

South Central Workforce Council WIA YOUTH SKILLS OUTCOME FORM

1	SSN	<input type="text"/>	3	Sub Code	<input type="text"/>
2	Last Name	<input type="text"/>	4	ID Number	<input type="text"/>
	First Name	<input type="text"/>			
		MI			
GOAL					
5	Year	<input type="text"/>	6	Goal Number	<input type="text"/>
			7	Type of Goal	
			1	<input type="checkbox"/> Basic Skills	
			2	<input type="checkbox"/> Occupational Skills	
			3	<input type="checkbox"/> Work readiness Skills	
			8	Date Goal Set	<input type="text"/>
				Month Day Year	
9				10	
Signature of Local Area Representative				Date	

11	HOLD	FIRST HOLD
1	<input type="checkbox"/>	Yes
2	<input type="checkbox"/>	No
Hold Dates		
12	Start Date	<input type="text"/>
13	End Date	<input type="text"/>
		Month Day Year
14 Reason for Hold		

9	10
Signature of Local Area Representative	Date

11	HOLD	SECOND HOLD
1	<input type="checkbox"/>	Yes
2	<input type="checkbox"/>	No
Hold Dates		
12	Start Date	<input type="text"/>
13	End Date	<input type="text"/>
		Month Day Year
14 Reason for Hold		

9	10
Signature of Local Area Representative	Date

ATTAINMENT	16	Attained Date	17	Basic Skills (BSK) Hours	<input type="text"/>	BSK TOTAL
15	Type of Attainment	<input type="text"/>		Occupational Skills (OCS) Hours	<input type="text"/>	OCS TOTAL
		Month Day Year				
1	<input type="checkbox"/> Attained			CDS Hours	<input type="text"/>	Subtotal
2	<input type="checkbox"/> Set but not attained			WES Hours	<input type="text"/>	Subtotal
3	<input type="checkbox"/> Set but attainment pending (FOR STATE USE ONLY)			Work Readiness Skills (WRS) Hours	<input type="text"/>	WRS TOTAL

9	10
Signature of Local Area Representative	Date