Sample VRAP Participant Report

This attachment is a sample of what each state's Veterans Retraining Assistance Program (VRAP) file will look like. Each state will receive a file with their state's VRAP participants (e.g. Florida will receive participants from Florida ONLY). This attachment will identify each data field shared with the states and a quick explanation of what the field is. There will be three tabs on the workbook: first tab will be new exiters, the second tab will be exiters within the previous 4-weeks, and the third tab will show all participants within the state.

First – This is the First Name of the VRAP participant.

Middle – This is the Middle Name of the VRAP participant (if applicable).

Last – This is the Last Name of the VRAP participant.

DOB – This is the Date of Birth (DOB) of the VRAP participant (e.g. 1/1/1960).

Email Address – This is the email address provided by the VRAP participant on their application (*Note* – This is a required field to complete the application, so every participant should have an email address).

Phone – This is the phone number provided by the VRAP participant on their application.

High Demand Occupation – This is the occupation chosen by the VRAP participant in which he or she will receive training.

Address Line 1 – This is the address provided by the VRAP participant on their application

State – This is the state of residence provided by the VRAP participant on their application.

Zipcode – This is the zip code provided by the VRAP participant on their application.

Name of Facility – This is the educational institution in which the VRAP participant received training.

Course Name – This is the educational program the VRAP participant was trained in (*Note* – This may be the course taken, the credential being pursued, or the program in which they are enrolled).

Objective Name – This is the educational credential the VRAP participant has completed or terminated from (*Note* – This can be an Associate's degree or other educational program).

Notification Weeks – This is the number of weeks remaining to contact the VRAP participant to offer employment services within the required 30-day period. (*Note* – This will countdown from each week starting at "4")

DOL-Unique ID – This is a unique VRAP participant identifier (ID) established by the Department of Labor (DOL) (*Note* – It is not personally identifiable information).

Employment Assistance – This field will be blank when states receive the files, it is to be filled in by the American Job Center staff to document the outreach to VRAP participants (*Note* – Instructions on how to record outreach are provided in the Training and Employment Guidance Letter).

VRAP Participant Information – Sample
 (Attachment B)

First	Middle	Last	DOB	Email Address	Phone	High Demand Occupation	Address	State	Zipcode	Name of Facility	Course Name	Objective Name	Notification Weeks	DOL-Unique ID	Employment Assistance
John	James	Doe	1/1/1960	jdoe@email.com	5555555555	Computer Support Specialists	111 Any Rd., Anytown FL	FL	99999	Anytown Community College	Other Technologies	Associates in Science (Less than 4 Years)	4	11111111	