

LOCAL MOU TEMPLATE

MEMORANDUM OF UNDERSTANDING

BETWEEN

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AND

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**Individual designated by the Local Board
 Chair to lead MOU negotiations**

Email address

**Impartial individual designated by the Local
 Board Chair to lead annual budget
 negotiations**

Email address

1. PARTIES TO MOU (SEC. 121 (C)(1)) (Governor’s Guidelines, Section 1, Item (b))

- *List the required partner providing services in the local area*
- *List the partner agency providing services of each required partner*

• Note: Please ensure abbreviations and acronyms are accurate and up to date for each required partner and partner agency.

PARTIES TO MOU	TYPED NAME
Local Workforce Innovation Board Chair	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
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Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	
Chief Elected Official	

REQUIRED PARTNERS AS PARTIES TO MOU	ENTITY <u>(NOT NEGOTIATOR)</u> ADMINISTERING PROGRAM TYPED NAME ¹
Title I: Adult, Dislocated Worker, Youth	
Title II: Adult Education and Literacy	
Title III: Employment Programs under Wagner-Peyser	
Title IV: Rehabilitation Services	
Perkins/Post-secondary Career & Technical Education	
Unemployment Insurance	
Job Counseling, Training, Placement Services for Veterans	
Trade Readjustment Assistance (TRA)	
Trade Adjustment Assistance (TAA)	
Migrant and Seasonal Farmworkers	
Community Services Block Grant (CSBG)	
Senior Community Services Employment Program (SCSEP)	
TANF	
Second Chance	
OTHER REQUIRED PROGRAMS OFFERED IN THIS LOCAL AREA AS PARTIES TO MOU	IF MARKED YES, LIST THE ENTITY ADMINISTERING PROGRAM
National Farmworker Jobs Program	<input type="checkbox"/> Yes <input type="checkbox"/> No
Housing and Urban Development Employment and Training Activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
Job Corps	<input type="checkbox"/> Yes <input type="checkbox"/> No
Youth Build	<input type="checkbox"/> Yes <input type="checkbox"/> No
ADDITIONAL PARTNERS AS PARTIES TO MOU	ENTITY ADMINISTERING PROGRAM

2. DURATION OF AGREEMENT (Sec. 121(c)(2)(v)) (Governor’s Guidelines, Section 1, Item 10) (§ 678.500(b)(5)) ~~PURPOSE AND SCOPE OF MOU~~

- Provide the effective date of the MOU (not the MOU Amendment)
- List the agreed upon expiration date (cannot exceed three years)
- Confirm the purpose of the umbrella MOU
- Describe the general purpose and scope of the umbrella MOU

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3. VISION FOR THE SYSTEM (Governor’s Guidelines, Section 1, Item 1(b))

¹ Insert only the name(s) of the program(s) in this space. The names of individual negotiators are not needed.

- Describe the shared vision *for the system and the role* ~~and commitment~~ of the local board and required partners to a high-quality local workforce delivery system (vision must be consistent with Federal, State, regional, and local planning priorities, as well as the Governor’s Guidelines)

- Outline the general steps to achieve the shared vision, including the aspects of the vision currently in place and a timeline of steps to implement aspects not currently in place within the current term of the MOU.

Note: It is acceptable to describe activities that may take multiple years within the term of this MOU to work towards the vision.

- ~~• Describe which aspects of the vision are currently in place~~
- Outline the steps to be taken and the general timeline for how required partners will implement any aspects of the vision that are not yet in place

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4. SERVICE INTEGRATION (Illinois Service Integration: Overview and Self-Assessment Guide)

- Identify ~~the steps being taken to implement~~ steps that required partners will take within the term of this MOU to implement the *strategies* described in the Service Integration Action Plan. ~~to develop the local one-stop system’s service integration action plan within the term of this MOU.~~

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4.5. MOU DEVELOPMENT (Governor’s Guidelines, Section 1, Items 3-8)

- Fully describe the process and efforts of the Local Workforce Innovation Board and required partners to negotiate the MOU
- ~~Confirm whether all required partners participated in negotiations~~
- ~~Explain the process to be used if consensus on the MOU is not reached by partners~~
- ~~Describe how you identified which service locations were selected~~
- To demonstrate the engagement of required partners and the Local Workforce Innovation Board, describe the process to review both draft and final commitments to:
 - service delivery methods,
 - service locations, and
 - shared costs.

