



Monthly Narrative Report & Success Story - WIOA

Section I. Contact/Contract Information

| | |
|-----------------------------------|---|
| Name of Organization | |
| Contract Number | |
| Grant Period of Performance | |
| Date Report Submitted | |
| Submitting Staff's Name and Title | |
| Program (check only one) | <input type="checkbox"/> AD <input type="checkbox"/> DW <input type="checkbox"/> ISY <input type="checkbox"/> OSY |

Section II. Summary of Grant Progress

| Contract Performance | | | | | |
|-----------------------------|---------------|--------------|--------|-----|----------------|
| Metric | Contract Goal | Current Goal | Actual | +/- | Actual for Mo. |
| Enrollments | | | | | |
| Training Enrollments – WIOA | | | | | |
| Credentials Earned – WIOA | | | | | |
| Placements | | | | | |
| Average Unsubsidized Wage | | | | | |

*If performance goals are not on track, issues, challenges (such as under-enrollment) encountered, or barriers to be addressed and strategies being implemented.

Section III. Complete the following table using only the prior months data

| Participant Data (Per ETO when available) | |
|--|--|
| Number of participants enrolled | |
| % compliant for 30 calendar day contact per 1.7 Customer Service Standards | |
| Number of participants started training | |
| Number of participants started work experience | |
| Number of participants completed training | |

| | |
|--|--|
| Number of participants completed work experience | |
| Number of industry recognized credentials received | |
| Number of measurable skill gains attained | |
| Number of participants placed in unsubsidized employment | |
| Number of participants exited from program | |
| Number of participants in follow-up services | |
| Number of participants per Career Planner Caseload* | |

**If number of participants per Career Planner is above 75, what processes are you taking to reduce this to no more than 75?*

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Section IV. Quality Assurance Describe efforts to use data, evidence, and evaluation findings to make improvements to programs and strategies.

| | |
|---|--|
| File Reviews | |
| PINS of 5 file reviews completed | |
| Number of unique/unduplicated staff who had files reviewed | |
| List the top 3 most common errors identified & action taken | |
| 1. | |
| 2. | |
| 3. | |

Attach completed file review checklists/tool.

| Eligibility & Enrollment Packets Completed by New Staff (employed in current role for 6 mos. or less) | | | | | | | | |
|--|------------|---------------|------------------------------------|--------------------------------------|-----------------|-----------------------------------|-------------------------------------|-----------------|
| Staff Name | Start Date | 6 mos. Anniv. | # of Eligibility Packets Completed | # of Eligibility Packets with Errors | Success Rate %* | # of Enrollment Packets Completed | # of Enrollment Packets with Errors | Success Rate %* |
| | | | | | | | | |
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|--|--|--|--|--|--|--|--|--|

*If at 6 mos. the Success Rate is at or below 85% what corrective action is being taken?

Section V. Corrective Actions as a Result of Monitoring (If applicable)

Section VI. Success Story Must include details from how the participant learned of the program, barriers overcome, and current situation or outcome.

Section VII. Key Issues and/or Technical Assistance Needs The purpose of this section is to describe any grant challenges and related technical assistance needs.

(The short report ends here. Proceed to the next page to complete long report only as necessary.)

Monthly Narrative Report & Success Story (Long Report Addendum)

Section VIII. Participant Satisfaction Survey

Is the EMI survey being used? Yes No

If No, has the alternate survey been approved (partners must provide approval documentation upon request)? Yes No

When will the satisfaction survey be conducted?

How many survey attempts were made?

What was the response rate?

What did participants respond to the most positively?

What did the participants respond to the least positively (The lowest rated item – even if the rating is positive)?

Describe how the results were shared with program staff.

Describe any changes made as a result of the survey.

What, if any satisfaction information would you like to share?

Section IX. Development and Implementation of Effective Practices and Program Model Strategies. Describe how the program model is achieving the program's intended purpose and the goals/objectives and activities outlined in the Scope of Work.

Section X. Status Update on Match and/or Leveraged Resources. Provide updates on the status of all match and/or leveraged resources. Identify any funding needs and sources and report the cumulative amount of any match and/or leveraged resources provided by the grantee and partners each quarter.

Section XI. Status Update on Employer Engagement Strategies. Share information related to promising practices and strategies that have strengthened existing employer partnerships and any efforts to develop new employer partnerships.

Section XII. What strategies are you using to monitor your progress to place participants into employment? Describe tools, benchmarks, regular check-ins, or tracking systems you rely on.

Section XIII. What type of follow up exit strategies are you using to monitor your progress to place participants into employment and post-secondary education upon exit? Examples may include mentioning surveys, alumni tracking systems, follow-up interviews, or any ongoing support services you offer.

Section XIV. Significant Activities and Accomplishments. Provide additional, in-depth information regarding promising approaches, new processes, and/or lessons learned that are not addressed elsewhere in the report.

Section XV. Youth Program Elements. For ISY and OSY only, provide a qualitative analysis of how the following 14 Youth Program Elements are used to deliver comprehensive services to youth program participants. Please highlight any successes or challenges experienced in offering these services. For each challenge, identify a strategy being used to overcome the concern and if the strategy has been successful.

| Youth Program Element | Provision Description & Challenges &/or Difficulties |
|--|---|
| Tutoring, study skills training, instruction, & evidence-based dropout prevention and recovery strategies | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Alternative secondary school services or high school dropout recovery services | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Paid & unpaid work experience | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Occupational skills training | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|--|--|
| | <ul style="list-style-type: none"> Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Education offered concurrently with and in the same context as workforce preparation and training | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> Was last quarter's strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Leadership development opportunities | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> Was last quarter's strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Supportive services | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> Was last quarter's strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Adult mentoring | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> Was last quarter's strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Comprehensive guidance & counseling | Successes: |
| | Challenges: |
| | Strategy: <ul style="list-style-type: none"> Was last quarter's strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy Describe strategy to overcome challenges: |
| Financial literacy education | Successes: |
| | Challenges: |

| | |
|--|---|
| | <p>Strategy:</p> <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy <p>Describe strategy to overcome challenges:</p> |
| <p>Entrepreneurial skills training</p> | <p>Successes:</p> |
| | <p>Challenges:</p> |
| | <p>Strategy:</p> <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy <p>Describe strategy to overcome challenges:</p> |
| <p>Career Awareness, Career Exploration, & Career Counseling;</p> | <p>Successes:</p> |
| | <p>Challenges:</p> |
| | <p>Strategy:</p> <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy <p>Describe strategy to overcome challenges:</p> |
| <p>Postsecondary preparation & transition activities</p> | <p>Successes:</p> |
| | <p>Challenges:</p> |
| | <p>Strategy:</p> <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy <p>Describe strategy to overcome challenges:</p> |
| <p>Follow-up services</p> | <p>Successes:</p> |
| | <p>Challenges:</p> |
| | <p>Strategy:</p> <ul style="list-style-type: none"> • Was last quarter’s strategy partially successful in overcoming challenges <input type="checkbox"/> Yes <input type="checkbox"/> No • Next Steps: <input type="checkbox"/> Continue with the current strategy <input type="checkbox"/> Try new strategy <p>Describe strategy to overcome challenges:</p> |