

**Union County Workforce Development Board
Transitional Jobs Policy**

Policy Number:	UCWDB-2026-14
Effective Date:	January 28, 2026
Supersedes:	N/A (New Policy)
Review Date:	Annually

Section 1: Purpose and Authority

1.1 Purpose

This policy establishes comprehensive standards and procedures for the implementation and administration of **Transitional Jobs** under the **Workforce Innovation and Opportunity Act (WIOA)** Title I Adult and Dislocated Worker programs within Union County. Transitional Jobs are time-limited, wage-paid work experiences that are subsidized up to 100 percent, designed to help individuals with significant barriers to employment establish a work history, demonstrate success in the workplace, and develop skills leading to unsubsidized employment.

1.2 Applicability

This policy applies to all American Job Center Partners (AJCPs), One-Stop Career Center Partners, sub-recipients, and contracted service providers delivering WIOA Title I services under the Union County Workforce Development Board (UCWDB). All entities receiving WIOA Title I funds through UCWDB must comply with this policy as a condition of their contract or sub-award agreement.

1.3 Regulatory Authority & Legal Basis

Federal Statute:

- WIOA Section 134(d)(5) - Transitional Jobs
- WIOA Section 3(24) - Definition of Individual with a Barrier to Employment

Federal Regulations:

- 20 CFR 680.190 - Transitional Jobs
- 20 CFR 680.900 - Supportive Services
- 20 CFR 680.120 - Adult Program Eligibility
- 20 CFR 680.130 - Dislocated Worker Program Eligibility

Uniform Administrative Requirements:

- 2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements
- 2 CFR 200.403 - Factors Affecting Allowability of Costs
- 2 CFR 200.404 - Reasonable Costs

**Union County Workforce Development Board
Transitional Jobs Policy**

- 2 CFR 200.405 - Allocable Costs

U.S. Department of Labor Guidance:

- TEGL 19-16: Guidance on Services Provided through the Adult and Dislocated Worker Programs
- TEGL 3-15: Operating Guidance for the Workforce Innovation and Opportunity Act
- TEGL 21-16: Third WIOA Title I Youth Formula Program Guidance
- TEN 17-16: Enhanced Transitional Jobs Demonstration Interim Report
- USDOL WIOA Desk Reference: Transitional Jobs (January 2016)

State Guidance:

- NJWIN WD-PY24-11: Title I Adult, Dislocated Worker, and Youth Eligibility
- NJWIN 10-16(A): Supportive Services and Needs-Based Payments under WIOA Title I Programs
- NJWIN 1-15: WIOA Adult and Dislocated Worker Eligibility Guidelines

1.4 Core Principles

The UCWDB Transitional Jobs program shall operate according to the following principles:

- Serve individuals with the most significant barriers to employment who are chronically unemployed or have an inconsistent work history
- Provide meaningful work experience that establishes work history and develops workplace skills
- Combine work experience with comprehensive career services and supportive services
- Create pathways to unsubsidized employment in demand occupations
- Ensure cost-effective use of WIOA Title I funds
- Maintain compliance with all federal, state, and local regulations

Section 2: Funding Limitations

2.1 Maximum Funding Allocation

Pursuant to **WIOA Section 134(d)(5)** and **20 CFR 680.190**, the UCWDB may use no more than **10 percent (10%)** of the combined total allocation of Adult and Dislocated Worker funds for Transitional Jobs.

Calculation Example:

If the local area receives \$1,500,000 in Adult funds and \$1,000,000 in Dislocated Worker funds, the maximum available for Transitional Jobs is \$250,000 (10% of \$2,500,000), which may be drawn proportionally from both funding streams (\$150,000 Adult and \$100,000 Dislocated Worker).

2.2 Wage Subsidization

**Union County Workforce Development Board
Transitional Jobs Policy**

Transitional Jobs may be subsidized up to **100 percent** of the wages paid to the participant. This is distinct from On-the-Job Training (OJT), which typically reimburses employers 50-75 percent of wages. The wage subsidy covers the extraordinary costs associated with providing structured work experience to individuals with significant barriers.

