected Completion Date: Pre-Apprenticeship	DT 8	Record the expected completion date of the pre-apprenticeship program, which should be prior to program exit. Leave blank if this data element does not apply.	YYYYMMDD																				R	R	
2904	In Pre-Apprenticeship Program with an Articulated Agreement	IN 1	Record 1 if the participant is in a pre-apprenticeship program where a Memorandum of Understanding (MOU), Memorandum of Agreement (MOA) or other formal agreement exists between the pre-apprenticeship program and the Registered Apprenticeship Program or Industry-Recognized Apprenticeship Program. Record 0 if no formal agreement exists between the pre-apprenticeship program and an apprenticeship program. Leave blank if this data element does not apply.	1 = Yes 0 = No																				R	R	
2905	Date Completed Pre-Apprenticeship	DT 8	Record the date the participant completed the pre-apprenticeship program. Leave blank if this data element does not apply.	YYYYMMDD																				R	R	
2906	Date Changed Status from Pre-Apprentice to Registered Apprentice	DT 8	Record the date the participant's status changed from pre-apprentice to registered apprentice. Leave blank if this data element does not apply. Note: This may be the same date (or shortly thereafter) as pre-apprenticeship program completion.	YYYYMMDD																				R	R	

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIDA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/ FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																									
					Reportable Individual	Warmer Prayer	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Farmworker Jobs Program - CST (NFJP)	National Farmworker Jobs Program - Housing (NFJP)	Indian and Native American Program (INAA)	Indian and Native American Program (INA)	Research Employment Opportunities (REO) (AAJG)	Research Employment Opportunities (REO) (AAJG)	YouthBuild	Job for Veterans State Grants (JVSG)	HR	Job Corps	Incumbent Worker (IWI) (JAVG)	SCBP	Apprenticeship	Demonstration Grants					
2907	Registered Apprenticeship Program Status	IN 1	Record 1 for participants enrolled in a registered apprenticeship program. Record 2 for participants who cancelled or withdrew from their Registered apprenticeship program. Record 3 for participants who completed their Registered apprenticeship program. Leave blank if this data element does not apply. Note: Status can change over time.	1 = Enrolled 2 = Cancelled or Withdrew 3 = Completed																						R	R			
2908	Date Started Registered Apprenticeship Program	DT 8	Record the date the participant started the Registered apprenticeship program. Leave blank if this data element does not apply.	YYYYMMDD																						R	R	R		
2909	Expected Completion Date Registered Apprenticeship Program	DT 8	Record the expected completion date of the Registered apprenticeship program, whether or not the participant is expected to complete the program during their participation. Leave blank if this data element does not apply.	YYYYMMDD																							R	R		
2910	Type of Registered Apprenticeship Program	IN 1	Record 1 if the Registered apprenticeship program is a Time-Based program. Record 2 if the Registered apprenticeship program is a Competency-Based program. Record 3 if the Registered apprenticeship program is a Hybrid program. Leave blank if this data element does not apply.	1 = Time-Based 2 = Competency-Based 3 = Hybrid																							R	R		
2911	Date Completed Registered Apprenticeship	DT 8	Record the date the participant completed the Registered apprenticeship program. Leave blank if this data element does not apply.	YYYYMMDD																						R	R	R		
2912	Type of RI Provider	IN 1	Record 1 if the provider of Related Instruction (RI) is a Joint Apprenticeship Training Committee. Record 2 if the provider of RI is a Community College. Record 3 if the provider of RI is a Vocational or Technical School. Record 4 if the provider of RI is a 4-year educational institution. Record 5 if the provider of RI is an entity other than those previously noted. Leave blank if this data element does not apply.	1 = JATC 2 = Community College 3 = Voc/Tech School 4 = 4-year educational institution 5 = Other																							R	R	R	
2913	Type of Supportive Services Received	IN 3	Record up to 3 types of supportive services by the participant is Transportation. Record 1 if the supportive service is Tools and/or Equipment. Record 2 if the supportive service is Uniforms. Record 3 if the supportive service is Child Care. Record 4 if the supportive service is something other than that previously listed. Leave blank if this data element does not apply.	1 = Transportation 2 = Tools/Equipment 3 = Uniforms 4 = Child Care 5 = Other																								R	R	
2914	Registered Apprenticeship Grants Program Status	IN 1	Record 1 if the participant is an individual who received a direct grant funded participant service. Examples include, but are not limited to OIL and/or RTI paid for through the grant, or other grant funded participant services provided. Record 2 if the individual has been impacted by the development or expansion of grant-funded registered apprenticeship program enrolled in a registered apprenticeship program AND is enrolled in a RAP and is at least 16 years old. Record 3 if the individual is an incumbent registered apprentice—defined as a registered apprentice who was previously enrolled in a grant-funded or traditional registered apprenticeship program and is no longer supported by the sponsor. The incumbent registered apprentice date of enrollment must be prior to the new grant's period of performance showing employment with a previous employer. This incumbent apprentice is enrolled in a new RAP in order to support sustainability efforts.	1 = Yes, Participant 2 = Reportable Individual applies to state grantees only 3 = Incumbent Registered Apprentice																								R	R	
2917	Exit Wage	DE 5.2	Record the hourly wage received on the Date of Exit. Leave blank if this data element does not apply.	0000.00																								R	R	
2918	Wage at Entry into Registered Apprenticeship	DE 5.2	Record the hourly wage received on the date of entry into the Registered apprenticeship program. Leave blank if this data element does not apply.	0000.00																								R	R	
2920	Registered Apprenticeship Grant Number	AN 14	Record the 13- or 14-character registered apprenticeship grant number. There are two grant FAIN number formats based on when the grant was awarded: Older grant FAIN number formats start with two letters, are 14 characters, and should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-Five numeric characters-Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). Newer apprenticeship grant numbers start with two numbers, are 13 characters, and should be entered in the following format without dashes: Two numeric characters representing the fiscal year when the grant was awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the type of grant awarded-Two alphabetic characters representing the grant program code-Six numeric characters (12-A-55AA-123456). If the grant number is unknown, please enter all 9s (999999999999999). Leave blank if the participant did not receive services funded by this program.	XXXXXXXXXXXXXXXX																									R	R
SECTION E.11 ADDITIONAL MISC. ELEMENTS (ADDED 2021)																														