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5.6. NAME AND LOCATION OF ALL SERVICE LOCATIONS ~~COMPREHENSIVE ONE-STOP CENTER(S)~~ (Governor’s Guidelines, Section 1, Item 8(d)) (§ 678.310, § 678.315 and § 678.320)

- Provide the name and address of the comprehensive one-stop center(s) in the local service delivery system
- Where applicable Clearly identify and list ~~the any~~ designated affiliated sites and specialized centers, clearly indicating which type of site has been designated.²
- ~~and/or specialized centers~~
- ~~Define any other operating titles that the local area assigns to each center~~

Note: The information provided in this section must match the Illinois Workforce Development System (IWDS) and Illinois workNet listings.

Comprehensive One-Stop Center(s)

Designated Affiliate Sites

Designated Specialized Centers

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6.7. DESCRIPTION OF COMPREHENSIVE ONE-STOP SERVICES (Sec. 121 (c)(2)(i)) (Governor’s Guidelines, Section 1, Items 8(e)-(g)) (§ 678.500(b)(1))

- ~~Complete a local service matrix provided as Appendix F. This appendix must be updated annually. (the State-level service matrix provided in Appendix F is intended to serve as a reference for local negotiations) illustrating local methods of service delivery, which includes:~~
 - ~~Career services to be provided by each required partner in each comprehensive one-stop center~~
 - ~~Other programs and activities to be provided by each required partner~~
- Method of delivery for each service provided by each required partner (e.g., staff physically present, cross-trained staff, direct linkage technology)
 - ~~_____~~
- In the spaces provided below:
 - ~~In the introductory paragraph of this section, describe the required partners’ combined commitment to integration and “manner in which the services will be coordinated and delivered through the system” (§ 678.500(b)(1))~~
 - ~~In the spaces below designated for each required partner, describe each partner’s commitment to coordinated service delivery and explain how the services provided and the method of service delivery (as documented in the local service matrices) illustrate that commitment~~
 - ~~For each required partner below, describe the location(s) at which services of each required partner will be accessible~~
 - ~~For each partner, describe how the committed number of FTEs will allow services to be made available during all business hours, including capacity or training of onsite staff. use~~

² All designated affiliate sites and specialized centers must be included in the Infrastructure Funding Agreement.

of contractors and use of direct linkage³ (as described in each partner's corresponding Direct Linkage Checklist). If there are multiple providers of a program's services, please describe each provider's method of service delivery.

- o Please describe how each partner will ensure services are provided in real time in all service locations during all regular business hours given the number of FTEs committed services will be timely and coordinated at each designated service site in the local area (i.e. comprehensive one stop centers, affiliate sites, specialized centers, connection sites).

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Title I (Adult, Dislocated Worker and Youth) – []

Title II (Adult Education and Literacy) – []

Title III (Employment Services under Wager-Peyser) – []

Title IV (Rehabilitation Services) – []

Perkins/Post-Secondary Career and Technical Education – []

IDES/Unemployment Insurance (UI) – []

IDES/Job Counseling, Training and Placement Services for Veterans – []

IDES/Trade Readjustment Assistance – []

Trade Adjustment Assistance (TAA) – []

IDES/ Migrant & Seasonal Farmworkers (MSFW) – []

National Farmworker Jobs Program (NFJP) – []

Community Service Block Grant (CSBG) – []

Senior Community Services Employment Program (SCSEP) – []

DHS/TANF – []

IDOC Second Chance – []

HUD Employment and Training Activities – []

Job Corps – []

YouthBuild – []

³ Be as specific as possible when describing services being provided via direct linkage. Descriptions using vague terminology, such as describing services being “provided through technology” will not be accepted as a complete and compliant description of direct linkage.

8. PROGRAMMATIC ACCESSIBILITY (Sec. 121 (c)(2)(iv)) (§ 678.500(b)(4))

- Describe features or methods to ensure the comprehensive one-stop center and any designated affiliate sites, or specialized centers provide access to all required career services in the most inclusive and appropriate settings for each individual participant, including assuring that individuals with barriers to employment, such as individuals with disabilities, can access available services (§678.500(b)(4))

Note: Provide as much specificity as possible for each partner program

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9. PHYSICAL ACCESSIBILITY (Sec. 121 (c)(2)(iv)) (§678.500(b)(4))

Describe how—through specific examples and commitments —required partners will assure the physical accessibility of the comprehensive one-stop center(s) and any designated affiliate sites or specialized centers, including the following:

- The designated service location layout supports a culture of inclusiveness
- The location is recognizable in a high-traffic area
- Access to public transportation is available within reasonable walking distance
- The location of a dedicated parking lot, with parking lot spaces closest to the door designated for individuals with disabilities

Please affirm that the local one-stop system will comply with all federal and State physical inclusiveness and accessibility requirements, including the Americans with Disabilities Act (ADA) of 1990, Section 188 of WIOA, the Illinois Accessibility Code, the most recent ADA standards for Accessible Design and the Uniform Federal Accessibility Standards, and all other applicable statutory and regulatory requirements.