2.3 Allowable Costs

Allowable costs under the Transitional Jobs program include:

- Participant wages (minimum wage or prevailing wage for the occupation, whichever is higher)
- Employer-paid payroll taxes (FICA, FUTA, SUTA, workers' compensation)
- Required employee benefits as mandated by law
- Administrative costs directly related to operating the Transitional Jobs program
- Job readiness training provided in combination with the transitional job
- Supportive services necessary to enable participation

Section 3: Participant Eligibility

3.1 Basic WIOA Eligibility

All Transitional Jobs participants must first meet the basic eligibility requirements for WIOA Title I Adult or Dislocated Worker programs as specified in **NJWIN WD-PY24-11**:

Adult Program Basic Eligibility:

- Age 18 or older
- Authorized to work in the United States
- Selective Service registration compliance (males born on or after January 1, 1960)

Dislocated Worker Basic Eligibility:

Must meet one of the dislocated worker categories defined in **WIOA Section 3(15)** and documented in **NJWIN WD-PY24-11**, Attachment 2.

3.2 Barrier to Employment Requirement

In addition to basic WIOA eligibility, Transitional Jobs participants must have at least one **barrier to employment** as defined in **WIOA Section 3(24)**. Eligible barriers include:

- Displaced homemaker
- Low-income individual
- Indian, Alaska Native, or Native Hawaiian
- Individual with a disability
- Older individual (age 55 or older)
- Ex-offender (justice-involved individual)
- Homeless individual or runaway youth
- Youth who aged out of foster care

**Union County Workforce Development Board
Transitional Jobs Policy**

- English language learner, individual with low literacy, or individual facing substantial cultural barriers
- Eligible migrant and seasonal farmworker
- Individual within two years of exhausting TANF lifetime eligibility
- Single parent (including single pregnant women)
- Long-term unemployed individual
- Other groups as determined by the Governor

3.3 Chronic Unemployment or Inconsistent Work History

In accordance with **20 CFR 680.190**, Transitional Jobs are available only to individuals who are **chronically unemployed** or have an **inconsistent work history**. The UCWDB defines these terms as follows:

Chronically Unemployed:

An individual is considered chronically unemployed if they meet one or more of the following criteria:

- Unemployed for 27 weeks or more in the 12-month period preceding registration
- Has experienced three or more episodes of unemployment in the preceding 24 months
- Has been out of the workforce for 12 months or more (not counting time for education, military service, or documented medical reasons)
- Has never been employed in the formal workforce

Inconsistent Work History:

An individual is considered to have an inconsistent work history if they meet one or more of the following criteria:

- Has not held any single job for more than six consecutive months in the preceding 24 months
- Has gaps in employment totaling 12 months or more in the preceding 36 months
- Has a pattern of job loss due to factors related to their barriers to employment
- Has limited verifiable work history due to informal employment, self-employment, or unpaid family labor

3.4 Priority Target Populations

While maintaining compliance with all eligibility requirements, the UCWDB prioritizes the following populations for Transitional Jobs services:

- Long-term unemployed individuals (27+ weeks)
- Ex-offenders/justice-involved individuals
- Individuals currently receiving or who have exhausted TANF benefits
- Individuals with disabilities
- Veterans who meet the barrier to employment requirements
- Youth aged 18-24 with significant barriers to employment

**Union County Workforce Development Board
Transitional Jobs Policy**

Section 4: Program Structure and Requirements

4.1 Employer of Record

Unlike On-the-Job Training (OJT), where the participating employer is the employer of record, Transitional Jobs may be structured with either:

- The service provider or One-Stop Operator as the employer of record, OR
- The participating host employer/worksites as the employer of record

When the service provider acts as employer of record, the provider is responsible for:

- Processing payroll and issuing wages
- Withholding and remitting payroll taxes
- Maintaining workers' compensation coverage
- Ensuring compliance with all employment laws
- Managing employment documentation

4.2 Duration Limits

Transitional Jobs under the UCWDB program are subject to the following duration limits:

- Minimum duration: 4 weeks
- Standard maximum duration: 13 weeks
- Extended maximum duration: 26 weeks (with documented justification and supervisory approval)

Extensions beyond the standard 13-week period require:

