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Policy Issuance (PI): 18-35

Date: October 4, 2018

To: Michigan Works! Agency (MWA) Directors

From: Joe Billig, Division Administrator **SIGNED**
Targeted Services Division
Workforce Development Agency

Subject: Food Assistance Employment and Training (FAE&T) Plus Program Guidelines

Programs Affected: FAE&T

Rescissions: None

References: Food and Nutrition Act (the Act) of 2008, 7 U.S.C. § 2011 (2008)
(originally enacted as Food Stamp Act of 1977, as amended, Public Law [PL] 88-525 [1964])

Food, Conservation, and Energy Act of 2008 (2008 Farm Bill), PL 110-246 (2008) (codified, as amended, at 7 U.S.C. § 2015)

Food & Nutrition Service (FNS) Instruction 113-1, revised November 11, 2005.

7 Code of Federal Regulations, Department of Agriculture, Parts 273.7 and 277

PI: 18-17, Michigan Works! System Plan Instructions, issued May 17, 2018, and subsequent changes

PI 15-12, Procurement, issued July 17, 2015

Background: The Act of 2008 provides that state agencies be given maximum flexibility in designing Employment & Training (E&T) programs for individuals receiving Food Assistance. An E&T program is a package of services, which includes assessment, component activities, participant reimbursements, and follow-up. The United States Department of Agriculture, Food & Nutrition Service (FNS) provides states with 50 percent reimbursement funds to support and expand robust E&T programs funded with non-federal dollars.

The Michigan Department of Health and Human Services (MDHHS) and the Michigan Talent Investment Agency/Workforce Development Agency (TIA/WDA) are committed to expanding job-driven E&T services to all Food Assistance Program (FAP) recipients by operating a voluntary FAE&T Plus program. The FAE&T Plus program is connecting with third-party partners also know as Plus Contractors, that focus on employer demand while offering skills training and credentials required to obtain self-sustaining employment.

Policy:

This policy is in effect for Detroit Employment Solutions Corporation, a Michigan Works! Agency, and West Michigan Works! to subcontract with multiple entities to deliver the FAE&T Plus program. The program provides FAP recipients, between the ages of 18 and 59, the opportunity to increase skills and abilities necessary to obtain self-sustaining employment. Participants must not be receiving cash benefits from the MDHHS, and they must be able to work upon program completion.

Plus Program Delivery and Supportive Services are paid for with the Plus Contractors' non-federal funding. The Plus Contractor will receive a 40 percent reimbursement of approved expenditures. *Refer to the current fiscal year plan instructions policy for further information.*

The MWA must ensure Plus Contractors have access, and the training, to appropriately document participation in the One Stop Management Information System (OSMIS). In addition, OSMIS access must be removed within 14 days for any staff no longer working with the program.

Referral and Eligibility Verification

All Plus Contractors should actively recruit eligible participants from their service area and may also accept referrals from the MDHHS and the MWA. Potential eligible participants would be receiving food benefits as an Able Bodied Adult without Dependents (ABAWD) or from a FAP Family household. An ABAWD is between the ages of 18 and 49 years old (beginning the first calendar month after the 18th birthday through the last calendar month before the 50th birthday). Also, the ABAWD will not have a minor (under the age of 18) on their FAP case. A FAP family member would be between the ages of 18 and 59 and would have a minor child on their FAP case.

The MWA or Plus Contractor must request an eligibility determination and subsequent electronic referral from the MDHHS Bridges system. The request can be made with the local MDHHS office or via the MDHHS-Central-Unit-Exception-Processing email address. The "Referrals by Last Date to Attend (WF and FS)" report may be generated via the OSMIS PATH/FAE&T report section to confirm receipt of the referral.

Active OSMIS Systems						
Wagner-Peyser	WIOA	TAA	PATH/FAE&T	PRS	ISS	Admin
Showing 1 to 25 of 43 entries						
First Previous 1 2 Next						
#	Name		PATH Reports			
3	NCR100	NCR NEW Eligible Listing				
8	REFER-WF-FS	Referrals by Last Date to Attend (WF and FS)				
9	TRIAGE-DHS	TRIAGE DHS - Triage listing by DHS Worker Number				

Program Orientation

All referred individuals must be provided an orientation prior to their Last Date to Attend Orientation (LDTA) as indicated in the OSMIS. The LDTA is always 15 days after the date the referral was processed in Bridges. The orientation should consist of an overview of the program, responsibilities of the participant, and the consequences for noncompliance as it relates to the general work requirement. The FAE&T Plus is a voluntary program; and, as such, participants will not lose their FAP benefits for non-participation in the program. The participant must consent to enrollment in FAE&T Plus. Form FAET-404 is attached to this policy as a sample Plus acknowledgement form.

Assessment and Individual Service Strategy (ISS)

The MWA is responsible for ensuring each participant receives a thorough assessment to evaluate the participant's skills, educational levels, prior work experience, barriers to employment, employability, and whether the participant speaks English as a second language. The assessment may be completed prior to enrollment in FAE&T Plus; however, the assessment **must** be completed before enrolling an individual in an activity in the OSMIS.

An ISS is required electronically in the OSMIS for all participants and includes the results of the completed assessment process. In addition, the ISS should include the individual's career goals and the steps that will be taken to help participants overcome all identified career barriers while supporting the participant's strengths and goals. The ISS must be updated and revised as the participant's circumstances change, but not less than once per year.

Any ISS template must include all information necessary to complete data entry in the OSMIS. The Plus Contractors can use their existing ISS template upon MWA review and approval. An acknowledgement copy of the ISS must be provided to the participant.

The time spent in the orientation session and initial assessment process must be documented on the OSMIS in the "Orientation" activity.

Time spent in additional assessment processes would be documented in the E&T activity to which the assessment is specifically related. Example: When a participant completes an assessment process, to determine readiness for vocational training, the actual hours would be entered in the vocational training activity.

Case Management and Participant Files

All participants must be assigned a case manager for the duration of the program. Intensive case management must be provided to help participants successfully accomplish their educational and employment goals. The hours spent in case management activities should be included as participation in the assigned activities. Participation in all activities must be documented and entered into the OSMIS.

The FAE&T Plus Contractors must maintain paper or electronic participant files, and the files must be reviewed as part of the required annual MWA monitoring visit. Files should be organized according to the Plus Contractors' standards but at a minimum, must contain information pertaining to the intake, eligibility verification, release of information, program acknowledgement form, assessments, ISS, participation in activities, supportive services provided, and individual progress in the program.

Coordination of Services

A participant may receive services from the MWA and a Plus Contractor or multiple Plus Contractors at the same time. It is the MWA's responsibility to coordinate services for co-enrolled participants to prevent duplications of services provided. Duplication of service means the participant engages in the same activity or receives the same supportive services from multiple Plus Contractors even if the activity is different. Duplicate services are not eligible for reimbursement.

Program Activities

The MWA has the flexibility to determine the sequencing of assigned activities on an individual participant basis. Due to the voluntary nature of the program, participants would not be disqualified from Plus for failure to comply with the requirements of a specific activity. A participant may be moved to a different activity to continue participation.

Job Search

(Enter in the OSMIS as "Job Search" activity.)

This activity should not begin until the participant is ready to actively search for employment and is employment-ready. Job search is the act of seeking or obtaining employment and requires job seekers to make a pre-determined number of inquiries to prospective employers over a specified period of time. This activity may be designed so that the job seeker conducts his/her job search independently or within a group setting.

Job Search Training

(Enter in the OSMIS as "Job Search Training" activity.)

Job search training assists individuals to become familiar with general workplace expectations, and learn behaviors and attitudes necessary to compete successfully in the labor market. Job search training may include, but is not limited to:

- Job skills assessments.
- Job finding clubs.
- Teaching participants how to read maps and bus schedules.
- Resume writing, interview skills.
- Instruction related to seeking employment.

- Career planning tool or the Pure Michigan Talent Connect system.

Work Experience

(Enter in the OSMIS as the "Work Experience" activity.)

Unpaid work activities are work assignments where participants receive compensation in the form of their monthly FAP allotment in lieu of wages. These assignments are not intended to create employee/employer relationships. The Plus Contractor shall take into account the prior training, experience, and skills of a participant, along with employment and training objectives when making appropriate assignments. The Plus Contractor must negotiate the terms for placement of participants into unpaid work activities and must approve assignment location(s).

The work experience component is designed to improve the employability of participants through actual work experience and/or training. The goal of this experience is to enable participants to move into regular employment.