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7.10. PROCUREMENT OF ONE-STOP OPERATOR (Governor’s Guidelines, Section 1, Item 8(j)) (§ 678.600-635)

2. Name the procured one-stop operator and identify the agreed upon one-stop operator model used for each one-stop center in the local area. The operator may be a single entity (public, private, or nonprofit) or a consortium of entities (if the consortium of entities is composed of one-stop partners, it must include a minimum of three of the one-stop partners).
3. Describe the functions and scope of work of the one-stop operator as defined in the Request for Proposal or as planned for the competitive procurement process.
4. Assure that the one-stop operator will not perform any of the proscribed functions (§ 678.620(b)) to avoid a conflict of interest.

By clicking on the boxes below, required partners in the local area affirm that the one-stop operator will not perform the following proscribed functions:

- convene system stakeholders to assist in the development of the local plan
- prepare and submit local plans (as required under sec. 107 of WIOA)
- be responsible for oversight of itself
- manage or significantly participate in the competitive selection process for one-stop operators
- select or terminate one-stop operators, career services, and youth providers
- negotiate local performance accountability measures
- develop and submit budget for activities of the Local WDB in the local area.

8-11. REFERRAL PROCESS (Sec. 121 (c)(2)(iii)) (Governor’s Guidelines, Section 1, Item8(i)) (§678.500(b)(3)-(4))

- In the spaces provided below, address all of the following:
 - Identify the method of making referrals for each partner
 - Identify the method of tracking referrals.
 - In the introductory paragraph of this section, describe the local one-stop operator’s role and responsibilities for coordinating referrals among required partners (§678.500(b)(3)).
 - ~~In the spaces below designated for each required partner, each partner must list the other programs to which it will make referrals and the method(s) of referral to each partner; for example, in the Title I box, Title I will list all other programs to which it will refer clients and the method(s) of referral for each~~ Please complete the Referral System matrix included on page 13 of this MOU Template.

~~**Title I (Adult, Dislocated Worker and Youth)**~~

~~**Title II (Adult Education and Family Literacy)**~~

~~**Title III (Employment Services under Wager-Peyser)**~~

~~**Title IV (Rehabilitation Services)**~~

~~**Perkins/Post-Secondary Career and Technical Education**~~

~~IDES/Unemployment Insurance (UI)~~ | |

~~IDES/Job Counseling, Training and Placement Services for Veterans~~ | |

~~IDES/Trade Readjustment Assistance~~ | |

~~Trade Adjustment Assistance (TAA)~~ | |

~~IDES/ Migrant & Seasonal Farmworkers (MSFW)~~ | |

~~National Farmworker Jobs Program (NFJP)~~ | |

~~Community Service Block Grant (CSBG)~~ | |

~~Senior Community Services Employment Program (SCSEP)~~ | |

~~DHS/TANF~~ | |

~~IDOC Second Chance~~ | |

~~HUD Employment and Training Activities~~ | |

~~Job Corps~~ | |

~~YouthBuild~~ | |

9.12. SHARED DATA AND INFORMATION (Governor's Guidelines, Section I, Item 8(k))

- Describe how core program partners will share data and information and will collaborate to assure that all common primary indicators of performance for the core program partners in the local area will be collectively achieved
- ~~Cite examples of how service integration is leading to greater customer access to services and appropriate customer information being shared among partners. Outline the service integration strategies and steps that will be taken to implement those strategies for simplifying service delivery and customers' access to services.~~
- Provide assurances that participants' Personally Identifiable Information (PII) will be kept confidential.

NOTE: Partners are encouraged to seek clarification from their respective core partner state agency and/or data staff

Please affirm that notwithstanding any other provisions in this MOU, only partners who have executed a separate data sharing agreement with IDES will have access to wage records and other confidential IDES data.

Please affirm that participants' Personally Identifiable Information (PII) will be kept confidential.

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10.13. COSTS AND COST SHARING OF SERVICES (Sec. 121 (c)(2)(ii) (Governor’s Guidelines, Section 1, Item 1(c); Section 2) ((§ 678.510(a), §678.755 and §678.760)

~~Using Please complete the Infrastructure Funding Agreement (fillable spreadsheet) and submit annually with the MOU or MOU Amendment.~~