- Documentation of participant progress toward employment goals
- Evidence that additional time is necessary due to the participant's barriers
- Written approval from the UCWDB-designated supervisor
- Updated Individual Employment Plan (IEP) reflecting the extended timeline

4.3 Hours and Wages

Hours of Work:

- Minimum: 20 hours per week
- Maximum: 40 hours per week
- Work schedules should approximate the schedules of regular employees at the worksite

Wage Requirements:

- Minimum: New Jersey state minimum wage or federal minimum wage, whichever is higher
- Prevailing wage: If the position has a prevailing wage for comparable work at the worksite, participants must be paid at least the prevailing wage
- Maximum: The UCWDB establishes a maximum hourly wage of \$18.00 for Transitional Jobs placements, unless a higher wage is required by prevailing wage standards

**Union County Workforce Development Board
Transitional Jobs Policy**

4.4 Required Combined Services

Pursuant to **WIOA Section 134(d)(5)** and **20 CFR 680.190**, Transitional Jobs must be combined with comprehensive career and supportive services:

A. Required Career Services:

- Comprehensive assessment of skills, abilities, and barriers
- Development of an Individual Employment Plan (IEP)
- Job readiness training (may be provided concurrently with the transitional job)
- Career counseling and coaching
- Job search assistance during the placement
- Labor market information on employment opportunities

B. Required Supportive Services (as needed):

Supportive services shall be provided in accordance with the **UCWDB Supportive Services Policy** and **NJWIN 10-16(A)**. Common supportive services for Transitional Jobs participants include:

- Transportation assistance (gas cards, transit passes, mileage reimbursement)
- Work-related clothing and uniforms
- Work tools and safety equipment
- Child care assistance
- Housing assistance referrals
- Assistance with obtaining required documents (IDs, certifications)

4.5 Worksite Requirements

Eligible Worksites:

Transitional Jobs placements may occur in:

- Public sector employers (government agencies, public institutions)
- Private for-profit employers
- Private nonprofit organizations

Worksite Agreements:

All worksites must execute a Transitional Jobs Worksite Agreement (Attachment A) that includes:

- Description of job duties and expected learning outcomes
- Work schedule and duration
- Supervision arrangements and contact information
- Non-displacement assurance
- Agreement to participate in progress evaluations
- Acknowledgment that there is no requirement to hire the participant

Non-Displacement Requirements:

Transitional Jobs placements must not:

**Union County Workforce Development Board
Transitional Jobs Policy**

- Result in the displacement of any currently employed worker
- Impair existing contracts for services or collective bargaining agreements
- Infringe on promotional opportunities of current employees
- Replace laid-off workers or reduce hours of current employees
- Fill positions created by a reduction in workforce

Section 5: Participant Enrollment and Assessment

5.1 Enrollment Process

Step 1: Eligibility Determination

- Complete WIOA Title I eligibility determination per NJWIN WD-PY24-11
- Document at least one barrier to employment
- Verify chronic unemployment or inconsistent work history
- Collect all required eligibility documentation

Step 2: Objective Assessment

- Conduct comprehensive assessment of skills, abilities, and service needs
- Administer basic skills assessment (TABE, CASAS, or equivalent)
- Complete career interest and aptitude inventories
- Assess work readiness and identify skill gaps
- Identify supportive service needs

Step 3: Individual Employment Plan Development

- Develop IEP with participant involvement
- Establish short-term and long-term employment goals
- Identify Transitional Job placement that aligns with career pathway
- Document required career services and supportive services
- Establish timeline and milestones

Step 4: Worksite Matching and Placement

- Identify appropriate worksite based on participant goals and assessment
- Execute Worksite Agreement (Attachment A)
- Conduct worksite orientation with participant
- Begin Transitional Job placement

5.2 Documentation Requirements

Complete documentation is required in the participant's case file and in **America's One-Stop Operating System (AOSOS)**:

- WIOA eligibility documentation per NJWIN WD-PY24-11, Attachment 6
- Documentation of barrier(s) to employment
- Documentation of chronic unemployment or inconsistent work history
- Completed assessments and test results
- Signed Individual Employment Plan
- Executed Worksite Agreement