Work experience must comply with these conditions:

- Must not provide any work that has the effect of replacing or preventing the employment of an individual not participating in workfare or work experience. Vacancies due to hiring freezes, terminations, or layoffs must not be filled by workfare or work experience participants.
- Participants must be provided the same job-related benefits and working conditions that are provided at the job site to employees performing comparable work for comparable hours. These are benefits related to the actual work being performed, like workers' compensation and not to the employment by a particular agency, such as health benefits. Of the benefits required, any elective benefit that requires a cash contribution by the participant will be optional at the discretion of the participant. Participants are covered by workers' compensation as outlined in the MDHHS Bridges Eligibility Manual (BEM) 232.
- The provisions of Section 2(a)(3) of the Service Contract Act of 1965 (PL 89-286) relating to health and safety conditions apply to the workfare and work experience activities.
- Work experience jobs must not, in any way, infringe upon the promotional opportunities that would otherwise be available to regular employees.
- Work experience jobs must not be related, in any way, to political or partisan activities.
- Assigned participation in work experience may not exceed the number of hours transmitted from Bridges for display in the OSMIS as "Household Workfare/Work Experience" hours. However, the participant can volunteer to engage in more hours. Participants are not eligible to participate in work experience until an hourly value is displayed in the field as indicated below:

View Welfare Registration								
Instrument Panel								
Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
EVELYN	EV12	3171	5616	Volunteer	11/04/2013 - Open	Approved	10/31/2018	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$192 for Dec 2017 View All	21 hrs/month as of Dec 2017 View All	0 for Dec 2017 View All	No as of Dec 2017 View All	No as of Dec 2017 View All	0 as of 10/28/2017	-		

Work experience may also include paid activities such as on-the-job training, pre-apprenticeship or apprenticeship placements, and internships.

Educational and Training Programs

Educational and training opportunities can provide the skills needed to secure unsubsidized employment and ultimately self-sufficiency. Only educational components that directly enhance the employability of participants are allowable. A direct link between the educational program and job-readiness must be established for the component to be approved by the MWA. Study time can be counted as participation for Basic Literacy, Self-Employment Training, and Vocational Training activities.

- **Basic Literacy**
(Enter in the OSMIS as the “Educational/Training Programs – Literacy” activity.)

Educational/training programs expand the job search abilities or employability of those subject to the program. Allowable educational activities may include, but are not limited to:

- High school or equivalent education programs.
- Remedial education programs to achieve a basic literacy level.
- Instructional programs, such as English as a Second Language, basic computer skills training, and basic literacy skills.

- **Employment Enhancement Skills Training**
(Enter in the OSMIS as the “Educational/Training Programs – EEST” activity.)

Employment enhancement skills training (EEST) is a work readiness program intended to increase or develop participants’ motivation and skills for active participation in activities relating to employment. It also is designed to stabilize participants’ living circumstances and facilitate successful involvement in the program. The EEST may include activities such as:

- Motivational activities, which include prioritizing work and building, or improving, self-esteem and self-image.
- Improving interpersonal relationships.

- Information and referrals to community resources to address health-related issues, along with access to housing, food, and clothing assistance.
- Time and money management workshop.
- Academic enrichment and work readiness activities designed to prepare the student for placement in higher level training.

- **Self-Employment Training**

(Enter in the OSMIS as the “Self-Employment Training” activity.)

Self-employment training is an activity that improves the employability of participants by training them to design and operate a small business or another self-employment venture. Please note: this activity is a training component and not for self-employment.

- **Vocational Training**

(Enter in the OSMIS as the “Vocational Occupational Training” activity.)

Vocational training improves the employability of participants by providing training in a skill or trade allowing the participant to move directly into employment. All vocational training activities should be organized educational programs that are directly related to the preparation of individuals for employment in current, emerging, or in-demand occupations, based on local labor market information data.

Participants must attempt to secure federal financial aid (not including student loans), such as a Pell Grant, if applicable, for the educational institution/activity.

Supportive Services

(Enter in the OSMIS as “Supportive Services.”)

Supportive Services are services designed to assist participants in overcoming barriers that prevent them from engaging in E&T activities. They are an integral and required element of the Plus program, and the MWA must ensure individuals enrolled in Plus are offered assistance with removing barriers to participation. There may be a coordination of services between the Plus Contractors and the MWA to provide the supportive services.

The expenditures must be reasonable and necessary, and directly related to participation in one of the above activities, not for supporting participants' involvement in unsubsidized employment.

Supportive services may include:

- Cellular phone service (limited to three months and no other source of free data or phone service is available or appropriate for the situation).
- Clothing (appropriate for job search activity or interviews).

- Course registration fee (may qualify as a program delivery expense).
- Drug tests (required for employment).
- Fingerprinting (required for employment).
- Legal services (expunging a criminal record to secure employment).
- Medical services (i.e., TB test or physical required for employment).
- Fees (i.e., union dues, test fees, licensing and bonding fees, background checks needed for training or to support job search).
- Personal Grooming Supplies/Services (i.e., personal hygiene products and services, including haircuts, to meet program or potential employer appearance standards).
- State of Michigan identification card, temporary driving instruction permit, driving skills test, and driver's license.
- Student activity fee (if required to participate in class; may qualify as a program delivery expense).
- Training materials, textbooks, and supplies.
- Transportation (i.e., bus pass, gasoline cards, mileage reimbursement, taxi [including Uber and Lyft-type services] and necessary non-maintenance vehicle repairs).
- Work and training tools (i.e., equipment, tools, safety clothing, uniforms necessary to complete E&T training).
- Housing assistance (limited to two months for rent & utilities only).

Supportive services may be provided in the form of prepaid allowances based on approximate costs, where the costs are reasonable and verifiable. Alternatively, supportive services may be provided through reimbursement to the participant for the actual cost of services incurred.

Gift cards or vouchers may be provided, as a prepaid allowance, if their use is restricted to specific purchases or services allowed by the program. In addition, case file documentation must clearly identify the supportive service provided.

The case file, action plan, or the OSMIS case notes must contain information that explains why the supportive service is necessary for participation in E&T activities.

The following items **do not** qualify for reimbursement:

- Automobile insurance.
- Automobile ownership/operator taxes (tag and title).
- Automobile purchase.
- Bad debt.
- Drug/alcohol counseling or therapy.

- Food staples and groceries.
- Living stipend.
- Mental health treatment.
- Personal computers.
- Relocation expenses.
- Student loans, fees, penalties, or fines.
- Expenditures to support employment that was obtained prior to enrollment in FAE&T Plus.

Unsubsidized Employment

(Enter in the OSMIS as the “Unsubsidized Employment” activity.)

Only participants who obtain employment after engaging in other FAE&T Plus activities may be enrolled in this activity.

Unsubsidized employment is full or part-time employment in the public or private sector that is not supported by Temporary Assistance for Needy Families (TANF), State General Fund/General Purpose, or any other public program. Participation in unsubsidized employment is the fundamental goal for all participants to prepare for self-sufficiency and public assistance case closure. Employed participants should be encouraged to engage in other E&T activities to increase the likelihood of achieving self-sufficiency.

The MWA must ensure the local MDHHS office is notified if a participant obtains employment while enrolled in the program. Self-employment is not allowable for this activity unless the participant has successfully completed an approved self-employment training program.

The MWA must create an OSMIS case note and notify the local MDHHS office if an FAE&T participant does any of the following:

- Voluntarily quits a job of 30 hours or more per week without good cause.
- Voluntarily reduces hours of employment below 30 hours per week without good cause.
- Refuses to accept a bonafide offer of employment per MDHHS BEM 233B.

The MDHHS will determine if the individual has good cause.

Please note expenditures for the unsubsidized employment activity **do not qualify for reimbursement**. Case management associated with supporting the participants continued employment is part of the Job Retention Services (JRS) activity. The JRS activity must be open in the OSMIS before entering the “unsubsidized employment” activity in the OSMIS.

The activity for “unsubsidized employment prior to referral” should not be entered in the OSMIS unless the customer is an ABAWD subject to Time Limited Food Assistance (TLFA).

Job Retention Services (JRS)

(Enter in the OSMIS as the “Job Retention Services” activity.)

JRS may be provided to individuals who secure full or part-time unsubsidized employment **after** receiving other employment or training services under FAE&T Plus. This activity provides case management, referrals to other services and supportive services to help participants achieve satisfactory performance, retain employment, and increase earnings over time.

JRS:

- Requires an open unsubsidized employment activity in OSMIS.
- May be provided for a maximum of 90 days per referral.
- May continue for the full 90 days, even if the FAP case closes.
- If the customer is employed at the time of registration, JRS may only be provided if the participant secures a new job with a new employer or a new position with the original employer.

JRS is limited to 90 days per referral; however, the 90 days do not need to occur concurrently. The OSMIS will track the number of days each participant is enrolled in JRS to ensure that 90 days are not exceeded in any one referral. Only one JRS activity can be open at a time, even if the participant has multiple jobs. The single JRS activity covers multiple jobs in the same time period.

Job Retention Supportive Services (participant reimbursements)

(Enter in the OSMIS as the “Job Retention Supportive Services.”)

Job retention supportive services are designed to assist the participant in maintaining employment and can only be provided when a participant is enrolled in the JRS activity. *Job retention supportive services follow the same rules as regular supportive services, as described earlier in this policy.*

The following job retention supportive services are permissible if they are required to maintain the employment.

- Clothing.
- Fees (i.e., union dues, test fees, licensing and bonding fees).
- Personal Grooming Supplies/Services (i.e., personal hygiene products and services, including haircuts, to meet employer appearance standards).
- Transportation (i.e., bus pass, gasoline cards, mileage reimbursement, taxi [including Uber and Lyft type services], and necessary non-maintenance vehicle repairs).
- Work tools (i.e., equipment, tools, safety clothing, uniforms).