3000	Direct Referral from Justice System	IN 1	Record 1 if participant is a direct referral from the Justice System. Record 0 if participant is not a direct referral from the Justice System.	1 = Yes 0 = No																									R	
3001	Most Recent Date Participating in Community Service/Restorative Justice	DT 8	Record the most recent date on which the enrollee participated in Community Service/Restorative Justice Leave blank if enrollee did not participate in Community Service/Restorative Justice	YYYYMMDD																									R	
3002	Received Legal Services	IN 5	Record 1 if participant received legal services regarding outstanding warrants. Record 2 if participant received legal services regarding child support. Record 3 if participant received legal services to obtain a restraining order. Record 4 if participant received legal services seeking to seal or expunge records. Record 5 if participant received other legal services. Leave blank if participant did not receive legal services	1 = Outstanding warrants 2 = Child support 3 = Obtain restraining order 4 = Seal or expunge records 5 = Other legal services																									R	
3003	Received Housing Assistance, Substance Abuse Treatment or Mental Health Treatment	IN 5	Record 1 if participant received housing assistance (non-emergency) Record 2 if participant received substance abuse treatment (non-emergency) Record 3 if participant received mental health treatment (non-emergency) Record 4 if participant received emergency housing assistance Record 5 if participant received emergency substance abuse treatment Record 6 if participant received emergency mental health treatment	1 = Housing assistance 2 = Substance abuse treatment 3 = Mental health treatment 4 = Emergency housing assistance 5 = Emergency substance abuse treatment 6 = Emergency mental health treatment																									R	
3004	Individualized Services Provided Virtual/Online	IN 1	Record the method in which the individualized services other than training were delivered to the participant at an on-site program: Record 1 if the participant received individualized services other than training that were delivered only through virtual/online methods. Record 2 if the participant received individualized services other than training that were delivered through in-person and virtual/online methods. Record 0 if the participant received individualized services other than training that were delivered only through in-person methods. Leave blank if the participant did not receive any individualized services other than training at any point during program participation.	1 = Virtual/Online 2 = Mix of in-person and Virtual/Online 0 = No Virtual/Online, In-person Only			R	R	R	R	R	R																R		
3005	Transitioning Service Member Warm Handover	IN 1	Record 1 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) was referred or offered additional services through the Department of Labor by his/her military branch. Record 2 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) received information about DOL services during their transition but was NOT sent to the AIC by his/her military officer. Record 3 if the service member was not made aware of DOL services from his/her Commander. Record 0 if the participant is not a transitioning service member.	1 = Yes, received information and was sent to the AIC by military officer 2 = Yes, received information but visited AIC on their own accord 3 = No, information was not provided 0 = Not TSM							R																		R	
3006	Transitioning Service Member Housing Plan	IN 1	Record 1 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) was assessed by the military as having an adequate post-transition housing plan. Record 2 if the transitioning service member (defined as a person who has not yet separated from the U.S. military or has separated in the past 180 days) was assessed by the military as not having an adequate post-transition plan. Record 0 if the participant is not a transitioning service member.	1 = Yes, adequate housing plan 2 = No, housing plan is not adequate or non-existent 0 = Not TSM							R																		R	
3007	Referred from Department of Veterans Affairs (VA) Services	IN 1	This data element reflects the agency where the participant was referred from. Record 1 if the participant was referred to the AIC from the Department of Veterans Affairs Vocational Rehabilitation and Employment Service for Labor Market Information to be used in development of the individual Written Rehabilitation Plan (WRP). Note: this alone will not begin a participation period. Record 2 if the participant was referred from the Department of Veterans Affairs Vocational Rehabilitation and Employment Service for employment services. Record 3 if the participant was referred from the Department of Veterans Affairs Regional Office for employment services. Record 4 if the participant was referred from the Department of Veterans Affairs Medical Center for employment services. Record 5 if the participant entered into a Registered Apprenticeship program and a Department of Veterans Affairs Vocational Rehabilitation participant or if the participant was a registered apprentice at the time of program entry and Department of Veterans Affairs Vocational Rehabilitation participant. Record 6 if the participant indicates they were referred by the Department of Veterans Affairs, but does not specify which of the above programs referred them.	1 = Referred from the VA VRGE for LMI to be used in development of the WRP 2 = Referred from the VA VRGE for employment services 3 = Referred from the VA Regional Office for employment services 4 = Referred from the VA Medical Center for employment services 5 = Department of Veterans Affairs Vocational Rehabilitation Funded 9 = Referred by VA, Entity Unknown							R																		R	
3008	Family Unit Size	IN 2	Record the number of individuals (including the participant) that live with the individual and are a part of the individual's family, as defined by 20 CFR 685.110.	xx																									R	
3009	Formerly Incarcerated	IN 1	Record 1 if the participant is an eligible individual who has been incarcerated or been under supervision following release from prison or jail within the last five years. Record 0 if the participant does not meet above conditions.	1 = Yes 0 = No																									R	
3010	Date of Last Update (Formerly Incarcerated)	DT 8	Record the date of updating the factor to receive credit in the most-in-need measure or to use the factor to support a waiver request for the participant.	YYYYMMDD																									R	
3011	Gender Identity	IN 1	Record 1 if the participant indicates that they identify their gender as a man. Record 2 if the participant indicates that they identify their gender as a woman. Record 3 if the participant indicates that their gender identity is not exclusively man or woman, such as individuals who identify as non-binary, genderqueer, gender-nonconforming, or agender. Record 4 if the participant indicates that their gender identity is another gender identity, such as individuals who identify as Two-Spirit. Record 9 if the participant did not self-identify their gender.	1 = Man 2 = Woman 3 = X 4 = Another gender identity 9 = Participant did not self-identify	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	