**Union County Workforce Development Board
Transitional Jobs Policy**

- Transitional Jobs enrollment form (Attachment B)
- Timesheets and payroll records
- Progress evaluation reports

Section 6: Monitoring and Progress Evaluation

6.1 Ongoing Case Management

Case managers must maintain regular contact with Transitional Jobs participants:

- Weekly contact during the first two weeks of placement
- Bi-weekly contact thereafter
- Document all contacts in case notes in AOSOS
- Address barriers and service needs promptly

6.2 Progress Evaluations

Formal progress evaluations must be conducted:

Evaluation Point	Required Actions
2-Week Check-In	Initial adjustment review; address immediate issues
Mid-Point Review	Skills progress evaluation; IEP update if needed
End of Placement	Final evaluation; transition planning to unsubsidized employment

6.3 Performance Metrics

The UCWDB will track the following metrics for the Transitional Jobs program:

- Number of participants enrolled
- Number of participants completing the full placement
- Employment rate at exit (unsubsidized employment)
- Employment retention at 2nd and 4th quarters after exit
- Median earnings at 2nd and 4th quarters after exit
- Credential attainment rate (if applicable)
- Measurable skill gains

Section 7: Operational Procedures

7.1 Processing Timeliness Standards

Action	Required Timeframe
Eligibility determination	Within 5 business days of application

**Union County Workforce Development Board
Transitional Jobs Policy**

Assessment completion	Within 10 business days of eligibility
IEP development	Within 5 business days of assessment
Worksite placement	Within 15 business days of IEP completion
Timesheet processing	Within 3 business days of receipt
Wage payment	Per established payroll schedule (minimum bi-weekly)
AOSOS data entry	Within 7 business days of service

7.2 Case Note Requirements

All Transitional Jobs services must be documented in **AOSOS** case notes. Required elements include:

- Justification for Transitional Jobs placement (barriers, chronic unemployment/inconsistent work history)
- Description of worksite and job duties
- Connection to participant's career pathway and employment goals
- Progress toward skill development and work readiness
- Supportive services provided and rationale
- Transition planning activities

7.3 Approval Authority

Action/Amount	Required Approval
Transitional Job enrollment	Case Manager + Supervisor
Standard placement (up to 13 weeks)	AJC Program Manager
Extended placement (14-26 weeks)	UCWDB Executive Director or Designee
Exception to maximum wage limit	UCWDB Executive Director

Section 8: Sub-Recipient Requirements

8.1 Contractual Compliance

All sub-recipients, AJCPs, and contracted service providers must:

- Incorporate this policy by reference in all WIOA service delivery contracts
- Ensure all staff have received training on Transitional Jobs policies and procedures
- Maintain documentation in accordance with Section 5.2 of this policy
- Submit to monitoring and audits by UCWDB, NJDOL, and federal oversight entities
- Report suspected fraud in accordance with 2 CFR 200.113 and 20 CFR 683.620

**Union County Workforce Development Board
Transitional Jobs Policy**

8.2 Reporting Requirements

Report	Frequency	Due Date
Transitional Jobs Enrollment Summary	Monthly	10th of following month
Participant Progress Report	Monthly	10th of following month
Financial Expenditure Report	Monthly	15th of following month
Quarterly Outcomes Report	Quarterly	15th of month following quarter

8.3 Record Retention

All Transitional Jobs records must be retained for a minimum of:

- Three (3) years from the date of final expenditure report submission for the grant period, OR
- Until resolution of any audit findings, litigation, or claims, whichever is longer

Records must be maintained in accordance with **2 CFR 200.334**.

