



WIOA Title 1 Youth – Application & Eligibility Authorization

Applicant's Name: ASS		
Application Required Documents (Date Submitted is the trigger for 30 days to	to determine Eligibility)	EMI Office Use Only
☐ 1.) WIOA Title 1 Youth - Application & Eligibility Authorization – Oct. 2024		
☐ 2.) Agency Intake Form – Oct. 2024		
☐ 3.) DOL-Funded Program Application – Mar. 2021		
4.) Medical Disability Supplemental Form (housed separate from file) – Oct. 2024	4	
☐ 5.) WIOA Youth Application Addendum – Oct. 2024		
Database Requirements (You have 10 days to enter into ASSET from the dat	e of submission)	
☐ ASSET ☐ Customers ☐ Programs		
☐ ETO – Participant entered in Intake Program		
NOTE – Retain Documents but do not turn into EMI for review until Eligibility	/ Determination	
Application Status: Date of Submission: Date Entered	d into ASSET:	_
Eligibility Required Documents (in this order)		
☐ 6.) Youth Eligibility Desk Guide - 2018		
☐ 7.) Basic Skills Screening Tool – Jul. 2019 or TABE/CASAS Reading and Mat	h Scores	
8.) Document Verification Checklist (if eligibility to work in U.S. is provided) (copy of	of documents) – Mar. 2021	
9.) Selective Service Form (housed separate from file) – Mar. 2021		
☐ 10.) Youth High Poverty Area – Oct. 2024		
☐ 11.) DOL- Funded Program Income Worksheet (copy of income documents if app	olicable) – Oct. 2024	
☐ 12.) Third-Party Entity Verification Form (if applicable) – Mar. 2021		
☐ 13.) Veterans and Eligible Spouses Priority of Service Acknowledgement (if ap	oplicable) - Oct. 2024	
☐ 14.) Limited English Proficiency (LEP) Refusal (if applicable) – Mar. 2021		
☐ 15.) EO Notice and Grievance/Complaint Procedure Acknowledgement – Oct.	. 2024	
16.) Authorization to Release Information and Promotional Consent – Oct. 202	24	

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Form Date: 10.01.24

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Database Requirements						
□ ASSET (Eligibility) □ Services - Eligibility Determin □ Employment (If previously em □ Customer note for eligibility d □ Customer note with date eligi □ Customer note for Selective S □ Upload all documents into AS	ployed, enter most etermination statu bility notification o Service status	s ccurred				
Eligibility status:						
(Career Planner Signature) Employ Milwaukee Office Use Only	(Agency)	(Date)	(Manager/QA Initial)	(Date)		
(EMI Staff Signature)	(Date)					

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Form Date: 10.01.24