* Rows highlighted in blue represent data elements specific to the Departments of Education and Labor Joint WIOA Participant Individual Record Layout.

DATA ELEMENT NO.	DATA ELEMENT NAME	DATA TYPE/FIELD LENGTH	DATA ELEMENT DEFINITIONS/INSTRUCTIONS	CODE VALUE	REQUIREMENTS BY PROGRAM OF PARTICIPATION*																						
					Reportable Individual	Warmer Payer	WIOA Adults	WIOA Dislocated Workers	WIOA Youth	Dislocated Worker Grants (DWG)	TAA	National Employer Jobs Program - CST (NEJP)	National Employer Jobs Program - Housing (NEJP)	Adult and Native American Program (NA)	Indian and Native American Program (INA)	Youth	Bechtel Employment Opportunities (BEEO) (A&J)	Bechtel Employment Opportunities (BEEO) (Youth)	YouthBuild	Job for Veterans State Grant (JVSG)	HB	Job Corps	Incumbent Worker Paid SVA Funding	SCSEP	Apprenticeship	Demonstration Grants	
3012	Sexual Orientation	IN 1	Record 1 if the participant indicates that they identify as straight/heterosexual. Record 2 if the participant indicates that they identify as gay, lesbian, or homosexual. Record 3 if the participant indicates that they identify as bisexual. Record 4 if the participant indicates that they identify as another sexual orientation/identity than those described above. Record 9 if the participant did not self-identify their sexual orientation/identity.	1 = Straight/Heterosexual 2 = Gay, Lesbian, or Homosexual 3 = Bisexual 4 = Another sexual orientation 9 = Participant did not self-identify	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R			
3013	Armed Forces Service Medal Veteran	IN 1	Record 1 if the participant is a veteran who, while serving on active duty in the Armed Forces, participated in a United States military operation for which an Armed Forces Service Medal (AFSM) was awarded on or after June 2, 1992, refer to DOD 1348.33 and/or the Armed Forces Service Medal (AFSM) - Approved Operations list for specific individual eligibility requirements and announced operations. Record 0 if the participant does not meet the condition described above. Record 9 if the campaign veteran status is unknown. Leave blank if data element does not apply to the participant.	1 = Yes 0 = No 9 = Participant did not self-identify		R																R		R			
3014	Off-Base Transition Training Participant	IN 1	Record 1 if the individual attended any Off-Base Transition Training (OBT) Workshop. Record 0 if the participant does not meet the condition described above.	1 = Yes 0 = No		R																R			R		
3015	Last Branch of Military Service	IN 1	Record 1 if the participant's last branch of military service is the Air Force. Record 2 if the participant's last branch of military service is the Army. Record 3 if the participant's last branch of military service is the Coast Guard. Record 4 if the participant's last branch of military service is the Marines. Record 5 if the participant's last branch of military service is the National Guard/Reserves. Record 6 if the participant's last branch of military service is the Navy. Record 7 if the participant's last branch of military service is the Space Force. Record 0 if the participant does not meet any one of the conditions described above.	1 = Air Force 2 = Army 3 = Coast Guard 4 = Marines 5 = National Guard/Reserves 6 = Navy 7 = Space Force 0 = No		R																		R			
3016	Date of First DVOP Service	DT 8	Record the date on which the participant first began receiving a service by a Disabled Veterans' Outreach Program (DVOP) specialist following a determination of eligibility to participate in the program. Leave blank if the participant did not receive DVOP services.	YYYYMMDD		R																	R			R	
3017	For Those Who Were Placed in Employment: Union Membership	IN 1	Record 1 if the employment placement is in a placement in a position with union membership. Record 0 if the placement is not in a position with union membership. Leave blank if the participant was not placed in employment.	1 = Union 0 = Non-Union											R	R										R	
3018	Type of Training Received While Incarcerated	IN 2	Use the appropriate code to indicate, for participants that received training while incarcerated, the type of approved training that was provided to the participant. NOTE: If OJT or Skill Upgrading is being provided as part of a Registered Apprenticeship program, choose Code 09. NOTE: Code 06 should only be utilized when other codes are clearly not appropriate. Record 00 if the participant did not receive a training service. Leave blank if this data element does not apply to the participant.	01 = On the Job Training (non-WIOA Youth) 02 = Skill Upgrading 03 = Entrepreneurial Training (non-WIOA Youth) 04 = ABE or ESL (contextualized or other) in conjunction with Training 05 = Customized Training 06 = Occupational Skills Training (non-WIOA Youth) 07 = ABE or ESL (contextualized or other) NOT in conjunction with training (funded by Trade Adjustment Assistance only) 08 = Prerequisite Training 09 = Registered Apprenticeship 10 = Youth Occupational Skills Training 11 = Other Non-Occupational Skills Training 12 = Job Readiness Training in conjunction with other training 00 = No Training Service												R	R									R	