Example for Serving Participants after Obtaining Employment

A participant enrolled in FAE&T Plus completes a training component and secures unsubsidized employment. The participant is in need of transportation assistance to maintain the new employment. The “JRS” activity is opened to provide mileage reimbursement, and the “unsubsidized employment” activity is opened to document the hours of employment, job retention services are provided for the next 90 days. After 90 days if the FAP case is still open, the participant would be terminated from the OSMIS as “*completed program objective*” or enrolled in a new allowable activity, and the JRS activity must be ended. If the FAP case is closed, the customer must be terminated from the OSMIS.

Data Entry in the OSMIS and Documentation

The MWA must provide the following for each Plus Contractor:

- The OSMIS staff accounts that include the ability to change the case manager field on the welfare update screens via the “Granted Privileges” tab of the OSMIS staff account maintenance section.

OSMIS Staff Account Maintenance					
Staff Name	Staff User Name	Phone	Status	Last Login Date	Password Last Changed
		(313) 494-4543	Active	12/31/2017 11:43:08 AM	11/22/2017 02:58:03 PM

Account Info	Default Affiliations	Email Report Access	Granted Privileges
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Select the privileges you wish to grant to this staff:

<input type="checkbox"/>	State Administrator
<input checked="" type="checkbox"/>	Ability to change the Case Manager field on the Welfare Update screen
<input type="checkbox"/>	Ability to change the Case Manager field on the WIA Update screen

- The OSMIS staff accounts that will receive the Welfare System Generated Terminations Report via the “Email Report Access” tab of the OSMIS staff account maintenance section.

OSMIS Staff Account Maintenance					
Staff Name	Staff User Name	Phone	Status	Last Login Date	Password Last Changed
		(517) 241-5906	Active	02/17/2018 12:33:49 PM	11/21/2017 08:25:26 AM

Account Info	Default Affiliations	Email Report Access	Granted Privileges
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Select the reports you wish for this staff to receive. You must specify an email for this to work:

<input type="checkbox"/>	Anticipated Exiters Report	<input type="checkbox"/>	Terminated Actual Hours Report
<input type="checkbox"/>	Welfare Termination Missing Data Report	<input type="checkbox"/>	Missing Actual Hours Report
<input checked="" type="checkbox"/>	Welfare System Generated Terminations Report	<input type="checkbox"/>	TANF Individual Work Participation Award Report
<input type="checkbox"/>	Report Downloads/No Downloads by Staff	<input type="checkbox"/>	New JET Referral System Generated Terminations Report

- An OSMIS “Region Code” or a similar code to be entered in the “Optional Data1” field to identify the participants enrolled with each Plus Contractor.

The MWA must ensure the Plus Contractors abide by the following:

- Participants must be registered in the OSMIS before the electronic referral expires. The expiration is two calendar days beyond the LDТА as displayed on the registration page.
- The Plus Contractor must ensure participation is documented and verified before entering hours in the OSMIS. Documentation can be in the form of an OSMIS case note, attendance sheet, email/fax, or an individual participation form. Sample forms are included in this policy. The participant’s signature on the form is sufficient for documenting most activities; however, work experience and verification of employment hours require an authorized signature. Electronic signatures are acceptable. The forms that are formatted in the portrait orientation require an authorized signature and those formatted in the landscape orientation only require the participant’s signature.
- Data entry must be within two days of the start and end dates of participation in the activity.
- A case note must be entered in the OSMIS at least once a month.

The following rules apply in OSMIS:

- Data entry changes for activities and actual hours are limited to the current calendar month and the previous calendar month.
- Outcome and invoice reports will only include FAE&T Plus participants with actual hours entered in the OSMIS.

Participant Header Fields and Definitions

The participant header contains information received from MDHHS for the individual.

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
SHANNON	.SH120	86644	.89038	ABAWD TLFA	01/18/2018 - Open	Approved	12/31/2018	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$245 for Aug 2018 View All	26 hrs/month as of Aug 2018 View All	80 for Sep 2018 View All	No as of Sep 2018 View All	Yes as of Sep 2018 View All	0 as of 08/22/2018	-		

Referral Type: There are four referral types for FAE&T Plus participants:

- **ABAWD TLFA** - an ABAWD who is not deferred or working more than 20 hours a week.
- **ABAWD Volunteer** - an ABAWD who is deferred or working more than 20 hours a week but requests to be referred to an MWA.
- **FAP Family** – an individual from a FAP family household.

- **Volunteer** – an ABAWD not yet subject to TLFA who asks to be referred to an MWA.

*Please note the MWA must also **abide by the WDA FAE&T Program Guidelines PI 18-33**, and subsequent changes, if the participant has an **ABAWD TLFA** referral type.*

FAP Elig. Period: The effective dates of the individual's FAP benefits. *Plus participants are only eligible during this period unless employed and enrolled in the JRS activity.*

FAP Case Status: The approval status of the FAP case where the individual is a member.

Case Review: The date of the individual's next FAP case redetermination review by the MDHHS.

Extension Began: The month and year the individual began to receive FAP benefits as part of eligibility for a three-month extension.

FAP Grant: The monthly grant amount and corresponding month and year. "View All" link will show previous values sent to the OSMIS.

Household Workfare/Work Experience: The maximum number of hours the individual can perform work experience in the corresponding month without violating the Fair Labor Standards Act.

Monthly Req. Hrs: The number of hours the individual must participate in FAE&T Plus to meet the ABAWD work requirement for the corresponding month and year. The "View All" link will show previous values sent to the OSMIS.

Multiple ABAWD: This indicates if there is another ABAWD on the FAP case who was referred to the MWA. "Yes" or "No" and the corresponding month and year will display. The "View All" link will show previous values sent to the OSMIS.

TLFA: This indicates if the individual is subject to Time Limited Food Assistance. "Yes" or "No" and the corresponding month and year will display. The "View All" link will show previous values sent to the OSMIS.

Countable Months: The number of months the individual, subject to TLFA, has received FAP benefits without being deferred or meeting the ABAWD work requirement (limited to three in 36 months). "0," "1," "2," or "3" will display.

Regain Eligibility: The start date the individual regained FAP benefits after receiving three-countable months.

In-Kind Hrs: In-Kind work is defined as any work that is done in exchange for goods or services. The work requirement of 80 hours per month will be

reduced if MDHHS has applied In-Kind work hours to the individual’s FAP case. This value is displayed in the “TLFA/Multiple ABAWD Household/ Required Hours History” page which is accessible from the View All links in the participant header. *This value is used by the OSMIS to reduce the hours displayed as “Monthly Required Hours.”*

Example: An individual works 40 hours of In-Kind per month. Bridges will send the 40 hours to the OSMIS. The OSMIS will assume 40 hours out of the 80 will be met, and the OSMIS will display the required hours as 40. **The MWA does not document or track participation associated with “In-Kind” hours.**

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
INKIND CASE	CASIN0205	758820	237480	ABAWD TLFA	02/29/2017 - Open	Approved	01/31/2018	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$194 for Mar 2017 View All	21 hrs/month as of Mar 2017 View All	40 for Mar 2017 View All	No as of Mar 2017 View All	Yes as of Mar 2017 View All	0 as of 03/21/2017	-		

#	Month	Multi ABAWD Household	TLFA	Required Hrs	In-Kind Hrs	Self Empl. Hrs	Created On	Last Updated On
1	Mar 2017	No	Yes	40	40	0	03/21/2017 06:30:40 AM	03/22/2017 06:30:50 AM

Multiple ABAWD: “Yes” will display if two ABAWDs receiving food benefits on the same case are both referred to the MWA. Otherwise “No” will be displayed.

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
WANITA	UWA10	18517	10005	ABAWD TLFA	08/08/2018 - Open	Approved	07/31/2019	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$272 for Aug 2018 View All	29 hrs/month as of Aug 2018 View All	0 for Aug 2018 View All	Yes as of Aug 2018 View All	No as of Aug 2018 View All	0 as of 08/15/2018	-		

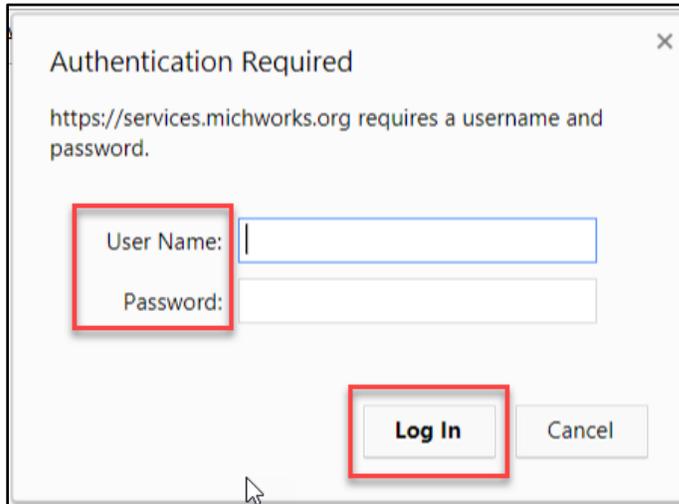
TLFA Status: An individual may be referred to the MWA with an ABAWD TLFA referral type but not subject to the work requirement for that month. The MWA must engage the participant in E&T activities, but the participant is not required to complete the 80 hours for that month.

