



Subsidized Work Experience Authorization - FORWD DWG

Work Site: _____

The form dates listed below were accurate at the time of publication and may change without notice. See [Agency Forms](#) for the current forms.

Participant's Name: _____	ASSET Pin #: _____	EMI Office Use Only
<input type="checkbox"/> 1.) Subsidized Work Experience Authorization – FORWD DWG 01.01.26 (this form)		
<input type="checkbox"/> 2.) Form I-9 (Unexpired)		
<input type="checkbox"/> 3.) Form W-4 (Current Year)		
<input type="checkbox"/> 4.) Form WT-4 (Current Year)		
<input type="checkbox"/> 6.) Participant Handbook Receipt Paid Work Experience 01.01.26 (must review handbook with participant)		
<input type="checkbox"/> 7.) IEP Printout with required signatures (must show work experience service)		
<input type="checkbox"/> 8.) Participant Placement Agreement - Appendix A 08.27.25 (signed by Participant & Placement Site)		
<input type="checkbox"/> 9.) Placement Site Agreement - Appendix B – 08.27.25 (signed by Placement Site)		
<input type="checkbox"/> 10.) Employer of Record Agreement - Appendix D (copy of signed form on file)		
<input type="checkbox"/> 11.) Worksite Agreement (signed by Placement Site)		

Database and Other Requirements	EMI Office Use Only
<input type="checkbox"/> ASSET <input type="checkbox"/> Services – Disaster Relief Employment <input type="checkbox"/> Customer note for Subsidized Work Experience	
<input type="checkbox"/> ETO <input type="checkbox"/> W-4	
Reminders <ul style="list-style-type: none">Placement Site Orientation Checklist – Appendix C 08.27.25 (will be sent to worksite and a signed copy will be returned to you before the placement starts)Upload all documents into ASSETETO Employment Record (create upon start date)Work Experience Worksite Progress Report WIOA – 07.21.25 (completed no later than midpoint between start and projected end date)	

Participation Status: Approved Not approved, reason: _____

Authorization Form Submitted by:

Career Planner Name (please print)	Career Planner Signature	Date	Manager Initial	Date
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