3019	Gang Affiliation	IN 1	Record 1 if the participant is either (a) incarcerated at program entry and has a documented gang affiliation, or (b) is not incarcerated at program entry but has been previously convicted of a gang-related crime. Record 0 if the participant does not have a gang-related conviction or gang affiliation documented by law enforcement. Leave blank if this element does not apply.	1 = Yes 0 = No												R	R									R	
3020	Criminal Justice ID/ Inmate Number	AN 12	Record the participant's appropriate criminal justice ID/inmate number.	xxxxxxxxxx													R	R								R	
3021	Date Started Registered Apprenticeship Program (Incumbent Registered Apprentice)	DT 8	Record the date the incumbent apprentice started their original registered apprenticeship program. Leave blank if this data element does not apply.	YYYYMMDD																						R	R
3022	DWG Grant Number #2	AN 14	Record the second 13 or 14 character grant FAIN number if the participant received services under a second grant number based on when the grant was awarded. Older grant FAIN number formats start with two letters, are 14 characters, and should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-five numeric characters: Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). Newer grant FAIN numbers start with two numbers, are 13 characters, and should be entered in the following format without dashes: Two numeric characters representing the fiscal year when the grant was awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the type of grant awarded-Two alphabetic characters representing the grant program code-Six numeric characters (12-A-55-AA-123456). Leave blank if the participant did not receive services under a second grant funded by this program.	XXXXXXXXXXXX						R																	R
3023	Demonstration Grant Number	AN 14	Record the second 13 or 14 character grant FAIN number if the participant received services under a Demonstration grant program. There are two grant number formats based on when the grant was awarded. Older grant FAIN number formats start with two letters, are 14 characters, and should be entered in the following format without dashes: Two alphabetic characters representing the grant program code-five numeric characters: Two numeric characters representing the fiscal year when the grant was awarded-Two numeric characters identifying the type of grant awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the state that received the grant was served under (AA-12345-12-55-A-26). Newer grant FAIN numbers start with two numbers, are 13 characters, and should be entered in the following format without dashes: Two numeric characters representing the fiscal year when the grant was awarded-One alphabetic character identifying the relevant agency at ETA-Two numeric characters identifying the type of grant awarded-Two alphabetic characters representing the grant program code-Six numeric characters (12-A-55-AA-123456). Leave blank if the participant did not receive services under a grant funded by this program.	XXXXXXXXXXXX																							R
3024	Total Hours of Paid Sick Leave in 1st Quarter	IN 3	Record the total number of hours of sick leave for which the participant was paid under the grantee's leave policy in the 1st quarter of the program year as determined from the sub-grantee's wage records.	000																				R		R	
3025	Total Hours of Paid Sick Leave in 2nd Quarter	IN 3	Record the total number of hours of sick leave for which the participant was paid under the grantee's leave policy in the 2nd quarter of the program year as determined from the sub-grantee's wage records.	000																				R		R	
3026	Total Hours of Paid Sick Leave in 3rd Quarter	IN 3	Record the total number of hours of sick leave for which the participant was paid under the grantee's leave policy in the 3rd quarter of the program year as determined from the sub-grantee's wage records.	000																				R		R	
3027	Total Hours of Paid Sick Leave in 4th Quarter	IN 3	Record the total number of hours of sick leave for which the participant was paid under the grantee's leave policy in the 4th quarter of the program year as determined from the sub-grantee's wage records.	000																				R		R	
3028	Total Hours of Paid Participant Required Action Activities	IN 3	Record the total number of hours paid for the participant time spent on all participant required actions.	000																				R		R	