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
WANITA	UWA10	18517	10005	ABAWD TLFA	08/08/2018 - Open	Approved	07/31/2019	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$272 for Aug 2018 View All	29 hrs/month as of Aug 2018 View All	0 for Aug 2018 View All	Yes as of Aug 2018 View All	No as of Aug 2018 View All	0 as of 08/15/2018	-		

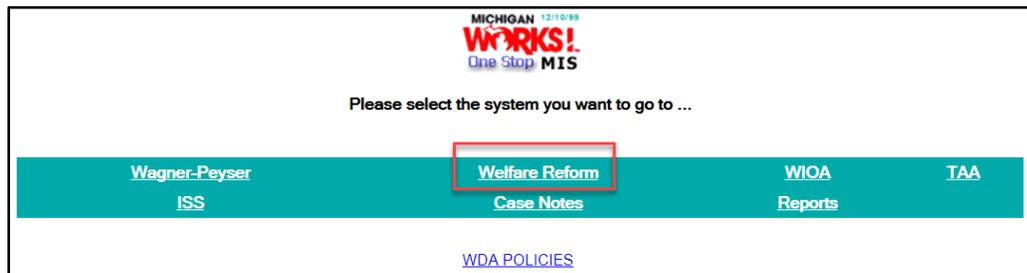
Instructions for Data Entry in the OSMIS

The internet can be used to access the OSMIS.

Enter user name and password and click the “Log In” button.



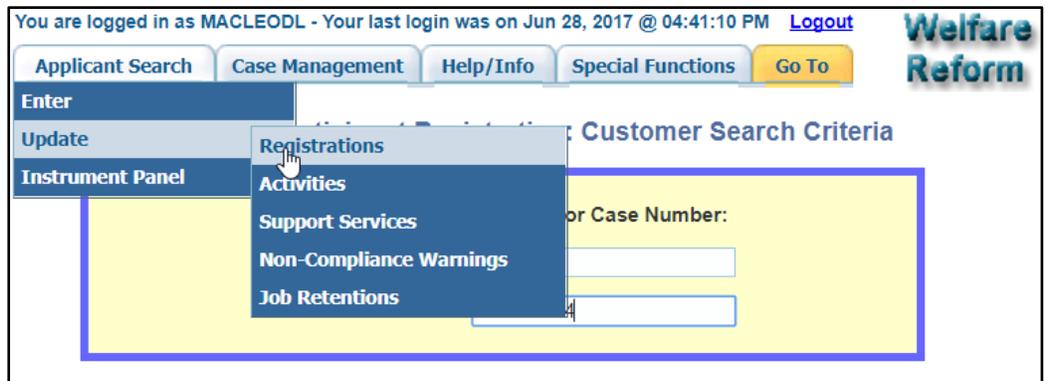
Click on “Welfare Reform.”



Searching for a Participant

Hover over “Applicant Search,” then use the mouse to scroll down to “Update” and over to “Registration,” and click the left mouse button.





The “Customer Search Criteria” includes Client/Recipient ID or the MDHHS Case Number for a quick search. If these numbers are not available, try to search on the Customer ID (*first three letters of the last name, first two letters of the first name and month and day of birthdate, ex: John Smith’s birthday is November 3, 1983, = smijo1103*), or First and Last Name. Enter one of the values and click the “Submit” button.

The screenshot displays the 'Update/View Participant Registration: Customer Search Criteria' form. It is divided into three main search sections, each with a 'Submit' and 'Reset' button. The first section, 'Search by Client/Recipient ID or Case Number:', has two input fields: 'Client/Recipient ID:' and 'Case Number:'. Red arrows point to both fields. The second section, 'Search by Customer ID:', has one input field: 'Customer ID:'. A red arrow points to this field. The third section, 'Search by Last Name first:', has three input fields: 'Last Name:', 'First Name:', and 'Date of Birth:'. Red arrows point to the 'Last Name:' and 'First Name:' fields. A red arrow also points to the 'Submit' button at the bottom of the form.

The customer's information will display if there is an existing Welfare Registration. Click on the customer's name to proceed to the Participant History. *If an error message occurs, the electronic referral from Bridges failed, and the MWA or Plus Contractor must contact the MDHHS.*

Welfare Registration: Customer Search Results

Click on the **Name** column to view existing Participation History (if one exists) or to create a new Welfare record.
If the individual you are searching for does not appear, click on "New Search" to conduct a new search.

You searched for Client/Recipient ID: **44855** with Case Number: .

Showing 1 to 1 of 1 entries Search:

Customer Name	Birth Date	Customer ID	Address	Phone	Welfare (WF,NCP,NCR,FS) Participant?	MWA
MEGAN	11/02/19...		Detroit, MI 48219	(313) 544-...	Yes	07

From the Participant History screen, look for Food Stamps in the Program column along with a *Pending* "Part. Status," click on Food Stamps to access the record. *If the top row displays "Inactive" as the "Part. Status," a new electronic referral is needed from MDHHS via Bridges. A new referral is also needed if the top row displays a Program other than Food Stamps.*

MICHIGAN 12/10/89 **WORKS!** One Stop MIS You are logged in as MACLEODL - Your last login was on Dec 29, 2017 @ 01:14:42 PM [Logout](#) **Welfare Reform**

Welfare Registration: Participant History

Participant Name	Cust. ID	Clnt/Rec. ID	Current Staff	Staff Location
MEGAN	E110	44855	LISA M MACLEOD	VICTOR BLD

* This customer has 3 total Welfare participations *

Showing 1 to 3 of 3 entries Search:

Program	Referral Type	Last Date to Attend Orientation	Date Attended Orientation	AEP Status	Part. Status	Entered Activity	Termination Date	Termination Reason	Case Closed Date	Ineligible Date	MWA
Food Stamps	FAP Family	12/31/2017	-	N/A	Pending	-	-	-	-	-	7
Food Stamps	FAP Family	11/17/2017	-	N/A	Inactive	-	-	-	-	-	7
Work First	Work First Referral - 1	09/20/2007	09/04/2007	Not an AEP	Inactive	09/04/2007	05/29/2008	Case closed due to Earnings	04/22/2008	-	7

Registering the Participant

The customer must be provided an orientation prior to the LDTA to be registered in the OSMIS. The MWA may extend the LDTA to prevent the electronic referral from expiring.

The following screenshots represent fields that must be completed at the time the registration is entered in the OSMIS:

- "Date Attended Orientation."
- "Limited English" – Yes, if the participant speaks English as a second language.
- "FAE&T Plus" Special Initiative Indicator **must** be set to "Yes."

- “Region Code” or a similar value in the “Optional Data1” field must be entered to correctly identify the Plus Contractor associated with participant.
- A “Case Manager” must be selected to identify the staff associated with the participant and to facilitate receiving automated emails from the OSMIS.

General Orientation

Last Date to Attend Orientation: 01/26/2018 

Appointment Office Name: _____

Appointment Date: _____

Date Attended Orientation: _____  

Earliest Activity Start Date: _____

Barriers To Employment

Transportation:

Child Care:

Personal / Health:

Education Workplace Skills:

Situational:

 Limited English: 

Education and Training Outcomes During Enrollment

Attainment of High School Degree/GED:

Attainment of Associates Degree:

Attain Other Post-Secondary Degree:

Other Training Credentials:

Special Initiative Indicators

Regional Skills Alliance Participant:

Community Venture Participant:

Skilled Trades Training Fund Participant Indicator: _____

Navigator Referred: _____

SNAP E & T WIA Initiative:

SNAP E & T WIA Initiative Date: _____  

FAE&T Plus:

Local MWA Information

Region Code: 

Optional Data1: 

Optional Data2:

Optional Data3:

Auditing Data

Referral (Registration) Date: 01/02/2017
 Serviced By: BRIDGES GENERATED (FIA_KENT)
 Case Manager: MACLEOD LISA - Username: MACLEODL
 Email Address: MACLEODL@MICHIGAN.GOV
 MWA: 33
 Location: KENT
 Participation Status: Active
 Participation Status Date: 01/02/2017

If the registration transaction cannot be completed because of a missing race indicator, the MWA must enter the appropriate race by accessing the “Admin Utilities” tab in OSMIS and clicking on “Update EEO Fields.”

MICHIGAN WORKS! One Stop MIS

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Applicant Search Case Management Help/Info Performance Reports Special Functions

Go To
 Admin Utilities
 Community Ventures
 Reports
 TAA
 WIOA
 Wagner-Peyser

Administrative Utilities

Showing 1 to 18 of 18 entries

Utility Name	
Change Client/Recipient ID	Go!
Change Common Measures Exit Reason Code	Go!
Change MWA (Non Custodial Parent Only)	Go!
Change Referral Type (Welfare Participations Only)	Go!
Un-Exit Latest Common Measures Participation	Go!
Update EEO Fields	Go!

The bottom of the Registration screen has additional navigational buttons to enter/update activities, enter/update supportive service and enter case notes. The case notes section must be updated **at least once a month**.

Participant History	Registration	Enter Activities	Update Activities	Enter Support Services	Update Support Services
Non-Compliance Warning	Instrument Panel	Enter Job Retention	Update Retention	View Welfare	Enter Tickler
Case Notes	Wagner-Peyser Participation	ISS Client Characteristics	TAA Participant History	WIOA Participant History	

Entering Activities

The first activity must always be “Orientation.”

Select the activity in which you are enrolling the participant, choose a location and click on the “Continue” button at the bottom of the screen.

Select the Activities in which you are enrolling the participant and click on the “Continue” button at the bottom of the screen.