- ~~1. Complete the FTE Calculations tab of the Infrastructure Funding Agreement for each comprehensive one stop center, as well as for each affiliate or specialized center designated by the local workforce board and at which required partners agree to provide services:
 - ~~a. For partners whose staff will be cross trained to provide services of another partner’s program:
 - ~~i. Identify the FTE commitments being made to provide services on behalf of another required partner at the comprehensive one stop center or affiliate or specialized center.~~
 - ~~ii. Enter that FTE commitment into the “FTE Calculations” tab specific to that service location.~~~~
 - ~~b. For partners whose services are being provided by another partner’s cross trained staff:
 - ~~i. Identify an FTE commitment that corresponds with the required partner providing the services on your behalf.~~
 - ~~ii. Enter that FTE commitment into the “FTE Calculations” tab specific to that service location.~~~~~~
- ~~2. Complete a “Cost Allocation” tab for each service location. Note that infrastructure costs will be completed for each service location, including comprehensive one stop centers and any affiliated or specialized center designated by the local workforce board.
 - ~~a. For each service location, identify the agreed upon amount that each required partner will contribute toward infrastructure costs to operate that service location. (Infrastructure costs must be negotiated on an annual basis.)~~
 - ~~b. For the entire local service delivery system, specify the agreed upon amount of the shared local system costs that each required partner will contribute. (Shared local system costs must be negotiated on an annual basis.)~~
 - ~~c. In the Shared Delivery System Costs section of each “Center” tab, identify the cost of the one stop operator in the designated line item.
 - ~~i. If required partners have selected either a single entity or a consortium to perform one stop operator functions, then enter the cost of the competitively procured one stop operator in the designated cell of Column B and each partner’s share of the total cost in that row.~~
 - ~~ii. If required partners have opted not to share the cost of the one stop operator and instead will provide in kind personnel to perform the one stop operator functions, then enter the total agreed upon value of the in kind personnel in the designated line item of Column B, and each partner’s share of the total cost in the row for “less in kind staffing.”~~
 - ~~iii. Explain the in kind staffing contribution in the “Notes” section of the spreadsheet (which must align with Section 12 of the MOU narrative).~~
 - ~~iv. Name the one stop operator model (consortium, single entity or other). If the operator model is a consortium, provide the names of the entities that comprise the consortium.~~~~~~
- ~~3. Approve the agreed upon, annual Infrastructure Funding Agreement through the MOU amendment procedures described in this MOU, Section 13, including signatures.~~

In the space below and following the Governor's Guidelines – Revision 3, provide the following narrative:

1. Affirm in the narrative that required partners negotiated infrastructure and shared local service delivery system costs specific to the applicable program year for both comprehensive one-stop centers and any affiliate or specialized centers designated by the local workforce board.
2. Acknowledge that the agreements are made contingent on the availability of Federal funding for each required program
 1. Clearly identify in the narrative the time period for which the Infrastructure Funding Agreement is effective; e.g., July 1, 2019 through June 30, 2020.
 2. Specify in the narrative whether the budget submitted represents an interim or final budget agreement.
 3. Describe in the narrative the agreed-upon method that each partner will contribute as a proportionate share of costs to support the services and operations of the local service delivery system.
 4. Affirm in the narrative that each required partner meets the minimum FTE commitment of .25 FTEs in each comprehensive one-stop center and each designated affiliate site.
 - a. ~~If all A-required partners may agree for a partner to commit to less than .25 FTEs with approval of all local partners and the local board. Upon local agreement, then the local board must may then submit a~~ If a required partner commits to less than .25 FTEs in any service location, then a waiver must be submitted using the waiver request form included in the Report of Outcomes template (Appendix G of the Governor's Guidelines – Revision 3).
 5. Describe in the narrative whether and which staff will be cross-trained to provide services on behalf of another required partner.
 - a. For each required partner providing cross-trained staff to deliver services on behalf of another partner, confirm how the contributing partner's shared cost allocations will be reduced in correlation with the number of FTEs that will be cross-trained to provide another partner's programs.
- ~~6. Please describe the invoicing process and any special deadlines for determining actual costs for each partner included in this MOU (Please note that CSBG's grant cycle requires the partner to pay all actual costs by 12/31 and by 6/30 each program year).~~
- ~~6. Complete an "Outcome Report for Annual Budget Negotiations for PY19 (Appendix Item G of the Governor's Guidelines – Revision 3)" and submit the completed form with a draft one-stop operating budget to the individual designated by the Governor by April 15, 2019.~~
- ~~7. Submit the following to the individual designated by the Governor by June 30, 2019:~~
 - a. ~~Amended Section 6~~
 - b. ~~Amended Section 12~~
 - c. ~~Any other sections of the MOU that are amended~~
 - d. ~~One-stop operating budget~~
 - e. ~~All required partner signatures~~
 - f. ~~Cover Page for Submittal of MOU Amendments and Annual One-Stop Operating Budgets (Appendix Item H of the Governor's Guidelines – Revision 3)~~
- 8.7. Using the table provided below, include the following additional financial information for each required program partner:

- i. Each required program partner's total cash contribution toward its proportionate share of infrastructure and local service delivery system costs for PY 2019; and
- ii. The dollar amount of a 10% variance from each partner's total cash contribution in the case that actual costs exceed budgeted costs.

		Partner's Total Cash Contribution	Dollar Amount of 10% Variance (if applicable)	Partner's Total Cash Contribution plus 10% Variance (if applicable)
Commerce	Title IB - Adult, Youth, & Dis. Workers			_____
	TAA			_____
	CSBG			_____
IDES	Title III - Wagner-Peyser			_____
	Title III - MSFW			_____
	Veterans Services			_____
	UI Comp Programs			_____
ICCB	TRA			_____
	Title II - Adult Education			_____
DHS	Career & Tech Ed - Perkins			_____
	Title IV - Vocational Rehab			_____
Aging	TANF - DHS			_____
DOC	SCSEP			_____
	Second Chance			_____
	HUD			_____
	Title IC - Job Corp			_____
	Title ID - National Farmworkers			_____
	Title ID - YouthBuild			_____
	Other 1			_____
	Other 2			_____
	Other 3			_____
	Other 4			_____

11.14. AMENDMENT PROCEDURES AND RENEWAL PROVISIONS (Sec. 121 (c)(2)(v))
(Governor's Guidelines, Sections 5 & 6-5) (§ 678.500(b)(5)(6))

~~Describe amendment procedures, including annual negotiation of infrastructure and shared system costs to address the following:~~

- ~~• The amount of notice a partner agency must provide the other partners to make amendments~~
- ~~• The procedures for informing other partners of the pending amendment~~
- ~~• The circumstances under which the local partners agree the MOU must be amended~~
- ~~• The procedures for amending the MOU to incorporate the final approved budget on an annual basis~~
- ~~• The procedures for terminating the MOU or a specific partner's participation in the MOU~~
- ~~• The process for resolving any disputes that evolve after the agreement is reached~~

~~Provide Describe the process and timeline for annual negotiations of shared costs in the Infrastructure Funding Agreement and the procedures for amending the MOU annually or another any time substantial changes have occurred before the MOU's three-year expiration date.~~

~~NOTE: Ensure the MOU reflects the most recent date as amendments and renewals are approved~~

~~NOTE: Ensure the MOU reflects the most recent date as amendments are approved~~

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12. RENEWAL PROVISIONS (Sec. 121(c)(2)(v)) (Governor's Guidelines, Section 1, Item 10) (§ 678.500(b)(6))

~~Provide the process and timeline in which MOU will be reviewed, including:~~

- ~~• Explain the renewal process, which must occur at a minimum of every three years~~
- ~~• Describe the required renewal process if substantial changes occur before the MOU's three year expiration date~~

~~NOTE: Ensure the MOU reflects the most recent date as renewals are approved~~

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13.15. ADDITIONAL LOCAL PROVISIONS (OPTIONAL) (Sec. 121(c)(2)(B)) (§678.500(c))

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14.16. ADDITIONAL PARTNERS (Sec. 121 (b)(2))

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15.17. AUTHORITY AND SIGNATURES (Governor's Guidelines, Section 1, Item 8(p); Section 5, Items 28-29) (§678.500(d))

- *Include a statement that the individuals signing the MOU have authority to represent and sign on behalf of their program under WIOA*

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16.18. ATTACHMENTS

LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

INCLUDES:

- CAREER SERVICES AVAILABLE THROUGH THE LOCAL COMPREHENSIVE ONE-STOP CENTER(S)
- OTHER PROGRAMS AND ACTIVITIES AVAILABLE THROUGH THE LOCAL COMPREHENSIVE ONE-STOP CENTER(S)
- SERVICE DELIVERY METHOD THROUGH THE LOCAL COMPREHENSIVE ONE-STOP CENTER(S)

IDES NON-DISCLOSURE AGREEMENT

ONE-STOP OPERATING BUDGET SPREADSHEET FOR PY19

OTHER | |

TEMPLATE
REFERRAL SYSTEM MATRIX

<u>REFERRAL BETWEEN PARTNERS</u>																					
<u>Instructions: Please indicate all partners to which each partner will make referrals</u>																					
REQUIRED PARTNERS	Title I: Adult Dislocated	Title II: Adult Ed.	Title III: W-P	Title IV: Rehab. Services	Post-secondary CTE under Perkins	UI	Veterans Services	TRA	TAA	MSFW	NFJP	CSBG	SCSEP	TANF	Second Chance	HUD	Job Corps	YouthBuild	Other (specify)	Other (specify)	Other (specify)
Title I: Adult, Dislocated Worker, Youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title II: Adult Education and Literacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title III: Employment Programs under Wagner-Peyser	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title IV: Rehabilitation Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post-secondary Career and Technical Education under Perkins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployment Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Counseling, Training and Placement Services for Veterans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trade Readjustment Allowance (TRA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trade Adjustment Assistance (TAA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Migrant and Seasonal Farmworkers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National Farmworker Jobs Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TEMPLATE
REFERRAL SYSTEM MATRIX

<u>REFERRAL BETWEEN PARTNERS</u>																					
<u>Instructions: Please indicate all partners to which each partner will make referrals</u>																					
REQUIRED PARTNERS	Title I: Adult Dislocated	Title II: Adult Ed.	Title III: W-P	Title IV: Rehab. Services	Post-secondary CTE under Perkins	UI	Veterans Services	TRA	TAA	MSFW	NFJP	CSBG	SCSEP	TANF	Second Chance	HUD	Job Corps	YouthBuild	Other (specify)	Other (specify)	Other (specify)
Community Services Block Grant (CSBG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Senior Community Services Employment Program (SCSEP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TANF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Second Chance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Housing and Urban Development Employment and Training Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Job Corps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
YouthBuild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TEMPLATE
LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

CAREER SERVICES AVAILABLE THROUGH THE LOCAL COMPREHENSIVE ONE-STOP CENTER(S)

BASIC CAREER SERVICES												
REQUIRED PARTNERS	Eligibility for Title IB	Outreach, intake, orientation	Initial Skills Assessment	Labor exchange services, including job search and placement assistance	Referral and coordination with other programs	Workforce and labor market information and statistics	Performance and cost information on providers of education, training and workforce services	Performance info for the local area as a whole	Information on the availability of supportive services	Information and meaningful assistance with UI claims	Assistance establishing eligibility for financial aid for non-WIOA training and education	
Title I: Adult, Dislocated Worker, Youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Title II: Adult Education and Literacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Title III: Employment Programs under Wagner-Peyser	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Title IV: Rehabilitation Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Post-secondary Career and Technical Education under Perkins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Unemployment Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Job Counseling, Training and Placement Services for Veterans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Trade Readjustment Allowance (TRA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Trade Adjustment Assistance (TAA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Migrant and Seasonal Farmworkers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
National Farmworker Jobs Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Community Services Block Grant (CSBG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Senior Community Services Employment Program (SCSEP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TANF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Second Chance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Housing and Urban Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

TEMPLATE
LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

BASIC CAREER SERVICES												
REQUIRED PARTNERS	Eligibility for Title IB	Outreach, intake, orientation	Initial Skills Assessment	Labor exchange services, including job search and placement assistance	Referral and coordination with other programs	Workforce and labor market information and statistics	Performance and cost information on providers of education, training and workforce services	Performance info for the local area as a whole	Information on the availability of supportive services	Information and meaningful assistance with UI claims	Assistance establishing eligibility for financial aid for non-WIOA training and education	
Employment and Training Activities												
Job Corps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
YouthBuild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

INDIVIDUALIZED AND FOLLOW-UP CAREER SERVICES													
REQUIRED PARTNERS	Comprehensive and specialized assessments	Development of an individual employment plan	Group counseling	Individual counseling	Career planning	Short-term pre-vocational services	Internships and work experience	Workforce preparation activities	Financial literacy services	Out-of-area job search assistance	English language acquisition	Development of an individual employment plan	Follow-up services for participants in adult and dislocated worker programs
Title I: Adult, Dislocated Worker, Youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title II: Adult Education and Literacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title III: Employment Programs under Wagner-Peyser	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title IV: Rehabilitation Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post-secondary Career and Technical Education under Perkins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployment Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Counseling, Training and Placement Services for Veterans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TEMPLATE
LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

	INDIVIDUALIZED AND FOLLOW-UP CAREER SERVICES												
REQUIRED PARTNERS	Comprehensive and specialized assessments	Development of an individual employment plan	Group counseling	Individual counseling	Career planning	Short-term pre-vocational services	Internships and work experience	Workforce preparation activities	Financial literacy services	Out-of-area job search assistance	English language acquisition	Development of an individual employment plan	Follow-up services for participants in adult and dislocated worker programs
Trade Readjustment Allowance (TRA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trade Adjustment Assistance (TAA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Migrant and Seasonal Farmworkers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National Farmworker Jobs Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Services Block Grant (CSBG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Community Services Employment Program (SCSEP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TANF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Second Chance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing and Urban Development Employment and Training Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Corps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
YouthBuild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TEMPLATE
LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

OTHER PROGRAMS AND ACTIVITIES AVAILABLE THROUGH THE LOCAL COMPREHENSIVE ONE-STOP CENTER(S)

