



**Participant Name:**

**Agency Name:**

**Career Connect State ID#:**

All applicants who are eligible under any of the regular dislocated worker categories 1-8 should be made eligible under the appropriate category using the regular Dislocated Worker Eligibility Checklist. This checklist should only be used for those customers that **DO NOT** meet the regular dislocated worker criteria and will be made eligible as Category 12.

**Note:** Only one document is required for each section. One document can be used for multiple sections, if applicable.

**AUTHORIZATION TO WORK IN US**

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| <ul style="list-style-type: none"> <li><input type="checkbox"/> Birth Certificate with place of birth</li> <li><input type="checkbox"/> U.S. Social Security card (work eligible)</li> <li><input type="checkbox"/> Alien Registration card (Right-to-Work)</li> <li><input type="checkbox"/> Baptismal Certificate (Place of birth listed)</li> <li><input type="checkbox"/> DD-214/Report of Transfer or Discharge</li> <li><input type="checkbox"/> United States Passport</li> <li><input type="checkbox"/> Foreign Passport (Eligible to work stamped)</li> <li><input type="checkbox"/> Hospital Birth Record indicating US Citizenship</li> <li><input type="checkbox"/> U.S. Naturalization Certificate</li> <li><input type="checkbox"/> IDES or other State's UI (UI Claimant)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> E-Verify with documentation</li> <li><input type="checkbox"/> Self-Attestation on How to Meet DACA requirements outlined in DOL TEGL 02-14</li> <li><input type="checkbox"/> Certificate of U.S. Citizenship (INS Form N-560 or N-561)</li> <li><input type="checkbox"/> Consular Report of Birth Abroad or Certificate of Birth</li> <li><input type="checkbox"/> Certification of Birth Abroad issued by the Dept. of State (Form FS-545 or Form DS-1350)</li> <li><input type="checkbox"/> Permanent Resident Card or Alien Registration Receipt Card with photograph (INS Form I-151 or I-551)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Unexpired Foreign Passport, with I-551 stamp or attached INS Form I-94</li> <li><input type="checkbox"/> Unexpired Temporary Resident Card (INS Form I-688)</li> <li><input type="checkbox"/> Unexpired Employment Authorization Document (INS Form I-688A or I-688B) with or without photograph</li> <li><input type="checkbox"/> Unexpired Reentry Permit (INS I-327)</li> <li><input type="checkbox"/> Unexpired Refugee Travel Document (INS Form I-571)</li> <li><input type="checkbox"/> ID card for use of Resident Citizen in the U.S. (INS Form I-179)</li> <li><input type="checkbox"/> Acceptable Documents used for INS Form I-9</li> </ul> |
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**AGE**

- ☐ Birth Certificate
- ☐ Baptismal Certificate with Date of Birth
- ☐ DD-214/Report of Transfer or Discharge with DOB
- ☐ Driver's License
- ☐ IL State ID or other Federal, State, or Local Gov't issued ID
- ☐ Hospital Birth Record
- ☐ Passport
- ☐ Public Assistance/Social Service records
- ☐ School Records/Identification
- ☐ IDES UI printout (showing DOB)
- ☐ Court Records (showing DOB)
- ☐ Youth Only-Work Permits
- ☐ Workers Compensation Record with DOB
- ☐ Acceptable Documents for INS form I-9

**SELECTIVE SERVICE**

**MALES ONLY**

- ☐ Selective Service Verification ([www.sss.gov](http://www.sss.gov) printout)
- ☐ Selective Service Registration Card
- ☐ Selective Service Registration Record (form 3A)
- ☐ Stamped Post Office Receipt of Registration
- ☐ Locally Approved Selective Service Waiver

**SOCIAL SECURITY**

- ☐ Social Security Card (Must be signed)
- ☐ Social Security Printout
- ☐ Any other approved Social Security Document

**RESIDENCY**

- ☐ Driver's License/State I.D.
- ☐ Food Stamp Award Letter
- ☐ Homeless-DHS Letter
- ☐ Homeless-Shelter/Temp Residence Letter (on Letterhead)
- ☐ Housing Authority Verification
- ☐ Insurance Policy (Residence or Auto)
- ☐ Landlord Statement or Lease
- ☐ Letter from Social Service Agency or School (on Letterhead)
- ☐ Medicaid/Medicare Card
- ☐ Pay Stub
- ☐ Public Assistance Records (current)
- ☐ Current Utility Bill w/Customer's Name
- ☐ Applicant statement/self-attestation, in limited case:
- ☐ Other, Requires Partnership approval:

**CATEGORY 12**

**SCENARIO 1: REGULAR 1D ELIGIBILITY**

- ☐ Scenario 1: Applies to customers who are eligible under one of the regular 1D categories (1-8). Please use the regular 1D Eligibility Checklist for this scenario.