Orientation

Unsubsidized Employment

Unsub Employment Prior to Referral

Work Experience

Workfare

Educational/Training Programs - FEET

Educational/Training Programs - Literacy

Vocational Occupational Training

Self-Employment Training

Dual Program - WIOA/TAA

Dual Program - Other

Job Search

Job Search Training

Job Retention Services

MRS Activity Other

Non-Participating ARAWD

Pending Deferral Determination

Service Date: 01/05/2018

Serviced By: LISA MACLEOD - MWA_ADM

Location: [Dropdown Menu]

[Continue](#)

Additional detail is required when enrolling a participant in an activity. Mandatory fields are indicated by a red arrow.

Hours: per week
Start Date: 01/03/2018
Estimated End Date:
End Date:
Completed Activity?
MISCELLANEOUS
Comments:
Sub Code:
Optional Data A:
Optional Data B:

After entering the information about the activity, click on the “Insert” button.

AUDIT INFORMATION
Service Date: 01/10/2018
Serviced By: **LISA MACLEOD - MWA_ADM**
MWA: 33
Location:

The following applies to the Orientation activity:

- The start date auto populates to equal the date the customer attended orientation and cannot be changed.
- The end date is restricted to no more than 14 days after the start date; however, the end date can equal the start date.
- If the activity is not end dated within the 14-day period, OSMIS will end date the activity and set the “completed activity” indicator to “No.”
 - The case manager, designated on the registration page, will receive the following email and must change the indicator to “Yes” if the participant completed Orientation.

Dear LISA MACLEOD,
OSMIS has set the "End Date" of an Orientation Activity for participant **ORIENTATION ONLY VOLUNTEER** with Client/Recipient ID **1147722**.
In addition, the same activity's "Completed Activity" indicator was set to 'No'. Please update the information for this activity, if needed. You may access directly the above activity in OSMIS by clicking on the link below:
[Access the Orientation Activity here...](#)
This is an automated message from OSMIS. Please do not respond or reply to this message. Should you have any questions about this message, feel free to contact your OSMIS customer support team.

Entering Actual Hours for Activities

Actual hours of participation must be entered for **all** FAE&T Plus participants. Hours are recorded weekly, and the weeks are based on the calendar month. It is a best practice to have all entry of hours completed three days before the end of each month. Hours are sent from the OSMIS to the Bridges system nightly.

The Plus Contractor must notify the MWA if they receive documentation of participation for the previous month, and the hours cannot be entered due to the OSMIS receiving a FAP case closure and the record being inactivated.

Entering “Actual Hours” can be accessed from either the “Enter Activities” screen or the “Update Activities” screen.

Clicking on “Enter” in the “Actual Hours” column opens the “Enter Actual Hours” screen.

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
SHANNON	1204	8664	J9038	ABAWD TLFA	01/18/2018 - Open	Approved	12/31/2018	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$245 for Aug 2018 View All	26 hrs/month as of Aug 2018 View All	80 for Sep 2018 View All	No as of Sep 2018 View All	Yes as of Sep 2018 View All	0 as of 08/22/2018	-		

Program: Food Stamps
Attended General Orientation Date: 08/22/2018

Showing 1 to 2 of 2 entries

Activity	Begin Date	Est. End Date	End Date	Employer Name	Hours	Service Location	Actual Hours
Educational/Training Programs - EEST	08/23/2018	-	-	-	10	Three Rivers Service Center	Enter
Orientation	08/22/2018	-	-	-	8	Three Rivers Service Center	Enter

Hours must be entered for each week of an activity. The week time period runs from Sunday to Saturday, and you cannot enter hours for a given week until today’s date is subsequent to Sunday’s date of the week you want to enter. If you wish to skip a week, you must enter “0” hours for that week.

Enter Actual Hours: Educational/Training Programs - EEST

[Instrument Panel](#)

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
SHANNON	204	4176	10048	ABAWD TLFA	01/18/2018 - Open	Approved	12/31/2018	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$245 for Aug 2018 View All	26 hrs/month as of Aug 2018 View All	80 for Sep 2018 View All	No as of Sep 2018 View All	Yes as of Sep 2018 View All	0 as of 08/22/2018	-		

Showing 1 to 1 of 1 entries

Row#	Calendar Month	Week Begin Date	Week End Date	Actual Hrs
1	Aug 2018	08/19/2018	08/25/2018	<input type="text" value="10"/>

Entering Projected Hours

Hours for most activities must be entered week-by-week. However, for **employment activities, basic literacy, and vocational training**, hours can be auto-filled up to 90 days into the future from the current date. This would be the number of hours the participant is expected to participate in the activity.

If the MWA chooses this option:

- The participation must be confirmed monthly.
- The projection must be changed at the point the MWA or Plus Contractor is made aware the actual participation is less than the projected value.

On the “Enter Actual Hours” screen, type in the number of hours for the activity, select the beginning week and the ending week and then click “Autofill Actual Hours.” Rows will be highlighted in **bold font** if the week spans across two calendar months.

Enter Actual Hours: Vocational Occupational Training

Instrument Panel

Participant Name	Cust ID	Client/Rec. ID	Case No	Referral Type	FAP Elig. Period	FAP Case Status	Case Review	Extension Began
SHANNON	1204	4176	10046	ABAWD TLFA	01/18/2018 - Open	Approved	12/31/2018	-
FAP Grant	Household Workfare/Work Experience	Monthly Req. Hrs	Multiple ABAWD	TLFA	Countable Months	Regain Eligibility		
\$245 for Aug 2018 View All	26 hrs/month as of Aug 2018 View All	80 for Sep 2018 View All	No as of Sep 2018 View All	Yes as of Sep 2018 View All	0 as of 08/22/2018	-		

Use this section to auto-fill Actual Hours for the given Date Range :

Enter these Actual Hours: ←

for the inclusive range of weeks between the week starting: ←

and the week starting: ←

Showing 1 to 17 of 17 entries

Row#	Calendar Month	Week Begin Date	Week End Date	Actual Hrs
1	Aug 2018	08/19/2018	08/25/2018	<input type="text"/>
2	Aug 2018	08/26/2018	08/31/2018	<input type="text"/>
3	Sep 2018	09/01/2018	09/01/2018	<input type="text"/>
4	Sep 2018	09/02/2018	09/08/2018	<input type="text"/>
5	Sep 2018	09/09/2018	09/15/2018	<input type="text"/>

The hours entered for those weeks will reflect the prorated amount based on the number of days in each calendar month. The Plus Contractor may choose to edit the hours before clicking “enter.”

Row#	Calendar Month	Week Begin Date	Week End Date	Actual Hrs
1	Aug 2018	08/19/2018	08/25/2018	<input type="text" value="10"/>
2	Aug 2018	08/26/2018	08/31/2018	<input type="text" value="9"/>
3	Sep 2018	09/01/2018	09/01/2018	<input type="text" value="1"/>
4	Sep 2018	09/02/2018	09/08/2018	<input type="text" value="10"/>
5	Sep 2018	09/09/2018	09/15/2018	<input type="text" value="10"/>

Hours entered may be viewed by accessing the “Actual Hours Status” page.

List of Actual Hours for weeks starting on or after 01/01/2018 and ending on or before 02/10/2018.

Hint: Mouse over the activity code to view the activity name ...

Showing 1 to 8 of 8 entries

Calendar Month	Weekly Period	15	50	67	TOTAL
Jan 2018	01/01/2018 - 01/06/2018	5	13	15	33
Jan 2018	01/07/2018 - 01/13/2018	-	15	-	15
Jan 2018	01/14/2018 - 01/20/2018	-	15	-	15
Jan 2018	01/21/2018 - 01/27/2018	-	15	-	15
Jan 2018	01/28/2018 - 01/31/2018	-	9	-	9
Feb 2018	02/01/2018 - 02/03/2018	-	6	-	6
Feb 2018	02/04/2018 - 02/10/2018	-	15	-	15
TOTAL		5	88	15	108

Changing the Activity “Begin Date” and/or “End Date” and the Effect on “Actual Hours”

Weeks in which Actual Hours are entered must fall between the Begin Date and the End Date of the activity.

Activity “Start Date” Change

If hours have been entered for an activity and the Start Date is then moved backward, the OSMIS will create these weeks and enter “0” for the new weeks added.

The original activity Start Date is December 12th.

Update Activity: Job Search Training

[Instrument Panel](#)

Customer ID	Client/Rec. ID	Case No	Referral Type
FOOTE0105			Volunteer
Household Workfare / Work Experience		Monthly Required Hours	Multiple ABAWD Household
-			

↔ Hours: per week

↔ Start Date:

The activity Start Date is moved back a week to December 5th.

Update Activity: Job Search Training

[Instrument Panel](#)

Customer ID	Client/Rec. ID	Case No	Referral Type
FOOTE0105			Volunteer
Household Workfare / Work Experience		Monthly Required Hours	Multiple ABAWD Household
-			

↔ Hours: per week

↔ Start Date:

The new week is added and zero hours display in the “Actual Hrs” field. The MWA can edit this value if participation was documented for this timeframe.

Row#	Calendar Month	Week Begin Date	Week End Date	Actual Hrs
1	Dec 2016	12/04/2016	12/10/2016	<input type="text" value="0"/>
2	Dec 2016	12/11/2016	12/17/2016	<input type="text" value="3"/>
3	Dec 2016	12/18/2016	12/24/2016	<input type="text" value="3"/>
4	Dec 2016	12/25/2016	12/31/2016	<input type="text" value="3"/>

Activity “End Date” Change

If hours have been entered for an activity and the End Date is changed to a date prior to weeks for which hours have already been entered, the system will delete any hours past the End Date of the activity.

The hours entered for the week of December 25th will be deleted when the End Date is changed to December 23rd.

Row#	Calendar Month	Week Begin Date	Week End Date	Actual Hrs
1	Dec 2016	12/04/2016	12/10/2016	<input type="text" value="0"/>
2	Dec 2016	12/11/2016	12/17/2016	<input type="text" value="3"/>
3	Dec 2016	12/18/2016	12/24/2016	<input type="text" value="3"/>
4	Dec 2016	12/25/2016	12/31/2016	<input type="text" value="3"/>

Hours will be deleted by ending the activity on 12/23

The hours for the week of December 25th have been successfully removed.

Row#	Calendar Month	Week Begin Date	Week End Date	Actual Hrs
1	Dec 2016	12/04/2016	12/10/2016	<input type="text" value="0"/>
2	Dec 2016	12/11/2016	12/17/2016	<input type="text" value="3"/>
3	Dec 2016	12/18/2016	12/24/2016	<input type="text" value="3"/>

Entering Supportive Services

The MWA or Plus Contractor must enter in the OSMIS all supportive services provided to the participant where reimbursement will be requested. The following applies to the “Enter Support Services” screen:

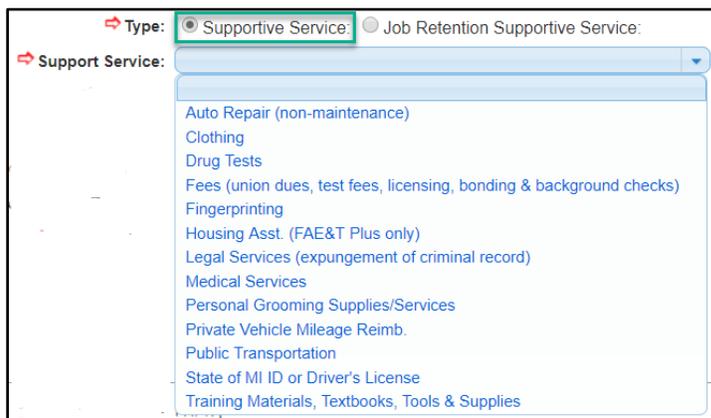
- Select “Supportive Service” if it was provided to remove a barrier related to involvement in an assigned E&T activity.
- Select “Job Retention Supportive Service” if it was provided to assist with maintaining employment.
 - The OSMIS will confirm the participant has a JRS activity before allowing this “Type” to be selected. Upon submission, if the activity does not exist an error message will display.

▲ Alert Message

- There must be an existing 'Job Retention Services' activity in order to enter this support service type.
- Current support service can not be completed. Please correct above errors and re-submit request

Support Service:

- Select an item from the dropdown list that matches the support provided. The items in the lists are based on the “Type” selected.



The screenshot shows a form with two radio buttons under the label "Type:". The first radio button, labeled "Supportive Service:", is selected and highlighted with a green box. The second radio button, labeled "Job Retention Supportive Service:", is unselected. Below the radio buttons is a dropdown menu labeled "Support Service:". The dropdown is open, showing a list of support services: Auto Repair (non-maintenance), Clothing, Drug Tests, Fees (union dues, test fees, licensing, bonding & background checks), Fingerprinting, Housing Asst. (FAE&T Plus only), Legal Services (expungement of criminal record), Medical Services, Personal Grooming Supplies/Services, Private Vehicle Mileage Reimb., Public Transportation, State of MI ID or Driver's License, and Training Materials, Textbooks, Tools & Supplies.



The screenshot shows a form with two radio buttons under the label "Type:". The second radio button, labeled "Job Retention Supportive Service:", is selected and highlighted with a green box. The first radio button, labeled "Supportive Service:", is unselected. Below the radio buttons is a dropdown menu labeled "Support Service:". The dropdown is open, showing a list of support services: Auto Repair (non-maintenance), Clothing, Fees (union dues, test fees, licensing & bonding), Personal Grooming Supplies/Services, Private Vehicle Mileage Reimb., Public Transportation, and Work Tools & Equipment.

Amount:

- Enter the dollar value paid for with non-federal funding.

Check Number:

- Enter number of the payment document, if applicable.

Expenditure Begin Date:

- Enter the begin date of the period the support covers, if applicable.

Expenditure End Date:

- Enter the end date of the period the support covers, if applicable.

Date Received:

- Enter the date the participant received the support. *The date must be less than or equal to today's date and greater than or equal to the "service date."*

Comment:

- Enter any supplemental information.

Funding Source:

- Select “FAE&T Plus.”



Service Date:

- Enter the date it was determined the support would be provided. *The date must be less than or equal to the “date received.”*

Location:

- Select the location from the dropdown list.

When a supportive service record has been inserted, the OSMIS will create a Case Note that will include the following data:

- Date: Today’s date.
- Program: FS.
- Subject: SUPPORT SERVICE.
- Comments: Type, Name, Amount, Date Received, Funding Source, Comments entered and Service Date (all applicable if present in the support service record).
- MWA: The MWA number associated with participant record.
- Staff: Name of person who entered the support service record.
- Location: Location associated with support service record.

Showing 1 to 1 of 1 entries									
#	Date	Program	Subject	Comments	MWA	Staff	Location	Search:	
1	01/26/2018	FS	SUPPORT SERVICE	Type: Supportive Service Name: Public Transportation Amount: \$42 Date Received: 01/02/2018 Funding Source: FAE&T SS Comments: Monthly bus pass provided to support job search activities Service Date: 01/02/2018	33	LISA MACLEOD	Ottawa County MWA		

If the support service record is modified, a new case note will be added. The MWA may delete the original case note if appropriate.

The summary view of all supportive services provided is broken down based on the funding source selected: FAE&T or FAE&T Plus.

	All Programs	PATH	FAET	FAET Plus	WIA	WIOA	TAA
Total Support Services Received, to Date:	\$682.00	\$0.00	\$226.00	\$456.00	\$0.00	\$0.00	\$0.00
Total Support Services Received, last 12 months:	\$682.00	\$0.00	\$226.00	\$456.00	\$0.00	\$0.00	\$0.00
Total Clothing Services Received, last 12 months:	\$177.00	\$0.00	-	-	\$0.00	\$0.00	-
Total Auto Repair Services Received, last 12 months:	\$47.00	\$0.00	\$47.00	\$0.00	\$0.00	\$0.00	-
Total Auto Purchase Services Received, lifetime:	\$0.00	\$0.00	-	-	-	-	-

Entry of Educational and Training Outcomes

The MWA must enter into the OSMIS all participants' educational and training outcomes prior to termination/case closure. As a best practice, the MWA should enter educational outcomes when they are attained. In the registration component of the OSMIS, case managers will be required to indicate whether or not the participant obtained a high school diploma/GED, an associate's degree, another post-secondary degree, or other training credentials during the enrollment. All educational and training outcomes must be verified by the MWA prior to being entered into the OSMIS.

Ending Participation and Termination Reasons in the OSMIS

The participant may remain in FAE&T Plus until:

- Notified by the MDHHS of the participant's FAP ineligibility (except for those engaged in JRS, as described earlier in this policy).
- Notified by the MDHHS of the participant's application for TANF benefits and a new referral to the MWA.
- The participant chooses not to participate in FAE&T Plus.
- The participant moves out of the MWA service delivery area.
- The FAP Family participant becomes age 60 and is no longer eligible for FAE&T Plus.

The case manager, as designated on the registration screen, will be notified via an email message when a FAP case closure is received, and termination from the OSMIS is required.

Prior to terminating the participant, all actual hours must be entered and an end date must be entered for each activity.

Termination Status Reasons

System Termination – Customer returned to DHHS: Displays when Bridges sends the OSMIS a closure due to the customer enrolling in the Self-Initiated Community Service activity with the MDHHS.

System Termination – No Activity: Displays for customers that do not have activities or actual hours entered in the OSMIS for 100 days. Reimbursement is not allowed.

System Termination – New FAE&T or JET Referral: Displays, when a new referral is received from Bridges and the individual is currently active in the OSMIS with FAE&T. The new referral will be accepted, and the current registration will be terminated.

Transfer County: Displays the "Transfer County Reason and Date Received from Bridges" when certain individuals move out of, or into, a county.

Deferral: Displays the "Deferral Date" received from Bridges. If the individual is employed and receiving JRS when the deferral is received, they may

choose to remain with the MWA for the duration of the JRS. Otherwise, they should be terminated.

The following reasons are available when terminating a customer due to no longer receiving food assistance benefits (FAP Closure) or choosing not to participate in FAE&T Plus:

- Case Closure.
- Completed Program Objectives.
- Deferred.
- Other.
- Transfer County.

Termination Status

(MWA) Termination Date:

Entered On:

Reason:

Employed at Termination:

Occupation at Termination:

Industry at Termination:

Hourly Wage:

Termination Sub Code:

Note: If the participant is an ABAWD subject to TLFA, the Plus Contractor must contact the MWA before terminating the customer from the OSMIS.

The participant information will be sent in the daily System Terminations email report if the individual was system terminated for turning age 60.

National Reporting Measures

The outcome data for the reporting measures below will be tracked in the OSMIS and provided to the FNS on an annual basis.

- The number and percentage of participants and former participants who are in unsubsidized employment during the second quarter after completion of participation in FAE&T Plus.
- The number and percentage of participants and former participants who are in unsubsidized employment during the fourth quarter after completion of participation in FAE&T Plus.
- The median quarterly earnings of all the participants and former participants who are in unsubsidized employment during the second quarter after completion of participation in FAE&T Plus.
- The number and percentage of participants that completed training, education, work experience, or an on-the-job training component.

The reports are available within Welfare Reform under the “Performance Reports” tab.



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[Applicant Search](#)
[Case Management](#)
[Help/Info](#)
[Performance Reports](#)
[Special Functions](#)
[Go To](#)

Welfare Reform

On Demand Performance Reports

* Funding Stream:

* MWA:

Display MWA Results:

Display Statewide Results:

Only Show Federal Template (for Statewide Results only):

Also, individual success stories will assist with evaluating the effectiveness of the activities delivered by the Plus Contractors. The MWA should be mindful of the opportunities to document these positive outcomes.

Invoice Process

The Plus Contractors must submit invoices monthly to the MWA, no later than the 10th of the following month. The last invoice of the fiscal year must be submitted within 45 days of the end of the fiscal year.

- All participants must have been eligible for FAE&T Plus at the time the cost was incurred for the Plus Contractor to qualify for reimbursement.
- Reimbursements are allowable beginning the month the Plus participant is registered in the OSMIS.
- Outcome and invoice reports will only include FAE&T Plus participants with actual hours entered in the OSMIS.

Each Plus Contractor must complete the following when requesting reimbursement from the MWA:

- The FAET-200 Plus Excel spreadsheet, titled “FAE&T Plus Invoice and Non-Federal Funds Certification,” must be completed to generate a monthly invoice of Plus expenditures.

The following must be included with the invoice:

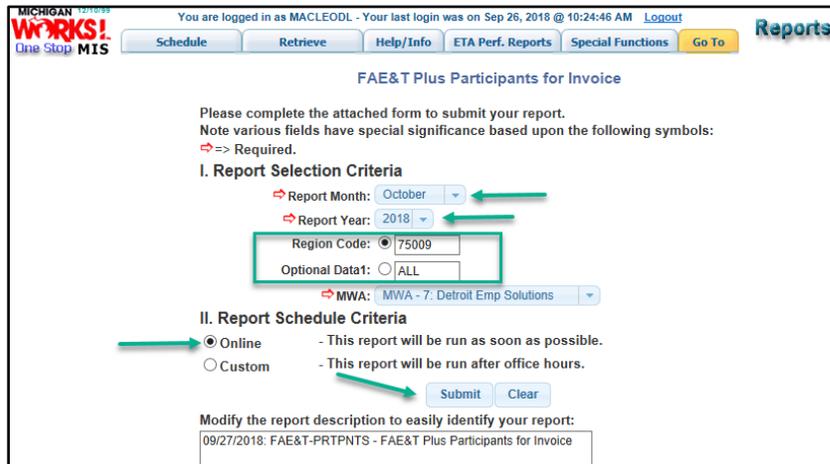
- The OSMIS report titled “FAE&T Plus Participants for Invoice.”
- The OSMIS report titled “FAE&T Plus Support Services for Invoice.”
- Line item detail and backup documentation for costs incurred.
- Signed “Non-Federal Funds Certification” form.

The “FAE&T Plus Participants for Invoice” report must be generated via the OSMIS “PRS” report section and attached to the invoice to substantiate FAE&T Plus eligibility.



Each Plus Contractor shall select the following before clicking on the Submit button to generate their individualized report:

- “Billing month.”
- “Billing year.”
- “Assigned Region Code” or “Optional Data1” to ensure the report only includes participants enrolled in their Plus program for the period of the invoice.



The report will only include participants that were designated as FAE&T Plus and where activities and hours were entered for the report month.

The “FAE&T Plus Support Services for Invoice” report must be generated via the OSMIS “PRS” report section and attached to the invoice to substantiate expenditures.



Each Plus Contractor shall select the following before clicking on the “Submit” button to generate their individualized report:

- “Billing month.”
- “Billing year.”
- “Assigned Region Code” or “Optional Data1” to ensure the report only includes participants enrolled in their Plus program for the period of the invoice.

MICHIGAN WORKS! One Stop MIS

You are logged in as MACLEODL - Your last login was on Sep 26, 2018 @ 10:24:46 AM Logout

Schedule Retrieve Help/Info ETA Perf. Reports Special Functions Go To Reports

F&E Plus Support Services for Invoice

Please complete the attached form to submit your report.
Note various fields have special significance based upon the following symbols:
⇒ Required.

I. Report Selection Criteria

⇒ Report Month: October

⇒ Report Year: 2018

Region Code: 75009

Optional Data 1: ALL

⇒ Funding Source: F&E Plus

⇒ MWA: MWA - 7: Detroit Emp Solutions

II. Report Schedule Criteria

Online - This report will be run as soon as possible.

Custom - This report will be run after office hours.

Submit Clear

Modify the report description to easily identify your report:
09/27/2018: F&E-T-SS - F&E Plus Support Services for Invoice

Civil Rights and Non-Discrimination Training

All Plus Contractor staff and their supervisors working with the participant must complete civil rights training within 30 days of the new contract term. Completion of this training must be documented and retained for future monitoring visits. **Understanding and Abiding by Title VI of the Civil Rights Act** can be viewed by clicking on the hyperlinked title. The MWA may provide an alternative training if prior approval is granted by the WDA.

Non-Discrimination Statement

All information materials used to inform the public about FNS programs, including forms given to program participants, must contain the following non-discrimination statement: “This institution is an equal opportunity provider.” It is not required that the statement be included on every page of the program material; however, in accordance with FNS Instruction-113, this shortened statement may be no smaller in print size than the text on the page in which it appears. Attached to this policy is the English version of the full non-discrimination statement that can be provided to participants. Additional language options can be found at [USDA Non Discrimination Statement](#).

Mandatory Posters

The MWA must provide the following to each Plus Contractor and ensure posters are displayed at the program location: the USDA, “And Justice for All” poster and the MWA complaint and grievance procedures. This only applies to the Plus Contractors outside the One-Stop Service Centers.

Confidentiality

The information contained in all program case records is confidential and may be released only under limited circumstances. The MDHHS confidentiality policy can be found in the [Bridges Administrative Manual](#). The privacy of individuals must be safeguarded, and the MWA may not release any information related to an individual participant. A customer, however, may consent to a release of information upon signing a release of information form. The MWA is also allowed to release aggregate data about participants. Aggregate data includes the total number of participants employed, the number of people enrolled in activities, etc. The MWA must adhere to these guidelines when administering this program.

Action: The MWA officials shall take the appropriate action to comply with this policy.

Inquiries: Questions regarding this policy should be directed to your Dislocated Services state coordinator at 517-373-6234.

This policy is available for downloading from the [WDA's website](#).

The information contained in this policy will be made available in an alternative format (large type, audio tape, etc.) upon request to this office. Please contact Ms. Pam Vance by telephone at 517-373-6234 or by email at vancep1@michigan.gov.

Expiration

Date: None

JB:LM:pv
Attachments

FAE&T PLUS INVOICE AND NON-FEDERAL FUNDS CERTIFICATION FAET-200 Instructions

The FAET-200 form is an Excel workbook that includes:

- A Required Information worksheet tab for entry of the Plus Contractor characteristics and Michigan Works! Agency (MWA) approved reimbursement funding levels.
- A worksheet tab for each month of the fiscal year.
 - The monthly worksheet tabs contain the FAE&T Plus invoices.
 - The Plus invoices are linked together with calculations to generate the fiscal year to date reimbursement values.
- A worksheet tab for the non-federal funds certification form for each month.
 - The non-federal funds certification forms are linked together with calculations to generate the fiscal year to date non-federal funds expended.

Instructions for filling out the Excel workbook:

- The MWA completes the blue highlighted cells in Section I of the Required Information worksheet tab. Once completed, the MWA provides an individualized Excel document to each Plus Contractor.
- The Plus Contractor completes the yellow highlighted cells in:
 - Section II of the Required Information worksheet tab.
 - The monthly worksheet for the invoice period where reimbursement is requested.
 - The non-federal certification worksheet for the month matching the invoice.
- The Plus Contractor maintains the Excel document and provides the MWA with a signed, hard or electronic, copy of the individual monthly invoice, the non-federal funds certification and all supporting documentation.

Required Information Worksheet

SECTION I – MICHIGAN WORKS! AGENCY USE ONLY

Michigan Works! Agency (MWA) Name: Enter the name of the MWA as it should be displayed on the top of each invoice.

Current Fiscal Year Funding: The Grant names for Program Delivery and Supportive Services are pre-populated.

Approved Budget for Plus Expenditures: Enter the amount of the approved budgets for Program Delivery and/or Supportive Services, as outlined in the contract agreement between the MWA and the Plus Contractor. The values should align with the Plus Contractor's budget approved by the Michigan Talent Investment Agency/Workforce Development Agency.

