**TITLE 1 OUT-OF-SCHOOL YOUTH (OSY) ENROLLMENT CHECKLIST**

State ID: Click or tap here to enter text. Last Name: Click or tap here to enter text.

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| **GENERAL ELIGIBILITY – ALL PROGRAMS** | | |
| Requirement | Verified | Acceptable Documentation on File |
| Authorization to Work in the U.S. |  | Choose an item. |
| Selective Service Requirement Met |  | Choose an item. |
| Age/Date of Birth |  | Choose an item. |
| Social Security Number |  | Choose an item. |

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| **WIOA OUT-OF-SCHOOL YOUTH** | | |
| Requirement | Verified | Acceptable Documentation on File |
| Not Attending Any School |  | Choose an item. |
| Between 16 and 24 Years Old at Enrollment |  | Choose an item. |
| AND Must Meet One or More of the Following | | |
| School Dropout |  | Choose an item. |
| Under 18, did not attend most recent school quarter |  | Choose an item. |
| HS Grad, Low Income, and Basic Skills Deficient |  | Choose an item. |
| Choose an item. |
| Choose an item. |
| Connected to the Justice System |  | Choose an item. |
| Homeless or Runaway |  | Choose an item. |
| In or Aged Out of Foster Care System |  | Choose an item. |
| Pregnant or Parenting |  | Choose an item. |
| An Individual with a Disability |  | Choose an item. |
| Low Income and Requires Additional Assistance |  | Choose an item. |
| Choose an item. |

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| **REQUIRED FILE DOCUMENTATION AND DATA VALIDATION ELEMENTS**  ***(Not required to determine eligibility but must be in client file)*** | |
| Required File Documentation | Verified |
| Family Size |  |
| Annualized Income |  |
| Employment Status at Participation |  |
| Objective Assessment Summary |  |
| Individual Service Strategy (ISS) |  |
| ISS Attachment – 14 Elements Service Needs Assessment |  |
| EO/Grievance/ROI Form Signed |  |
| Conflict of Interest Form Signed |  |
| Alternate Contact Information in Application |  |
| Case Note Documenting Eligibility and Suitability |  |

Staff Name:

Secondary Review Date:

Reviewer:

Date Reviewed: