



## **YOUTH NEEDS ADDITIONAL ASSISTANCE POLICY- Adopted 6/27/17**

### **BACKGROUND**

Eligibility criteria for WIOA Youth Services consist of two primary components income eligibility, and employment barriers as found in WIOA Section 129 (a)(1)(B).

The Workforce Innovation and Opportunity Act (WIOA) allows local areas to provide services to youth who are low income, but do not meet one of the WIOA identified barriers. These participants are considered “youth who need additional assistance” to complete an educational program or to secure and hold employment.\* Providers of Title I Youth services should only use this barrier if none of the other WIOA recognized barriers apply.

### **NEEDS ADDITIONAL ASSISTANCE**

The DCWIB local policy defines “youth who needs additional assistance” for out of school youth based on an assessment of ongoing needs of youth in our communities and are designed to meet the needs of low-income youth who need to enter or complete an educational program or to secure and hold employment.

The circumstances include:

- Has a documented poor work history; **or**
- Is currently unemployed and has been fired from a job in the last 6 months, **or**
- Is currently employed but lacks the necessary skills for advancement; or lacks skills as listed in the Regional Demand Occupations list and has at least one or more of the following additional barriers:
  - Unstable housing;
  - Lack of family support;
  - Lack of transportation to school or work;
  - Lives alone or is primary household support; **or**
- Has previously been placed in foster care for more than 6 months between the ages of 16-21; **or**
- Has experienced the loss of a primary caregiver (parent or guardian) due to debilitating health issues death, incarceration or military service; **or**
- Has been mandated by court or referred by agency to complete training and/or secure employment; **or**
- Has experienced recent traumatic events, is the victim of abuse or suffers from serious emotional or medical problems; or
- Has dropped out of a post-secondary educational program during the last 12 calendar months.



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# Dutchess County Workforce Investment Board

3 Neptune Road Poughkeepsie, NY 12601 Telephone (845) 463-0517 Fax (845) 463-0100 www.dcwib.org

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## DOCUMENTATION

Program staff must record in OSOS that the eligible youth is a youth who needs additional assistance, as defined by the local policy. An OSOS Comment must be entered confirming if the additional assistance is to enter or complete an educational program or to secure and hold employment. The information must be recorded at the time of enrollment or at the first youth service in the youth program. A copy of the source documentation (including self-attestation where applicable) must be retained in the customer folder. Please refer to the current technical guidance issued by the New York State Department of Labor regarding Data Element Verification.

Self-attestation, except where it is prohibited by Federal or State Guidelines is an acceptable data element validation method. Self-attestation must include the following signed statement:

“I certify that the information provided on this document is true and accurate to the best of my knowledge. I understand that such information is subject to verification and further understand that the above information, if misrepresented or incomplete, may be grounds for immediate termination from any WIOA funded program and/or penalties as specified by law.”

Barrier	Date Element Verification
Attendance patterns	Records from educational institution (i.e. diploma, GED/HSE certificate, transcripts, attendance record, dropout letter, or documentation from school. Self-attestation is not allowable.
Foster Care	Documentation/confirmation from Dutchess County Department of Community and Family Services.
Loss of primary parent/guardian	Record from authorizing agency, public record search, cross reference with public record search or Dutchess County Department of Community and Family Services or self-attestation.
Work history and Employment Status	Employment status at participation, pay stubs, Unemployment Insurance field population, Employment Verification Form (Attachment A) or self-attestation.
Additional Barriers	Self-attestation.
Mandated participation or referral	Documentation/confirmation from Dutchess County Department of Community and Family Services, court or referral letter from program/agency (i.e. rehabilitation, recovery, etc.)
Traumatic events or medical issues	Record or documentation from school official or other qualified professional or self-attestation.
Gang activities	Court record, juvenile justice record, or self-attestation.

**\*REFERENCE:**

WIOA Section 129 (1)(B)(iii)VIII)

20 CFR 681.300

Plus additional guidance as it comes down from USDOL and/or NYSDOL



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## Attachment A

### EMPLOYMENT VERIFICATION FORM

Conducted by E-mail, Telephone, or Document Inspection (circle one)

\_\_\_\_\_  
Applicant's name and NY#

Company providing verification\_\_\_\_\_

Company area code & telephone number\_\_\_\_\_

Person verifying employment\_\_\_\_\_

Date of verification\_\_\_\_\_

\_\_\_\_\_  
Date of Hire \_\_\_\_\_

Wage rate\_\_\_\_\_

# of Hours of Work per Week\_\_\_\_\_

Additional items verified\_\_\_\_\_

Additional items verified\_\_\_\_\_

Additional items verified\_\_\_\_\_

#### Verification

I attest that the information recorded by me on this document was obtained through e-mail, telephone, or document inspection on the above date.

WIOA staff name (print) \_\_\_\_\_

Signature of WIOA staff\_\_\_\_\_ Date\_\_\_\_\_