ATTACHMENT D
SOURCE DOCUMENTATION REQUIREMENTS FOR PROGRAM YEAR (PY) 2011 NFJP DATA ELEMENT VALIDATION

This appendix presents the data elements to be validated with their associated WIASPR number, element definitions, valid values, Federal validation sources, state/grantee sources, and validation instructions needed to perform data element validation. The Federal sources are the generic, Federally recommended source documentation. The "State/Grantee Sources" column can be used to enter grantee-specific versions of the Federally approved documentation.

Two types of validation rules exist:

- 1. If the validation instruction cell says MATCH: Enter a checkmark in the box in the pass column if the data on the validation worksheet match the data in the source documentation. Enter a checkmark in the box in the fail column if the data on the worksheet do not match the data in the source documentation or if no source documentation is found. To match, the data on the worksheet must be the same as the data in the source documentation. For example, if the worksheet says a participant's date of birth is July 1, 1975, then the source documentation must also have July 1, 1975 as the birth date.
- 2. If the validation instruction says SUPPORT: Enter a checkmark in the box in the pass column if the data on the validation worksheet are supported by the data in the source documentation. Enter a checkmark in the box in the fail column if the data on the worksheet are not supported by the data in the source documentation or if no source documentation is found. To support, the data on the worksheet must be similar to the data in the source documentation. This instruction is used when information must be interpreted or processed before it can be applied to the participant's records. For example, source documentation can support farmworker status in different ways, by a code or narrative or other information.

For the most part, the definition of a particular source is clear. Grantees may, however, have questions about three sources—Grantee Management Information System (MIS), Self-Attestation, and Case Notes. Definitions for these three types of source documentation are:

- 1. MIS: Unless otherwise noted, MIS refers to specific, detailed information which supports an element that is stored in the grantee's information system. An indicator alone, such as a checkmark on a computer screen, is not acceptable source documentation. For example, a grantee's MIS is acceptable source documentation for date of exit if it identifies the last service received in addition to the date on which that service was received.
- 2. Self-Attestation: Self-attestation occurs when a participant states his or her status for a particular data element and then signs and dates a form acknowledging this status. The key elements for self-attestation are: (a) the participant identifying his or her status for permitted elements and (b) the signing and dating of a form attesting to this self-identification. The form and signature can be on paper or in the state management information system, with an online signature.
- 3. Case Notes: Case notes refer to either paper or electronic statements by the case manager that identifies, at a minimum, the following: a participant's status for a specific data element, the date on which the information was obtained, and the case manager who obtained the information.

WIASPR Item Name and Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
4. Date of	Record the date on which the individual	YYYYMMDD	Grantee Administrative	State/Grantee Sources	HISTIUCTIONS
Participation	begins receiving his/her first service funded by the program following a determination of eligibility to participate in the program.	TTTTMMDD	Records		Match
5. Date of Birth	Record the individual's date of birth.	YYYYMMDD	Family bible; birth certificate; passport; driver's license; baptismal record; I-9 form		Match
9. Qualifies for	Record appropriate status of the participant.	1 = Farmworker	Pay stubs; W-2 forms;		
Sec. 167		2 = Dependent or	IRS 1040 forms; case		
Program as a:	SPECIAL NOTE: If a participant qualifies	Spouse of a	manager/counselor		Support
	as eligible under both categories, use Code 1 – Farmworker.	Farmworker	intake notes; self attestation		
11. Farmworker Status	Use the appropriate code to record the status of the participant at the time of eligibility determination. SPECIAL NOTE: Where participant is a dependent of a farmworker, record the status of the eligible farmworker.	1 = Migrant Farmworker 2 = Seasonal Farmworker	Pay stubs; W-2 forms; IRS 1040 forms; case manager/counselor intake notes; self attestation		Support
13b. Number of Individuals in the Family	Record the total number of individuals in the family, including the participant.	00	Birth certificate; family bible; IRS 1040 forms		Match

WIASPR Item Name and Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
	Record 1 if the participant is a person who either (a) did any work at all as a paid employee, (b) did any work at all in his or her own business, profession, or farm, (c) worked 15 hours or more as an unpaid worker in an enterprise operated by a member of the family, or (d) is one who was not working, but has a job or business from which he or she was 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. Record 2 if the participant 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 currently on active military duty and has been provided with a date of separation from military	Valid Values 1 = Employed 2 = Employed, but Received Notice of Termination of Employment or Military Separation 3 = Not Employed	Pay stub, case notes showing information collected from participant	State/Grantee Sources	Support
	service. Record 3 if the participant does not meet any one of the conditions described above.				