8.4 Corrective Action

When monitoring identifies deficiencies:

- Minor deficiencies (documentation gaps, late data entry): Written notification with 30-day corrective action period
- Significant deficiencies (policy violations, repeated issues): Formal corrective action plan with 60-day implementation timeline
- Material deficiencies (fraud indicators, systemic non-compliance): Immediate escalation to UCWDB Executive Director; potential contract action

Section 9: Distinction from Other Work-Based Learning

It is important to distinguish Transitional Jobs from other WIOA work-based learning strategies:

Feature	Transitional Jobs	On-the-Job Training (OJT)
Target Population	Individuals with barriers who are chronically unemployed or have inconsistent work history	Job seekers who need occupational skill training
Employer of Record	Service provider or host employer	Host employer only
Wage Subsidy	Up to 100%	Typically 50-75%

**Union County Workforce Development Board
Transitional Jobs Policy**

Retention Requirement	No hire requirement	Expectation of hire upon completion
Funding Cap	10% of Adult/DW funds	No specific funding cap
Primary Purpose	Establish work history and workplace skills	Provide occupational skill training

Section 10: Definitions

Barrier to Employment: A characteristic identified in **WIOA Section 3(24)** that may hinder an individual's ability to obtain or retain employment, including but not limited to: displaced homemaker, low-income, individual with disability, older individual, ex-offender, homeless, youth aged out of foster care, English language learner, migrant or seasonal farmworker, individual exhausting TANF, single parent, or long-term unemployed.

Chronically Unemployed: As defined by UCWDB, an individual who has been unemployed for 27 weeks or more, has experienced three or more episodes of unemployment in 24 months, has been out of the workforce for 12 months or more, or has never been employed in the formal workforce.

Comprehensive Career Services: A full range of career services including assessment, IEP development, job readiness training, career counseling, job search assistance, and labor market information provision.

Host Employer/Worksite: A public, private for-profit, or private nonprofit entity that provides a work setting for Transitional Jobs participants.

Inconsistent Work History: As defined by UCWDB, an individual who has not held any single job for more than six consecutive months in the past 24 months, has employment gaps totaling 12 months or more in 36 months, has a pattern of job loss due to barriers, or has limited verifiable work history.

Individual Employment Plan (IEP): A document developed jointly by the participant and case manager that identifies employment goals, achievement objectives, appropriate services, and career pathways. **(20 CFR 680.170)**

Supportive Services: Services such as transportation, child care, dependent care, housing assistance, and needs-related payments that are necessary to enable an individual to participate in activities authorized under WIOA. **(WIOA Section 3(59))**

Transitional Jobs: Time-limited, subsidized work experiences (up to 100% wage subsidy) in the public, private, or nonprofit sectors for individuals with barriers to employment who are chronically unemployed or have an inconsistent work history, designed to establish a work history, demonstrate workplace success, and develop skills leading to unsubsidized employment. **(WIOA Section 134(d)(5) and 20 CFR 680.190)**

Union County Workforce Development Board
Transitional Jobs Policy

WIOA: Workforce Innovation and Opportunity Act (Public Law 113-128), the federal law governing workforce development programs.

Section 11: References

Federal Statutes:

- WIOA Section 3(24) - Definition of Individual with a Barrier to Employment
- WIOA Section 3(59) - Definition of Supportive Services
- WIOA Section 134(d)(5) - Transitional Jobs

Federal Regulations:

- 20 CFR 680.120 - Adult Program Eligibility
- 20 CFR 680.130 - Dislocated Worker Eligibility
- 20 CFR 680.170 - Individual Employment Plan
- 20 CFR 680.190 - Transitional Jobs
- 20 CFR 680.900 - Supportive Services
- 2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements

U.S. Department of Labor Guidance:

- TEGL 3-15 - Operating Guidance for the Workforce Innovation and Opportunity Act
- TEGL 19-16 - Guidance on Services Provided through the Adult and Dislocated Worker Programs
- TEGL 21-16 - Third WIOA Title I Youth Formula Program Guidance
- TEN 17-16 - Enhanced Transitional Jobs Demonstration Interim Report
- USDOL WIOA Desk Reference: Transitional Jobs (January 2016)

State Guidance:

- NJWIN WD-PY24-11 - Title I Adult, Dislocated Worker, and Youth Eligibility
- NJWIN 10-16(A) - Supportive Services and Needs-Based Payments under WIOA Title I Programs
- NJWIN 1-15 - WIOA Adult and Dislocated Worker Eligibility Guidelines

