



Application & Eligibility Authorization - WIOA Title I Adult

Applicant's Name: _____ ASSET PIN: _____

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

Application Required Documents (Date Submitted is the trigger for 30 days to determine Eligibility)		EMI Office Use Only
<input type="checkbox"/> 1.) Application & Eligibility Authorization – WIOA Title I Adult 01.01.26		
<input type="checkbox"/> 2.) Intake 05.01.25		
<input type="checkbox"/> 3.) Application DOL-Funded Program 01.01.26		
<input type="checkbox"/> 4.) Application Addendum – General (housed separate from file) 01.01.26		

Database Requirements (You have 10 days to enter into ASSET from the date of submission)	EMI Office Use Only
<input type="checkbox"/> ASSET	
<input type="checkbox"/> Customers (All entries need to align with the intake forms)	
<input type="checkbox"/> Programs (All entries need to align with the intake forms)	
<input type="checkbox"/> ETO – Participant entered in Intake Program	
NOTE – Retain Documents but do not turn into EMI for review until Eligibility Determination	

Application Status	Date of Submission	Date Entered into ASSET	
Eligibility Required Documents (in this order)			EMI Office Use Only
<input type="checkbox"/> 5.) Document Verification Checklist (copy of documents)	08.29.25		
<input type="checkbox"/> Proof of Date of Birth Documentation OR			
<input type="checkbox"/> Self-Attested to Date of Birth			
<input type="checkbox"/> Proof of Eligible to Work in US (1 item from column A OR 1 item from B and C of the I-9 list) OR			
<input type="checkbox"/> Eligibility to work documentation NOT collected during eligibility			
<input type="checkbox"/> Selective Service & Doc (if applicable) (housed separate from file)	07.07.21		
<input type="checkbox"/> Selective Service: Waiver Information and Request (if applicable)	05.09.22		
<input type="checkbox"/> Selective Service: Waiver-Approval Letter from EMI (if applicable)			
<input type="checkbox"/> Proof of Veteran Status Documentation (if applicable)			
<input type="checkbox"/> 6.) Income Worksheet DOL- Funded Program (copy of income documents if applicable)	10.01.24		
<input type="checkbox"/> 7.) Priority of Service WIOA Title I Adult Program Acknowledgement	01.01.26		
<input type="checkbox"/> 8.) Veterans & Eligible Spouses Priority of Service Acknowledgement (if applicable)	10.01.24		
<input type="checkbox"/> 9.) Basic Skills Screening Tool Form (DWD/Job Center of WI)	07.19		
<input type="checkbox"/> 10.) Third-Party Entity Verification Form (if applicable)	03.01.21		
<input type="checkbox"/> 11.) Limited English Proficiency (LEP) Refusal (if applicable)	08.09.25		

<input type="checkbox"/> 12.) EO Notice and Grievance Procedure Summary and Acknowledgement 10.01.24	
<input type="checkbox"/> 13.) Authorization to Release Information and Promotional Consent 10.01.24	

Database Requirement	EMI Office Use Only
<input type="checkbox"/> ASSET (Eligibility)	
<input type="checkbox"/> Services - Eligibility Determination	
<input type="checkbox"/> Employment (If previously employed, enter most recent employment)	
<input type="checkbox"/> Customer note for eligibility determination status	
<input type="checkbox"/> Customer note with date eligibility notification occurred	
<input type="checkbox"/> Customer note for Selective Service Waiver entered (if applicable)	
<input type="checkbox"/> Upload all documents into ASSET (once approved by EMI Staff)	

Eligibility Status: Approved Not approved, reason _____

(Submit Documents to EMI to include Application & Eligibility)

Career Planner Signature

Subrecipient

Date

Manager/
QA Initials

Date

EMI Office Use Only

EMI Staff Signature

Date

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