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E-mailed: 04/29/14 (cg)

Workforce Development Agency (WDA)
Policy Issuance (PI) 13-30

Date: April 29, 2014

To: Michigan Works! Agency (MWA) Directors

From: Stephanie Beckhorn, Director, **SIGNED**
Office of Workforce Policy and Strategic Planning

Subject: Participant and Employer Success Stories

Programs Affected: All Programs Administered by MWAs

Rescissions: None

References: All applicable state and federal acts, rules and regulations governing programs administered by the WDA.

Background: The WDA receives numerous requests for success stories from the U.S. Department of Labor (USDOL), the Governor's Office and other interested parties. Success stories are used to highlight the good work of MWAs as well as successful outcomes of WDA funded programs. Maintaining a repository of participant and employer success stories assists the WDA in responding to requests for such stories throughout the year, as appropriate.

Policy: The WDA is requesting all MWAs submit at least one success story from each of the categories listed on Attachment B, as applicable, and at least three employer success stories, for a total of sixteen success stories annually. If a particular category is not applicable to an MWA, then an additional story from one of the other categories listed on Attachment B should be submitted. For example, MWAs who do not have a Migrant and Seasonal Farmworker population are excluded from the requirement to submit a success story for that category, but should submit an additional success story from one of the other categories identified on Attachment B in order to meet the annual story submission total stated above.



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A minimum of four success stories should be submitted to the WDA each quarter. Selected success stories should reflect positive outcomes resulting from services provided through local programs during the current fiscal or program year. Success stories are not required to be solely based on services provided during the current fiscal or program year; they may also focus on participants who were exited during the current fiscal or program year subsequent to receiving services during a prior fiscal or program year. Each submitted success story should include a brief narrative description, one color photo featuring the subject of the success story, and a completed release form.

Release Form (Attachment A)

MWAs must submit a release form authorizing the use of the success story and, if available, accompanying photo. **The MWA may utilize a locally designed release form**, the Universal Release Form issued through the Michigan Works! Association, the attached sample release form (Attachment A), or any other MWA recognized release form, including the form that was signed by the participant at the time of registration. Attachment A may be modified to include additional information the MWA desires to capture.

Narrative (Attachment B)

Success stories should be between 150 and 200 words and should include all of the information contained in the attached sample template (Attachment B). MWAs may utilize the attached sample template **or a locally designed template of their choosing**, as long as it includes all of the information requested in Attachment B.

Success stories submitted for a PATH Vision 100 success story may be used to fulfill the requirement for a success story from the “Public Assistance Recipient” category, or any other category, as applicable. Michigan Works! Prosperity Award nominees, formerly the Michigan Works! Alumni Award, may be used to fulfill success story submission requirements outlined in this policy issuance, as appropriate.

Photograph

Along with each submitted success story, MWAs are strongly encouraged to submit at least one color photo with a caption crediting the photographer and the MWA. If the success story is about a jobseeker who obtained employment as a result of receiving services, the photo(s) should show the jobseeker performing their job. If the success story is about a satisfied employer, the photograph(s) should reflect the employer’s business. Color photos should be submitted as a separate file in .jpg format and in as high a resolution as possible.

Action: MWA officials shall take the appropriate actions necessary to implement the directives of this policy issuance. Success stories for the time period of January 1, 2014 – March 31, 2014 should be submitted electronically to Ms. Teresa Keyton at KeytonT@michigan.gov within 30 days following the issue date of this policy issuance. For subsequent quarters, success stories should be submitted within 30 days following the end of the quarter.

Inquiries: Questions regarding this policy issuance should be directed to the applicable state coordinator.

This policy issuance is available for downloading from the internet system. Further, the information contained in this policy issuance will be made available in alternative format (large type, audio tape, etc.) upon special request to this office. Please contact Ms. Teresa Keyton at (517) 335-7418 for details.

Expiration

Date: Continuing

SB:JC:tk
Attachments

AUTHORIZATION TO RELEASE INFORMATION

I hereby grant the Michigan Works! Agency (MWA), including any of its designated officers, employees, agents, or contractors, within its absolute discretion, permission to release, disseminate, or use in any manner it sees fit the attached documents and any information contained therein, as well as my photograph if provided, as a likeness of me, for same use. I also grant permission for the MWA, including any of its designated officers, employees, agents, or contractors, permission to use my name in connection with these photographs and information.

I hereby waive any claim arising out of such release, dissemination, or use.

Signature: _____

Printed Name: _____

Address: _____

Date: _____

(Shaded Area for Office Use Only)

Information and/or Photo Received and Submitted

By: _____

MWA Name: _____

Subject Matter: _____

SUCCESS STORY NARRATIVE

ATTACHMENT B

MWA Name: MWA Contact Name: Title: Phone Number: E-Mail:			
<input type="checkbox"/> Job Seeker	Name: E-Mail: Phone Number:	<input type="checkbox"/> Employer	Name: Title: E-Mail: Phone Number:
Category (Check One): <input type="checkbox"/> WIA Adult <input type="checkbox"/> Trade Adjustment Assistance <input type="checkbox"/> Adult Learner - Adult Education Programs <input type="checkbox"/> WIA Dislocated Worker <input type="checkbox"/> Veterans <input type="checkbox"/> Skilled Trades Training Fund <input type="checkbox"/> WIA Older Youth <input type="checkbox"/> Migrant & Seasonal Farmworker <input type="checkbox"/> Michigan Industry Cluster Alliance <input type="checkbox"/> WIA Younger Youth <input type="checkbox"/> Public Assistance Recipient <input type="checkbox"/> WIA Waiver <input type="checkbox"/> Employment Services <input type="checkbox"/> Other (Please Identify) _____			
Success Story Title:		Background: (Including a brief overview of the customer's challenge or situation.)	
Date Service(s) Began:		Service(s) Provided: (Include how the MWA helped the customer overcome their challenge(s).)	
Other Key Partner(s) Involved: <i>(If applicable)</i>		Activities/Highlights/Accomplishments:	
Outcome(s): (Including a testimonial and the result of the services the customer received).		Challenges or Lessons Learned:	
For job seekers, the following information is required: <ul style="list-style-type: none"> • Previous occupation and rate of pay, if available • Current occupation and rate of pay, if available • Length of employment with current employer • Information concerning any promotions or raises received • Other information, as appropriate 		For employers, the following information is required: <ul style="list-style-type: none"> • Number of individuals trained as a result of service(s) rendered • Number of positions filled as a result of service(s) rendered • Number of jobs created as a result of service(s) rendered • Other information, as appropriate 	
For waivers, the following information is required: <ul style="list-style-type: none"> • Waiver type • Service(s) provided to the job seeker or employer • Outcome(s) produced from the service(s) rendered • Any barriers or challenges to waiver implementation 			