Section 12: Attachments

Attachment A: Transitional Jobs Worksite Agreement

Attachment B: Transitional Jobs Participant Enrollment Form

Attachment C: Transitional Jobs Progress Evaluation Form

Attachment D: Transitional Jobs Timesheet Template

Attachment E: Chronic Unemployment/Inconsistent Work History Verification Checklist

Section 13: Contact Information

**Union County Workforce Development Board
Transitional Jobs Policy**

Questions regarding this policy should be directed to:

Union County Workforce Development Board Antonio Rivera, MSW Director Email:
arivera@ucnj.org

For state-level technical assistance, contact:

New Jersey Department of Labor and Workforce Development WIOA Policy and
Operations Division Email: WIOAPOLICY@dol.nj.gov

TRANSITIONAL JOBS WORKSITE AGREEMENT

Worksite Information:	
Organization Name:	Phone:
Federal Tax ID:	
Address:	

Worksite Supervisor:

Name: _____
Title: _____
Email: _____
Phone: _____

Participant Information:	
Name:	AOSOS #:
Job Title:	Department:

Primary Job Duties and Responsibilities:

Expected Learning Outcomes:

Skills and competencies the participant will develop:

Work Schedule:

Start Date: _____ End Date: _____
Hours per Week: _____ Days: _____
Work Hours: _____ AM/PM to _____ AM/PM

Wage Information:

Hourly Wage: \$ _____ per hour
Subsidy Percentage: _____% (up to 100%)

TRANSITIONAL JOBS WORKSITE AGREEMENT

Total Estimated Hours: _____

Employer of Record (check one):

- Service Provider/One-Stop Operator
- Host Employer/Worksite

Worksite Assurances - The worksite agrees that:

1. This placement will not displace any currently employed worker or reduce their hours
2. This placement will not impair existing contracts for services or collective bargaining agreements
3. This placement will not infringe on promotional opportunities of current employees
4. This placement will not fill a position created by a reduction in workforce or replace laid-off workers
5. The participant will receive appropriate supervision and workplace orientation
6. The worksite will participate in required progress evaluations at 2 weeks, mid-point, and end of placement
7. There is no requirement or expectation to hire the participant upon completion
8. The worksite will provide a safe working environment and comply with all applicable laws
9. The worksite will immediately notify the WIOA case manager of any issues or concerns

Worksite Supervisor Signature: _____

WIOA Case Manager Signature: _____

Date: _____

Date: _____

Participant Signature: _____

Date: _____

TRANSITIONAL JOBS PARTICIPANT ENROLLMENT FORM

Name:	Date of Birth:
AOSOS #:	Phone:
Address:	City, State, ZIP
Email:	

WIOA Program (check one):

- Adult Program
 Dislocated Worker Program
 TANF
 SNAP/GA
 Other _____

Eligibility Documentation (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Age verification (18+) | <input type="checkbox"/> Dislocated worker eligibility met |
| <input type="checkbox"/> Work authorization verified | <input type="checkbox"/> Barrier(s) to employment documented |
| <input type="checkbox"/> Selective Service verified (if applicable) | <input type="checkbox"/> Chronic unemployment verified |
| <input type="checkbox"/> Adult program eligibility met | <input type="checkbox"/> Inconsistent work history verified |

Barrier(s) to Employment (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Displaced homemaker
<input type="checkbox"/> Low-income individual
<input type="checkbox"/> Individual with a disability
<input type="checkbox"/> Older individual (55+)
<input type="checkbox"/> Ex-offender/justice-involved
<input type="checkbox"/> Homeless individual
<input type="checkbox"/> Youth aged out of foster care | <input type="checkbox"/> English language learner
<input type="checkbox"/> Low literacy
<input type="checkbox"/> Migrant/seasonal farmworker
<input type="checkbox"/> Within 2 years of exhausting TANF
<input type="checkbox"/> Single parent
<input type="checkbox"/> Long-term unemployed (27+ weeks)
<input type="checkbox"/> Other (specify): _____ |
|---|--|

Chronic Unemployment/Inconsistent Work History:

Describe documentation of chronic unemployment or inconsistent work history:

Assessment Summary:

Basic Skills Assessment: _____ Score: _____

Career Interest Assessment: _____

Work readiness and skill gaps identified:

Career Pathway Goal:

Target Occupation/Industry: _____

Short-term Employment Goal: _____

Long-term Career Goal: _____

TRANSITIONAL JOBS PARTICIPANT ENROLLMENT FORM

Supportive Services Needed (check all that apply):

- Transportation assistance
- Work clothing/uniforms
- Work tools/safety equipment
- Child care assistance
- Housing assistance referrals
- Required documents (IDs, certifications)

Justification for Transitional Jobs Placement:

Explain why Transitional Jobs is the appropriate service for this participant, including how barriers and chronic unemployment/inconsistent work history necessitate this intervention:

Approvals:

Case Manager: _____ Supervisor: _____
Date: _____ Date: _____

UCWDB Executive Director (if extended placement): _____
Date: _____

TRANSITIONAL JOBS PROGRESS EVALUATION FORM

Participant Name:	Worksite:
AOSOS #:	Job Title:

Evaluation Period (check one):

- 2-Week Check-In Mid-Point Review End of Placement

Evaluation Date: _____ Placement Start Date: _____

Attendance and Punctuality:

Total Hours Scheduled: _____ Hours Worked: _____ Hours Absent: _____

- Excellent - Consistently on time, no unexcused absences
- Good - Occasional tardiness, minimal absences
- Needs Improvement - Frequent tardiness or absences
- Unsatisfactory - Chronic attendance or punctuality issues

Comments: _____

Work Quality and Performance:

- Excellent - Exceeds expectations, produces high-quality work
- Good - Meets expectations, consistent quality
- Needs Improvement - Inconsistent quality, requires supervision
- Unsatisfactory - Below acceptable standards

Comments: _____

Work Behaviors and Professionalism:

- | | | | |
|-----------------------|--|------------------------|--|
| Communication Skills: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U | Initiative/Motivation: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U |
| Teamwork/Cooperation: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U | Workplace Appearance: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U |
| Following Directions: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U | Safety Awareness: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U |
| Problem-Solving: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U | Adaptability: | <input type="checkbox"/> E <input type="checkbox"/> G <input type="checkbox"/> NI <input type="checkbox"/> U |

E=Excellent, G=Good, NI=Needs Improvement, U=Unsatisfactory

Skills Development Progress:

Describe specific skills the participant has developed and progress toward learning outcomes:

Strengths Demonstrated:

What are the participant's greatest strengths?

Areas for Improvement:

TRANSITIONAL JOBS PROGRESS EVALUATION FORM

What skills or behaviors need further development?

Barriers Addressed/Support Provided:

What barriers have been addressed? What support has been helpful?

Overall Performance Rating:

- Excellent - Consistently exceeds expectations
- Good - Meets expectations, making strong progress
- Satisfactory - Meeting minimum expectations, needs continued support
- Unsatisfactory - Not meeting expectations, intervention needed

For Mid-Point and End of Placement Evaluations Only:

Is the participant ready for unsubsidized employment?

- Yes - Recommend transition to job search and placement
- Not Yet - Needs additional time/support (specify): _____
- Recommend Extension (complete justification below if Mid-Point)

Extension Request (Mid-Point Review Only):

- Request extension from 13 to 26 weeks

Justification: _____

Explain why additional time is necessary due to participant's barriers:

Next Steps and Action Plan:

What specific actions will be taken before the next evaluation?

Signatures:

Case Manager:

Participant Signature: _____

Date: _____

Distribution: Participant File, Worksite, Case Manager, AOSOS

TRANSITIONAL JOBS TIMESHEET

Participant Name: _____	Worksite: _____
AOSOS #: _____	Job Title: _____
Hourly Rate: \$ _____ per hour	Pay Period: _____ to _____

Date	Day	Time In	Time Out	Lunch Break	Total Hours	Supervisor Initials
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
TOTAL HOURS:					_____	_____

Payroll Calculation:
 Total Hours Worked: _____ × Hourly
 Rate: \$ _____ = Gross Pay: \$ _____
 Subsidy Percentage: _____% × Gross
 Pay = WIOA Subsidy Amount: \$ _____

Certifications:
I certify that the hours listed above are accurate and that I worked the hours indicated.
 Participant Signature: _____ Date: _____

I certify that the participant worked the hours indicated and that this timesheet is accurate.
 Worksite Supervisor Signature: _____ Date: _____

For Service Provider Use Only:
 Received by: _____ Date: _____
 Processed by: _____ Date: _____
 Payment Date: _____
 Check/Direct Deposit #: _____

SUBMISSION DEADLINE: Timesheets must be submitted within 3 business days of the end of the pay period.

