

Skill Attainment (Younger Youth) Documentation Checklist

Review the following questions to determine if a participant has completed the appropriate portions of Skill Attainment for the WIA program.

Participants Name

SS#

Basic Skills

- | | | |
|--|------------------------------|-----------------------------|
| 1. Pre-test, transcripts or AIMS test scores | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Goal set on ISS | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Completed JT-036-2 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Post-test scores, if applicable | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Copy of GED, diploma or certificate listing skills achieved | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Input activity in VOS | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Work Readiness Skills

- | | | |
|--|------------------------------|-----------------------------|
| 1. Pre-test | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Goal set on ISS | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Completed JT-036-1 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Post-test scores | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Certificate listing skills achieved | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Input activity in VOS | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Occupational Skill

- | | | |
|--|------------------------------|-----------------------------|
| 1. OSA Presumptive Need | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Goal set on ISS | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Completed JT-036-3 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Post-test scores | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. Certificate listing skills achieved | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Input activity in VOS | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Any Other Considerations