Footnotes
1. Cells populated with "R" represent data elements that must be collected and reported by the corresponding program. In certain circumstances some of these required elements may be left blank, grantees must refer to guidance and technical assistance for more details.

Public Burden Statement (1205-0521)
Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondent's reply to these reporting requirements is mandatory (Workforce Innovation and Opportunity Act, Section 116). Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate to the Office of Policy Development and Research ● U.S. Department of Labor ● Room N-5641 ● 200 Constitution Ave., NW, ● Washington, DC ● 20210. Do NOT send the completed application to this address.

Program	PIRL Element No.
NFJP -Housing	N/A
INAP Youth	N/A
REO	New element
Apprenticeship	New element
JVSG, WP	New element
JVSG, WP	New element
JVSG, WP	New element
REO	New element
REO	New element
REO	New element
All	New element
All	New element
JVSG	New element
JVSG	New element
DWG	New element
Demonstration	New element
INAP	PIRL 105, 106, 107
All	PIRL 201
All	PIRL 301
All	PIRL 302-303
TAA	PIRL 304
TAA	PIRL 305
All	PIRL 308
JVSG	PIRL 309
JVSG	PIRL 310
JVSG	PIRL 311
JVSG	PIRL 312
JVSG	PIRL 313
All	PIRL 314
JVSG	PIRL 315
TAA	PIRL 316
JVSG	PIRL 316
TAA	PIRL 401
TAA	PIRL 402
All	PIRL 402
TAA	PIRL 403
TAA	PIRL 403
TAA	PIRL 409
SCSEP	PIRL 409
TAA	PIRL 604
All	PIRL 701
SCSEP	PIRL 805
INAP Adult	PIRL 807
TAA	PIRL 905
NFJP	PIRL 912
JVSG	PIRL 914
YouthBuild	PIRL 919