**CHRONIC UNEMPLOYMENT/INCONSISTENT WORK HISTORY
VERIFICATION CHECKLIST**

Participant Name: _____ AOSOS Number: _____

IMPORTANT:

Per 20 CFR 680.190 and UCWDB Policy Section 3.3, all Transitional Jobs participants must be either chronically unemployed OR have an inconsistent work history. Check at least one criterion below and provide supporting documentation.

SECTION A: CHRONIC UNEMPLOYMENT

Check if participant meets ANY of the following criteria:

Unemployed for 27 weeks or more in the 12-month period preceding registration

Period of unemployment: From _____ to _____

Total weeks unemployed: _____

Documentation attached: Self-attestation UI records Other: _____

Three or more episodes of unemployment in the preceding 24 months

Episode 1: From _____ to _____ (____ weeks)

Episode 2: From _____ to _____ (____ weeks)

Episode 3: From _____ to _____ (____ weeks)

Episode 4: From _____ to _____ (____ weeks)

Documentation attached: Self-attestation Work history Other: _____

Out of the workforce for 12 months or more

(Not counting time for education, military service, or documented medical reasons)

Period out of workforce: From _____ to _____

Total months: _____

Reason for absence: _____

Documentation attached: Self-attestation Other: _____

Never been employed in the formal workforce

Explanation: _____

Documentation attached: Self-attestation SSA earnings record Other: _____

SECTION B: INCONSISTENT WORK HISTORY

Check if participant meets ANY of the following criteria:

Has not held any single job for more than 6 consecutive months in the past 24 months

Longest job held: _____ Duration: _____ months

List recent employment (past 24 months):

Employer: _____ From: _____ To: _____ (____ months)

Documentation attached: Self-attestation Work history References

Employment gaps totaling 12 months or more in the preceding 36 months

Gap 1: From _____ to _____ (____ months)

Gap 2: From _____ to _____ (____ months)

**CHRONIC UNEMPLOYMENT/INCONSISTENT WORK HISTORY
VERIFICATION CHECKLIST**

Gap 3: From _____ to _____ (_____ months)

Total gap months: _____

Documentation attached: Self-attestation Work history Other: _____

Pattern of job loss due to factors related to barriers to employment

Describe pattern: _____

Explain how barriers contributed to job loss pattern:

Documentation attached: Self-attestation Other: _____

Limited verifiable work history due to informal employment, self-employment, or unpaid family labor

Type of work: Informal employment Self-employment Unpaid family labor

Duration: From _____ to _____

Explanation: _____

Documentation attached: Self-attestation Other: _____

SECTION C: WORK HISTORY SUMMARY

Provide a narrative summary of the participant's work history, explaining how it demonstrates chronic unemployment or inconsistent work history:

SECTION D: SUPPORTING DOCUMENTATION

Check all documentation attached to verify chronic unemployment or inconsistent work history:

- | | |
|--|---|
| <input type="checkbox"/> Self-attestation statement | <input type="checkbox"/> Employer references |
| <input type="checkbox"/> Unemployment insurance records | <input type="checkbox"/> Pay stubs or W-2 forms |
| <input type="checkbox"/> Social Security earnings record | <input type="checkbox"/> Interview notes |
| <input type="checkbox"/> Work history verification | <input type="checkbox"/> Other: _____ |

Case Manager Certification:

I certify that I have reviewed the participant's work history and the documentation provided supports the determination that the participant meets the chronic unemployment or inconsistent work history requirement for Transitional Jobs eligibility.

Case Manager Signature: _____ Date: _____

Case Manager Name (print): _____

This completed checklist must be maintained in the participant's case file and documented in AOSOS.