REQUIRED PARTNER	OTHER PROGRAMS AND ACTIVITIES PROVIDED
Title I (Adult, Dislocated Worker, Youth)	
Title II: Adult Education and Literacy	
Title III: Employment Programs under Wagner-Peysler	
Title IV: Rehabilitation Services	
Post-secondary Career and Technical Education under Perkins	
Unemployment Insurance	
Job Counseling, Training and Placement Services for Veterans	
Trade Readjustment Allowance (TRA)	
Trade Adjustment Assistance (TAA)	
Migrant and Seasonal Farmworkers	
National Farmworker Jobs Program	
Community Services Block Grant (CSBG)	
Senior Community Services Employment Program (SCSEP)	
TANF	
Second Chance	
Housing and Urban Development Employment and Training Activities	
Job Corps	
YouthBuild	

TEMPLATE
LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

SERVICE DELIVERY METHOD THROUGH THE LOCAL COMPREHENSIVE ONE-STOP CENTER(S)

PROGRAM	SERVICES PROVIDED THROUGH <i>OWN STAFF</i>	SERVICES PROVIDED THROUGH <i>CROSS-TRAINED PARTNER STAFF</i>	SERVICES PROVIDED THROUGH <i>CONTRACTOR PROVIDER</i>	SERVICES PROVIDED THROUGH <i>DIRECT LINKAGE</i>
Title I (Adult, Dislocated Worker, Youth)		Services:	Services:	Services:
		Partner:	Provider:	Method:
Title II: Adult Education and Literacy		Services:	Services:	Services:
		Partner:	Provider:	Method:
Title III: Employment Programs under Wagner-Peyser		Services:	Services:	Services:
		Partner:	Provider:	Method:
Title IV: Rehabilitation Services		Services:	Services:	Services:
		Partner:	Provider:	Method:
Post-secondary Career and Technical Education under Perkins		Services:	Services:	Services:
		Partner:	Provider:	Method:
Unemployment Insurance		Services:	Services:	Services:
		Partner:	Provider:	Method:
Job Counseling, Training and Placement Services for Veterans		Services:	Services:	Services:
		Partner:	Provider:	Method:
Trade Readjustment Allowance (TRA)		Services:	Services:	Services:
		Partner:	Provider:	Method:
Trade Adjustment Assistance (TAA)		Services:	Services:	Services:
		Partner:	Provider:	Method:
Migrant and Seasonal Farmworkers		Services:	Services:	Services:
		Partner:	Provider:	Method:
National Farmworker Jobs Program		Services:	Services:	Services:
		Partner:	Provider:	Method:
Community Services Block Grant (CSBG)		Services:	Services:	Services:
		Partner:	Provider:	Method:
Senior Community Services Employment Program (SCSEP)		Services:	Services:	Services:
		Partner:	Provider:	Method:

TEMPLATE
LOCAL SERVICE MATRIX FOR COMPREHENSIVE ONE-STOP CENTERS

PROGRAM	SERVICES PROVIDED THROUGH <i>OWN STAFF</i>	SERVICES PROVIDED THROUGH <i>CROSS-TRAINED PARTNER STAFF</i>	SERVICES PROVIDED THROUGH <i>CONTRACTOR PROVIDER</i>	SERVICES PROVIDED THROUGH <i>DIRECT LINKAGE</i>
TANF		Services:	Services:	Services:
		Partner:	Provider:	Method:
Second Chance		Services:	Services:	Services:
		Partner:	Provider:	Method:
Housing and Urban Development Employment and Training Activities		Services:	Services:	Services:
		Partner:	Provider:	Method:
Job Corps		Services:	Services:	Services:
		Partner:	Provider:	Method:
YouthBuild		Services:	Services:	Services:
		Partner:	Provider:	Method:
Other (specify): 		Services:	Services:	Services:
		Partner:	Provider:	Method:
Other (specify): 		Services:	Services:	Services:
		Partner:	Provider:	Method:
Other (specify): 		Services:	Services:	Services:
		Partner:	Provider:	Method:

IDES NON-DISCLOSURE AGREEMENT

Attachment No. 2 to Amendment No. 2 to LWIA # MOU

The **Illinois Department of Employment Security (“IDES”)** agrees to share confidential information, as defined below, with each One-Stop Partner (“**RECIPIENT**”) pursuant to the Memorandum of Understanding for the One-Stop Center located in Illinois Local Workforce Area # (“MOU”), solely for the limited purpose and to the extent as set forth in this Non-Disclosure Agreement (“Agreement”). IDES and the RECIPIENT are collectively referred to as the “Parties” and individually as a “Party.” This Agreement is made by and between IDES and each RECIPIENT and as such this Agreement is separately and individually enforceable against each RECIPIENT.