Participant Name:

Agency Name:

Career Connect State ID#:

This section of the Checklist should be used with the **Dislocated Worker Eligibility Guide for Category 12**. The Guide outlines the Career Connect WIOA Application selection options to successfully make a customer eligible under the QUEST Grant, Dislocated Worker Category 12. This includes the verification documentation that must be selected with each field in order to for eligibility to transmit correctly to IWDS.

**CATEGORY 12 CONT'D**

**SCENARIO 2: LAID-OFF DUE TO NATURAL DISASTER**

An individual temporarily or permanently laid off as a consequence of the disaster or emergency (e.g., flood, tornado, fire, COVID-19, etc.), including individuals who were fired or voluntarily left their job (quit, resigned) due to the disaster or emergency.

**Employment Status**

- ☐ Adult, Youth & DW Cat 6, 7, 8 or 12 (long-term unemployed)
- ☐ Signed & Dated WIOA Application

**Unemployment Comp. Verification**

- ☐ IDES UI Records **OR**
- ☐ Signed & Dated WIOA Application

**Dislocation Category Verification**

- ☐ Laid off, fired or voluntarily left job due to the disaster/emergency
- ☐ Applicant Statement
- ☐ Work History

**SCENARIO 3: SELF EMPLOYED AND UNEMPLOYED or SIGNIFICANTLY UNDER-EMPLOYED**

A self-employed individual who become unemployed or under significantly underemployed as a result of the emergency disaster, including significantly underemployed individuals who experienced a substantial change in the need or demand for, or the ability to deliver their product or service; we unable to find or retain adequate staffing, suppliers or vendors resulting in significant impact to operations; or experienced a substantial change in their costs or pricing because of the disaster/emergency.

**Employment Status**

- ☐ Adult, Youth, DW Cat 6, 7, 8 or 12 (long-term unemployed)
- ☐ Signed & Dated WIOA Application

**Unemployment Comp. Verification**

- ☐ UI Records **OR**
- ☐ Signed & Dated WIOA Application

**Dislocation Category Verification**

- ☐ Self-employed individual who became unemployed or significantly underemployed due to the disaster/emergency
- ☐ Applicant Statement
- ☐ Work History

**SCENARIO 4: MEETS STATE DEFINITION OF LONG TERM UNEMPLOYED**

A long-term unemployed individual defined by the State for Disaster Grants as an individual who No Work History Has not worked for an extended period of at least six weeks, has an intermittent, erratic or day-to-day employment work history (e.g., multiple terminations, employment gaps, temporary/seasonal/day labor employment, justice-touched history, etc.). Has an employment barrier (as defined by the State or Local Board) and is unemployed; or is underemployed, including working or needing to work multiple jobs or earnings less than \$15/hour

**Employment Status**

- ☐ Adult, Youth & DW Cat 6, 7, 8 or 12 (long-term unemployed)
- ☐ Signed & Dated WIOA Application

**Unemployment Comp. Verification**

- ☐ UI Records **OR**
- ☐ Applicant Statement **OR**
- ☐ Work History-Signed & Dated WIOA Application

**Dislocation Category Verification**

- ☐ No Work History—Applicant Statement or Work History
- ☐ Held/Holding temporary, seasonals, or day-to-day jobs—Applicant Statement or Work History
- ☐ Employment ended more than once—Applicant Statement or Work History
- ☐ Unemployed at least 6 od the past 12 weeks & has state or locally defined barrier—Applicant Statement or Work History
- ☐ Underemployed, works multiple jobs or earning less than \$15/hr—Applicant Statement or Work History

**Note:** Based on selected category, one document is required in each column, unless indicated.