

## WHAT TO SUBMIT FOR YOUR WIOA ELIGIBILITY APPOINTMENT

Please submit any and all documents as they apply to your situation. \*If you do not submit all your documents, **including the participant release and compliant grievance form** you will NOT continue through the eligibility process.

<b>1. Right to Work</b>	<ul style="list-style-type: none"> <li>● Passport ● Birth certificate</li> <li>● Alien registration ● Employment Authorization card</li> <li>● State driver's License/state ID card AND Social Security</li> </ul>
<b>2. Selective Service</b> (if applicable) <i>Male applicants born on or after January 1, 1960, are required to register with the Selective Service</i>	<ul style="list-style-type: none"> <li>● Selective Service Registration Printout or Card - Available at <a href="https://www.sss.gov/verify/">https://www.sss.gov/verify/</a></li> <li>● DD214</li> </ul>
<b>3. Household Income</b> (yourself and family members) All income for the past six (6) months from eligibility appointment date.  From _____ to _____	<ul style="list-style-type: none"> <li>● Pay Stubs ● Alimony Agreement ● Pension/Annuity statement</li> <li>● Unemployment Insurance documents and/or printouts</li> <li>● Compensation award letter</li> <li>● Employer statement/contact ● Housing authority verification</li> <li>● Social Security benefits ● Family/Business Financial records</li> <li>● W-2</li> </ul>
<b>4. Public Assistance</b> (if applicable) Have you received Public Assistance in the past six (6) months?	<ul style="list-style-type: none"> <li>● Food Stamps/CalFRESH</li> <li>● TANF</li> <li>● SSI</li> <li>● General Assistance</li> <li>● Refugee Cash Assistance</li> </ul>
<b>5. Family Size</b> Bring proof of your family size	<ul style="list-style-type: none"> <li>● Social Security for each family member</li> <li>● Birth Certificate ● Landlord Statement</li> <li>● Most recent tax return supported by IRS document</li> <li>● Public Assistance/social service agency records</li> </ul>
<b>6. Dislocated Worker/Laid Off</b> (if applicable)	<ul style="list-style-type: none"> <li>● Statement of layoff/separation notice AND</li> <li>● U.I. Benefit award letter or U.I. Benefit termination letter AND</li> <li>● U.I. Proof of Payment- Printout or Picture showing full name</li> </ul>
<b>7. Disability</b> (if applicable)	<ul style="list-style-type: none"> <li>● Letter from Drug or Alcohol Rehabilitation Agency</li> <li>● Statement from Physician, Psychiatrist, or Psychologist</li> <li>● Social Service Records ● Medical records</li> <li>● Social Security Administration Disability Records</li> </ul>
<b>8. Homelessness</b> (if applicable)	<ul style="list-style-type: none"> <li>● Written statement from shelter</li> <li>● Written Statement from an individual providing temporary assistance</li> <li>● Written Statement from Social Service agency</li> </ul>
<b>9. Veterans</b> (if applicable)	<ul style="list-style-type: none"> <li>● DD214</li> </ul>

For further questions, please contact Job Link Staff at 707-565-5550 or email [joblink@schsd.org](mailto:joblink@schsd.org)

**We look forward to working with you.**