1. Executed Amendment. RECIPIENT acknowledges and agrees that by signing Amendment No. to the MOU (“Amendment”) it agrees to be bound by the terms and conditions of this Agreement, which are incorporated into the MOU by the Amendment. RECIPIENT’s execution of the Amendment is a prerequisite for receiving any confidential information under this Agreement.
2. One-Stop Partner. RECIPIENT affirms and acknowledges that it is a One-Stop Partner, as defined by the Workforce Innovation and Opportunity Act of 2014, as amended, (WIOA). RECIPIENT affirms and acknowledges that, except as otherwise provided herein, it will remain a Party to this Agreement as long as it continues to administer at least one federally funded employment, training or education program at an Illinois One-Stop Center, as defined by WIOA.
3. Term and Termination. The term of this Agreement shall begin upon the date of full execution of the Amendment and shall end upon the termination of the MOU. Notwithstanding any other provision to the contrary, IDES may immediately terminate or cancel this Agreement and cease providing confidential information if RECIPIENT fails to adhere to any provision set forth in this Agreement. RECIPIENT agrees that its responsibilities and duties under this Agreement, including but not limited to its obligations regarding confidentiality and data security, shall remain in effect following the termination of this Agreement.
4. Confidential Information.
 - a) For purposes of this Agreement, “confidential information” means all data and information in whatever form produced, prepared, observed, or received under this Agreement to the extent such information is confidential within the meaning of any governing law, regulation, or directive, including, without limitation, the Illinois statute codified at 820 ILCS 405/1900 (“Section 1900”).
 - b) RECIPIENT agrees to comply with applicable laws, materials, regulations and all other state and federal requirements with respect to the protection of privacy, security and dissemination of the confidential information, including Section 1900; which is incorporated by reference into this Agreement. Protection from unauthorized use and/or disclosure specifically includes storage in a place physically secure from access by unauthorized persons, maintaining information in electronic formats such as magnetic tapes, discs, or on servers in such a way that unauthorized persons cannot obtain the information by any means, destroying all confidential information in the manner directed

IDES NON-DISCLOSURE AGREEMENT

- by IDES as soon as the information is no longer needed for RECIPIENT's purposes, and undertaking precautions to ensure that only authorized employees and agents have access to said confidential information.
- c) RECIPIENT agrees to instruct all personnel having access to the confidential information on the confidentiality requirements set forth in this Section and agrees to fully and promptly report any infraction to the IDES.
 - d) RECIPIENT agrees that the disclosure of the confidential information to the RECIPIENT does not convey any future ownership or use rights. RECIPIENT agrees that IDES shall retain sole and exclusive ownership of the confidential information.
 - e) Upon the termination of this Agreement, RECIPIENT agrees to destroy or return all confidential information in the manner directed by IDES. RECIPIENT agrees that the confidential information shall not be archived or sent to a records center and shall not be retained with personal identifiers for any period longer than the term of this Agreement.
5. Data Specifications.
- a) The Parties acknowledge and agree that under this Agreement IDES will not share or provide the RECIPIENT with any information obtained from an individual or employing unit during the administration of the Illinois unemployment insurance (UI) program including, but not limited to, social security numbers, benefit records and employer's wage records.
 - b) In accordance with 56 Ill. Admin. Code 2960.120, IDES may provide RECIPIENT with non-UI information contained in the Illinois Job Link (IJL) including: (i) a customer's name, address, phone number, and/or employment history; (ii) an employer's name, address, and phone number; (iii) job order information; and (iv) other non-UI information contained in IJL, provided that disclosure of such information is not prohibited under this Agreement.
6. Purpose and Use. RECIPIENT agrees that it will use the confidential information solely for the limited purpose of administering an employment, training or education program through an Illinois One-Stop Center in accordance with WIOA. Any dissemination or use of the confidential information other than for the purpose and use set forth in this Section without the express written authority of the Director of IDES is specifically prohibited.
7. Indemnification. To the extent authorized by law, RECIPIENT agrees to indemnify, assume all risk of loss, and hold harmless IDES from and against all liabilities, claims, suits, actions, judgments, damages and expenses related to or arising in connection with any acts or omissions of RECIPIENT in connection with this Agreement. RECIPIENT shall do nothing to prejudice the rights of IDES to recover against third parties for any loss.
8. Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of Illinois. Any claim against IDES arising out of this Agreement must be filed exclusively with the Illinois Court of Claims, 705 ILCS 505/1 et seq., when said claim is within the jurisdiction of the Court of Claims.
9. Entire Agreement. This Agreement contains the entire agreement between the Parties and supersedes all previous agreements and proposals, oral or written, regarding the matters

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addressed herein. This Agreement may be amended upon the mutual written agreement of the Parties. In the event of conflict, this Agreement shall prevail over the MOU.

10. Severability. If any provision in this Agreement is held to be invalid, illegal, void, or unenforceable, the validity, legality, and enforceability of the remaining provisions shall not be affected.