SCSEP	PIRL 920
TAA	PIRL 927
TAA	PIRL 928
Apprenticeship	PIRL 931
H-1B	PIRL 935
REO Adult	PIRL 936
REO Youth	PIRL 937
H-1B	PIRL 938
REO	PIRL 1105
JVSG	PIRL 1114
JVSG	PIRL 1115
JVSG, WP	PIRL 1111,PIRL 1222
REO Adult and Youth	PIRL 1202
H-1B	PIRL 1203
Apprenticeship	PIRL 1205
REO	PIRL 1206
JVSG	PIRL 1213
WIOA Adult/DW	PIRL 1303
All	PIRL 1304
TAA	PIRL 1304
All	PIRL 1305
TAA	PIRL 1305
YouthBuild	PIRL 1317
TAA	PIRL 1321
TAA	PIRL 1322
TAA	PIRL 1323
TAA	PIRL 1325
Apprenticeship	PIRL 1328
TAA	PIRL 1329
TAA	PIRL 1330
H-1B	PIRL 1331
SCSEP	PIRL 1332
SCSEP, H1B	PIRL 1401
SCSEP	PIRL 1406
NFJP	PIRL 1409
TAA	PIRL 1503
TAA	PIRL 1505
TAA	PIRL 1506-1543
WIOA Adult/DW	PIRL 1601-7
TAA	PIRL 1608
TAA	PIRL 1609
YouthBuild	PIRL 1610
REO	PIRL 1611
TAA	PIRL 1613
Apprenticeship	PIRL 1616
SCSEP	PIRL 1806
SCSEP	PIRL 1808
SCSEP	PIRL 1811

SCSEP	PIRL 1813
DWG	PIRL 2003
SCSEP	PIRL 2103
H-1B	PIRL 2106
H-1B	PIRL 2109
H-1B	PIRL 2109 - 2117
H-1B	PIRL 2119
H-1B	PIRL 2121
H-1B	PIRL 2123
REO Adult and Youth	PIRL 2202
REO Youth	PIRL 2203
REO Youth	PIRL 2204
REO Adult and Youth	PIRL 2205
NFJP	PIRL 2208
NFJP	PIRL 2223
NFJP	PIRL 2224
REO Youth	PIRL 2400
REO Youth	PIRL 2401
REO Youth	PIRL 2404
REO	PIRL 2422
All	PIRL 2506
REO Adult	PIRL 2506
All	PIRL 2507
REO Adult	PIRL 2507
All	PIRL 2526
REO Adult	PIRL 2526
REO	PIRL 2542
REO	PIRL 2543
REO	PIRL 2544
REO	PIRL 2546
TAA	PIRL 2700
INAP	PIRL 2702
SCSEP	PIRL 2809, 2824, 2825, 2842, 2844, 2847
Apprenticeship	PIRL 2830
Apprenticeship	PIRL 2900
Apprenticeship	PIRL 2901
H-1B	PIRL 2901
Apprenticeship	PIRL 2906
H-1B	PIRL 2907
H-1B	PIRL 2909
Apprenticeship	PIRL 2912
Apprenticeship	PIRL 2914
Apprenticeship	PIRL 2907-2911, 2914, 2918,2920
Apprenticeship	PIRL 2915, 2916
Apprenticeship	PIRL 2920
NFJP - CST	PIRL 3008

Revision

Add Column and QPR for NFJP Housing Grants

Add Column and QPR for INA Youth program

Add Criminal Justice ID/ Inmate Number element

Add new element for Date Started Registered Apprenticeship Program (Incumbent Registered Apprentice)

Add element for Armed Forces Service Medal Veteran

Add element for Off Base Transition Training Participant

Add element for Last Branch of Military Service

Create new PIRL element, Gang Affiliation, and require for REO Adult and REO Youth

Create new PIRL element, Type of Training Received while Incarcerated, for REO Adult and REO Youth

Create new PIRL element, For Those Who Were Placed in Employment: Union Membership.