WIASPR Item Name and Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
17. Six Month Pre-Program Earnings	Record the total pre-program earnings of the participant for the 6-month period prior to the date of application in the program. Earnings include salaries or wages, and also include any bonuses, tips, gratuities, and commissions or overtime pay earned. Record 00000 if there were no earnings during this period.	00000	Pay stubs; W-2 forms; employer payroll records; IRS 1040 forms; administrative/UI wage records; self attestation; detailed case management notes		Match
21e. Long-term Agricultural Employment	Record 1 if the participant is a person who has engaged in agricultural work as the primary source of income for a minimum of four (4) years prior to intake/eligibility determination. Record 2 if the participant does not meet the conditions described above.	1 = Yes 2 = No	IRS 1040 forms; pay stub; intake application; case manager/counselor progress notes; self- attestation		Support
24. Date of First Intensive Service	Record the date on which the participant first received intensive services. Intensive services include specialized assessments of skill levels, work experience, diagnostic testing, adult basic education or English as a Second Language (ESL) training, development of an individual employment plan, group or individual counseling, case management for participants seeking training services, short-term prevocational services, and remedial reading, writing, or communication skills training. Otherwise, leave "blank" if the participant did not receive intensive services.	YYYYMMDD	Case manager/counselor progress notes with signature; IEP assessment and diagnostic testing		Match

WIASPR Item Name and Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
25. Date of First Training Service	Record the date on which the participant first received training services. Training services include, but are not limited to, occupational skills training; OJT; skill upgrading; entrepreneurial training; and job readiness training. Otherwise, leave "blank" if the participant did not receive training services.	YYYYMMDD	Case manager/counselor certification signature; employer signed document; attendance records from institution or instructor		Match
33. Date of Exit	Record the date on which the last service funded by the program or a partner program is received by the participant. Once a participant has not received any services funded by the program or a partner program for 90 consecutive calendar days and has no gap in service and is not scheduled for future services, the date of exit is applied retroactively to the last day on which the individual received a service funded by the program or a partner program.	YYYYMMDD	Case manager/counselor termination notice; case manager/counselor progress tracking report; grantee MIS		Match

WIASPR Item Name and					
Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
34. Category of Exit	Record 1 if the participant received and/or completed any job-related core (beyond core informational or self-services, and eligibility determination), intensive, or training services. Record 2 if the participant received non-job related services, without having received job-related core, intensive, or training services. Record 3 if the participant did not complete the program and exited for other reasons, as specified in Item 35 below. SPECIAL NOTE: Individuals who receive training-related services AND intensive, or training services should be coded 1.	1 = Employment and Training Exiter 2 = Related Assistance Services ONLY Exiter 3 = Other Reasons for Exit	Grantee administrative records		Support

WIASPR Item					
Name and					
Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
35. Other Reasons	Record 1 if the participant is residing in an	1 =	Grantee administrative		
for Exit (at time	institution or facility providing 24-hour	Institutionalized	records		
of exit or during	support such as a prison or hospital and is	2 =			
3-quarter	expected to remain in that institution for at	Health/Medical			
measurement	least 90 days.	3 = Deceased			
period following	Record 2 if the participant is receiving	4 = Entered			
the quarter of	medical treatment that precludes entry into	Advanced			
exit)	unsubsidized employment or continued	Training			
	participation in the 167 program. Does not	5 = Entered Post-			
	include temporary conditions expected to	Secondary			
	last for less than 90 days.	Education			
	Record 3 if the participant was found to be	6 =			
	deceased or no longer living.	Moved/Cannot			
	Record 4 if the participant entered	Locate/Voluntary			
	advanced training. Advanced training	Separation			
	includes an occupational skills	7 = Family Care			Support
	employment/training program, not funded	8= Reserve			
	under Title I of WIA, which does not	Forces Called to			
	duplicate training received under Title I.	Active Duty			
	This category includes only training outside	9 = Not a Valid			
	of the 167 program, One-Stop, WIA and	SSN			
	partner system.				
	Record 5 if the participant entered post-				
	secondary education. Post-secondary				
	education includes a program at an				
	accredited degree-granting institution that				
	leads to an academic degree (e.g., AA, AS,				
	BA, BS). This does not include entry into				
	post-secondary education programs offered				
	by degree-granting institutions that do not				
	lead to an academic degree.				

