Application & Eligibility Authorization - WIOA Title I Dislocated Worker

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**
☐ 1.) Application & Eligibility Authorization – WIOA Title I Dislocated Worker 01.27.26	
☐ 2.) Intake 01.26.26	
☐ 3.) Application – DOL-Funded Program 01.26.26	
☐ 4.) Application Addendum – WIOA Title I Dislocated Worker 01.01.26	
☐ 5.) Application Addendum – General 01.01.26 (housed separate from file)	
Database Requirements (You have 10 days to enter into ASSET from the date of submission)	**EMI Office Use Only**
☐ ASSET	
☐ Customers (All entries need to align with the intake forms)	
☐ Programs (All entries need to align with the intake forms)	
☐ 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**
☐ 6.) Document Verification Checklist (copy of documents) – 08.29.25	
☐ Proof of Date of Birth Documentation OR	
☐ Self-Attested to Date of Birth	
☐ Proof of Eligible to Work in US (1item from column A OR 1 item from B & C of the I-9 list) OR	
☐ Eligibility to work documentation NOT collected during eligibility	
☐ Selective Service & Supporting Docs (if applicable) (housed separate from file) 07.07.21	
☐ Selective Service: Waiver Information and Request (if applicable) – 05.09.22	
☐ Selective Service: Waiver-Approval Letter from EMI (if applicable)	
☐ Proof of Veteran Status Documentation (if applicable)	
☐ Proof of Dislocated Worker Eligibility (if applicable)	
☐ 7.) Income Worksheet DOL- Funded Program (copy of income documents if applicable) 01.01.26	
☐ 8.) Veterans & Eligible Spouses Priority of Service Acknowledgement (if applicable) – 10.01.24	
☐ 9.) Basic Skills Screening Tool Form (DWD/Job Center of WI) 07.19	

☐ 10.) Third-Party Entity Verification Form (if applicable) 03.01.21	
☐ 11.) Accompanying Adult Interpreter Request (if applicable) 08.28.26	
☐ 12.) EO Notice and Grievance Procedure Summary and Acknowledgement Form 10.01.24	
☐ 13.) Authorization to Release Information and Promotional Consent Form 10.01.24	
Database Requirement	**EMI Office Use Only**
☐ ASSET (Eligibility)	
☐ Services - Eligibility Determination	
☐ Employment (If previously employed, enter most recent employment)	
☐ Customer note for eligibility determination status	
☐ Customer note with date eligibility notification occurred	
☐ Customer note for Selective Service Waiver entered (if applicable)	
☐ Upload all documents into ASSET (once reviewed by EMI Staff)	

Eligibly Status (Submit Documents to EMI to include Application & Eligibility)			
Eligibility Status (Check one) ☐ Approved ☐ Not approved	Reason		
Signatures			
Subrecipient (Check one) ☐DWFS ☐EQUUS			

Career Planner Name (Print)		Signature		Date	
Manager/QA Name (Print)		Signature		Date	
EMI Office Use Only					
EMI Staff Name		Signature		Date	

Form Date: 08.28.26

Employ Milwaukee is an Equal Opportunity employer and service provider. If you need this information or printed material in an alternate format, or in different language at no cost to you, please contact us at (414)-270-1700. Deaf, hard of hearing, or speech impaired callers can contact us through Wisconsin Relay Service at 7-1-1.