Add element for Gender Identity

Add element of Sexual Orientation

Add HVRP Participant ID

Add "Date of First DVOP Service" element

Add element for DWG Grant #2

Add element for Demonstration Grant #

Check PIRL Element

Revise Sex element to differentiate from Gender Identity and add code value for Intersex

Revise element to better align to current requirements in JVSG

Revised for clarity and added code for "Did not self-identify"

Uncheck PIRL element

Uncheck PIRL element

Remove from PIRL.

Removed as HVRP no longer required

Removed as HVRP no longer required

Removed as HVRP no longer required

Removed as HVRP no longer required

Remove from PIRL.

Remove from PIRL.

Removed as HVRP no longer required

Uncheck PIRL element

Revise element to include codes for multiple types of military connected individuals.

Revise length to allow for reporting of multiple code values for each individual.

Check PIRL Element

Add code values to account for some program specific definitions of LTU (JVSG, DWG)

Check PIRL Element

Revise definition to update taxonomy to match other ONET elements

Check PIRL Element

Uncheck PIRL element

Uncheck PIRL element

Revise element to align to guidance and provide clarity

Uncheck PIRL element

Check PIRL Element

Check PIRL Element

Revised definition to account for new grant # format

Revise code 1 to include Consolidated DVOP/LVER, remove code 2.

Revised definition to account for new grant # format

Revised definition to account for new grant # format
Revise definition for clarity
Remove from PIRL.
Uncheck PIRL element
Uncheck PIRL element
Revised definition to account for new grant # format
Revised definition to account for new grant # format
Revised definition to account for new grant # format
Check PIRL Element
Revise definition and code values to add eligible groups.
Revise code options to consolidate GI Bill into code 2
Change "special disabled veteran" to "disabled veteran"
Check PIRL Element
Uncheck PIRL Element
Check PIRL Element
Check PIRL Element
Remove from PIRL.
Add a code value for "pre-apprenticeship training"
Remove language specific to ETP (name and instructions)
Check PIRL Element
Revise name to remove ETP specific language
Check PIRL Element
Check PIRL Element
Revise definition for clarity
Revise name and definition for clarity
Revise definition for clarity
Revise definition for clarity
Uncheck PIRL element
Revise definition for clarity
Revise definition for clarity
Remove from PIRL.
Uncheck PIRL element
Uncheck PIRL element
Uncheck PIRL element
Check PIRL Element
Check PIRL Element
Remove from PIRL.
Revise name and definition for clarity
Revise codes to create separate in-state and out-of-state UI match codes
Revise definition to capture participants that do not obtain employment in code 0.
Revise definition and add code to differentiate based on timing of first recall.
Check PIRL Element
Check PIRL Element
Check PIRL Element
Check PIRL Element
Uncheck PIRL element
Uncheck PIRL element
Uncheck PIRL element

Uncheck PIRL element
Revise definition and length to capture the full grant number, including new grant # format
Uncheck PIRL element
Remove from PIRL.
Remove from PIRL.
Remove from PIRL.
Remove from PIRL.
Remove from PIRL.
Remove from PIRL.
Check PIRL Element
Check PIRL Element
Check PIRL Element
Check PIRL Element
Revise note in definition to allow NFJP to use code 7.
Remove from PIRL.
Remove from PIRL.
Check PIRL Element
Check PIRL Element
Check PIRL Element
Updated code values to provide clarity on reporting individuals in prison/jail.
Revise definition and add code to differentiate based on timing of voter registration.
Check PIRL Element
Revise definition and add code to differentiate based on timing of licensing.
Check PIRL Element
Revise element name
Check PIRL Element
Remove from PIRL.
Remove from PIRL.
Remove from PIRL.
Check PIRL Element
Uncheck PIRL element
Check PIRL Element
Remove from PIRL.
Check PIRL Element
Add note to definition
Revise element to remove code 5
Uncheck PIRL element
Check PIRL Element
Uncheck PIRL element
Uncheck PIRL element
Revise definition for clarity
Revise to add code for incumbent registered apprentice
Add "Registered" before "Apprenticeship" and "Apprenticeship Program" in PIRL 2907-2911, 2914, 2918,2920
Remove from PIRL.
Revised definition to account for new grant # format
Uncheck PIRL element

Comments

To be used in place of Special Project ID for more than one DWG grant

No longer used by any program.

No longer used by any program.

No longer used by any program.

No longer used by any program.

No longer used by any program.

No longer used by any program.

No longer used by any program.

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