WIASPR Item					
Name and					
Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
35. Other Reasons	Record 6 if the participant cannot be				
for Exit	located or has moved to an area that				
(continued)	prevents them from completing their				
	program, or has voluntarily left the				
	program.				
	Record 7 if the participant is providing care				
	for a family member with a health/medical				
	condition that precludes entry into				
	unsubsidized employment or continued				
	participation in the program. Does not				
	include temporary conditions expected to				
	last for less than 90 days.				
	Record 8 if the participant is a member of				
	the National Guard or other reserve military				
	unit and is called to active duty for at least				
	90 days.				
	Record 9 if the social security number of				
	the participant is not valid.				
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	Record 0 or leave "blank" if the participant				
	exited for a reason other than one of the				
26 D DI 11	conditions described above.	1444444			
36. Date Placed in	Record the date on which the participant	YYYYMMDD	Case manager/counselor		
Unsubsidized	was placed into unsubsidized employment.		progress notes		Match
Employment	Leave this field blank if the participant did				
	not enter unsubsidized employment.				

WIASPR Item Name and Number	Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
41. Employed in the 1 st Quarter After Exit Quarter	Record 1 if the participant was employed in the first quarter after the quarter of exit. Record 2 if the participant was not employed in the first quarter after the quarter of exit. Record 3 if information on the participant's employment status in the first quarter after the quarter of exit is not yet available.	1 = Yes 2 = No 3 = Information Not Yet Available	Pay stubs; employer payroll records; IRS 1040 forms; case manager/counselor progress notes; self- attestation		Support
42. Employed in the 2 nd Quarter After Exit Quarter	Record 1 if the participant was employed in the second quarter after the quarter of exit. Record 2 if the participant was not employed in the second quarter after the quarter of exit. Record 3 if information on the participant's employment status in the second quarter after the quarter of exit is not yet available.	1 = Yes 2 = No 3 = Information Not Yet Available	Pay stubs; employer payroll records; IRS 1040 forms; case manager/counselor progress notes; self- attestation		Support
43. Employed in the 3 rd Quarter After Exit Quarter	Record 1 if the participant was employed in the third quarter after the quarter of exit. Record 2 if the participant was not employed in the third quarter after the quarter of exit. Record 3 if information on the participant's employment status in the third quarter after the quarter of exit is not yet available.	1 = Yes 2 = No 3 = Information Not Yet Available	Pay stubs; employer payroll records; IRS 1040 forms; case manager/counselor progress notes; self- attestation		Support

Data Element Definition	Valid Values	Federal Sources	State/Grantee Sources	Instructions
Record the total earnings earned by the participant in the second and third calendar quarters after the quarter of exit. Total earnings include any bonuses, tips, gratuities, commissions, and overtime pay earned. Note: Enter whole dollar amounts (00000). Enter 99999 if data are not yet available for this item. Otherwise, leave "blank" if this	00000	Pay stubs; employer payroll records; IRS tax forms; administrative/UI wage records; case manager/counselor progress notes with signature	State/Grantee Sources	Match
	participant in the second and third calendar quarters after the quarter of exit. Total earnings include any bonuses, tips, gratuities, commissions, and overtime pay earned. Note: Enter whole dollar amounts (00000). Enter 99999 if data are not yet available for	Record the total earnings earned by the participant in the second and third calendar quarters after the quarter of exit. Total earnings include any bonuses, tips, gratuities, commissions, and overtime pay earned. Note: Enter whole dollar amounts (00000). Enter 99999 if data are not yet available for this item. Otherwise, leave "blank" if this	Record the total earnings earned by the participant in the second and third calendar quarters after the quarter of exit. Total earnings include any bonuses, tips, gratuities, commissions, and overtime pay earned. Note: Enter whole dollar amounts (00000). Enter 99999 if data are not yet available for this item. Otherwise, leave "blank" if this	Record the total earnings earned by the participant in the second and third calendar quarters after the quarter of exit. Total earnings include any bonuses, tips, gratuities, commissions, and overtime pay earned. Note: Enter whole dollar amounts (00000). Enter 99999 if data are not yet available for this item. Otherwise, leave "blank" if this Pay stubs; employer payroll records; IRS tax forms; administrative/UI wage records; case manager/counselor progress notes with signature