Amount Approved for Reimbursement (based on actual expenditures): *The cells calculate 40% of the Approved Budgets entered.*

SECTION II – PLUS CONTRACTOR USE ONLY

Plus Contractor Name: Enter the name of the Plus Contractor providing the services.

Address, City, State, and Zip Code: Enter the business address of the Plus Contractor.

Contact Person, Email, and Phone #: Identify a person and provide contact information for purposes of discussing the invoice contents.

Federal I.D. #: Enter the Plus Contractor's federal I.D. number, if applicable.

Contract #: Enter the number of the contract agreement between MWA and Plus Contractor.

F&T Plus Invoice Worksheets (Oct, Nov, Dec, Jan, Feb, Mar, Apr, May, June, July, Aug, Sept)

SECTION I – IDENTIFICATION

Plus Contractor Name: Name is pre-populated from the Required Information worksheet.

Address, City, State, and Zip Code: Business address is pre-populated from the Required Information worksheet.

Contact Person, Email, and Phone #: Contact information is pre-populated from the Required Information worksheet.

Report Type: Select "Original" if this is the first invoice for the identified month. Select "Revised" if this invoice represents a change from the first invoice submitted for the identified month.

Fund Source(s): The current fiscal year funding sources are pre-populated from the Required Information worksheet.

Maximum Approved Reimbursement: The maximum approved reimbursement values for Program Delivery and/or Supportive Services are pre-populated from the Required Information worksheet.

Invoice Begin Date: The first day of the month is pre-populated.

Invoice End Date: The last day of the month is pre-populated.

Invoice #: Enter a number to identify and track the invoice.

Federal I.D. #: Federal I.D. is pre-populated from the Required Information worksheet.

Contract #: Contract number is pre-populated from the Required Information worksheet.

SECTION II – PARTICIPANTS

Number of participants billed for program delivery costs: Enter the number of Plus participants served during the monthly invoice period. Note: this number should match the unique number of participants displayed on the FAE&T Plus Participants for Invoice report.

Number of participants billed for supportive services costs: Enter the number of Plus participants served during the monthly invoice period. Note: this number should match the unique number of participants displayed on the FAE&T Plus Support Services for Invoice report.

SECTION III – EXPENDITURES

Plus Contractor Expenditures (Non-Federal): Enter the amount of non-federal funds spent to provide FAE&T Plus services to eligible participants during the invoice period. List expenditures for Program Delivery separate from the Supportive Services.

Federal Reimbursement (40%): *The cells calculate 40% of the Plus Contractor expenditures entered.*

Fiscal Year to Date Reimbursements: *The cells calculate the cumulative value from this invoice and invoices submitted earlier in the fiscal year.*

Totals: *The cells calculate the sum of Plus Contractor expenditures, federal reimbursement, and fiscal year to date reimbursements.*

SECTION IV – REMARKS

This section describes the additional information required to be submitted with each invoice to qualify for reimbursement payments.

SECTION V – CERTIFICATION

Signature, Name and Title, and Date: Sign and date the invoice to certify the information provided is true and accurate. Enter the name and title of the person signing the invoice.

Date Received by MWA: The MWA must record the date the invoice was received from the Plus Contractor.

Non-Federal Funds Certification Worksheets (Oct, Nov, Dec, Jan, Feb, Mar, Apr, May, June, July, Aug, Sept)

SECTION I – APPROVED BUDGETS AND EXPENDITURES

Name of Plus Contractor: Name is pre-populated from the Required Information worksheet.

Funds Expended Begin Date: Date is pre-populated.

Funds Expended End Date: Date is pre-populated.

Total Non-Federal Funds Expended: Amount from the corresponding invoice is displayed.

Approved Program Delivery Budget: Amount pre-populated from the Required Information worksheet.

Program Delivery - Non-Federal Funds Expended this Month: Amount from the corresponding invoice is displayed.

Program Delivery - Non-Federal Funds Expended - Fiscal Year to Date: *This cell calculates the cumulative value from the corresponding invoice and invoices submitted earlier in the fiscal year.*

Approved Supportive Services Budget: Amount pre-populated from the Required Information worksheet.

Supportive Services - Non-Federal Funds Expended this Month: Amount from the corresponding invoice is displayed.

Supportive Services - Non-Federal Funds Expended - Fiscal Year to Date: *This cell calculates the cumulative value from the corresponding invoice and invoices submitted earlier in the fiscal year.*

SECTION II – NON-FEDERAL FUNDS

Source and Type of Non-Federal Funds: Enter the source and type of non-federal funds used to provide FAE&T Plus services during the invoice period.

Amount: Enter the amount of funds expended for each source and type identified.

Monthly Total: *The cell calculates the sum of the non-federal funds listed.* The total must match the total non-federal funds expended for the month.

SECTION III – CERTIFICATION

Name of Authorized Agent: Enter the name of the authorized agent.

Authorized Representative Signature and Date: Sign and date the certification form.

Authorized Representative Name, Title, and Phone number: Enter the name, title, and phone number of the authorized representative.

F&T Plus Invoice and Non-Federal Funds Certification	
SECTION I - MICHIGAN WORKS! AGENCY USE ONLY	
Michigan Works! Agency Name	
Current Fiscal Year Funding	
Grant Name for Program Delivery	FY19 F&T PLUS PROGRAM
Grant Name for Supportive Services	FY19 F&T PLUS SUPP SERVS
Approved Budget for Plus Expenditures	
Program Delivery	
Supportive Services	
Amount Approved for Reimbursement (based on actual expenditures)	
Program Delivery	\$0.00
Supportive Services	\$0.00
SECTION II - PLUS CONTRACTOR USE ONLY	
Plus Contractor Name	
Address	
City	
State	
Zip Code	
Contact Person	
Contact Email	
Contact Phone #	
Federal I.D. #	
Contract #	

Reminder:

The MWA shall complete the blue shaded fields before sending the spreadsheet to the Plus Contractor.

The Plus Contractor shall complete the yellow shaded fields.

FAET-200 Plus Invoice and Non Federal Certification (Revised 9/28/2018)

This institution is an equal opportunity provider.

Auxiliary Aids and Services Available to Individuals with Disabilities.

FAE&T Plus Invoice

0

SECTION I - IDENTIFICATION

Plus Contractor Name	0	Fund Source	FY19 FAE&T PLUS PROGRAM
		Fund Source	FY19 FAE&T PLUS SUPP SERVS
Address	0	Maximum Approved Reimbursement	
City	0	Program Delivery	\$ -
State	0	Supportive Services	\$ -
Zip Code	0		
Contact Person	0	Invoice Begin Date	10/01/18
Contact Email	0	Invoice End Date	10/31/18
Contact Phone #	0		
		Invoice #	
Report Type	<input type="checkbox"/> Original <input type="checkbox"/> Revised	Federal I.D. #	0
		Contract #	0

SECTION II - PARTICIPANTS

of Participants

Number of participants billed for program delivery costs	
Number of participants billed for supportive services costs	

SECTION III - EXPENDITURES

DESCRIPTION	Plus Contractor Expenditures (Non-Federal)	Federal Reimbursement (40%)	Fiscal Year to Date Reimbursements
Program Delivery (associated with the eligible participants)	\$ -	\$ -	\$ -
Supportive Services (a.k.a. participant reimbursements)	\$ -	\$ -	\$ -
Totals	\$ -	\$ -	\$ -

SECTION IV - REMARKS

The following must be attached to expedite payment of invoice:

1. OSMIS reports titled FAE&T Plus Participants for Invoice and FAE&T Plus Support Services for Invoice.
2. Line-item detail and back up documentation for program delivery and supportive services costs incurred.
3. Signed non-federal certification form.

SECTION V - CERTIFICATION

I certify to the best of my knowledge and belief, the information provided is true and accurate.

Signature	
Name and Title	
Date	

Date Received By MWA _____

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me and cash receipts are for the purposes to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

FAET-200 Plus Invoice and Non Federal Certification (Revised 9/28/2018)

This institution is an equal opportunity provider. Auxiliary Aids and Services Available to Individuals with Disabilities.

Non-Federal Funds Certification FAE&T Plus

This form must be submitted with each FAE&T Plus Invoice

SECTION I - APPROVED BUDGETS AND EXPENDITURES

Name of Plus Contractor	0
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Funds Expended Begin Date	10/01/18
Funds Expended End Date	10/31/18
Total Non-Federal Funds Expended	\$ -

Approved Program Delivery Budget	\$ -
Program Delivery - Non-Federal Funds Expended this Month	\$ -
<i>Program Delivery - Non-Federal Funds Expended - Fiscal Year to Date</i>	<i>\$ -</i>

Approved Supportive Services Budget	\$ -
Supportive Services - Non-Federal Funds Expended this Month	\$ -
<i>Supportive Services - Non-Federal Funds Expended - Fiscal Year to Date</i>	<i>\$ -</i>

SECTION II - NON-FEDERAL FUNDS

The following non-federal funds were used to operate the FAE&T Plus program during the period indicated above. The funds were used to provide approved services to eligible FAE&T participants and not used to match any other Federal program.

Source and Type of Non-Federal Funds	Amount
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
Monthly Total	\$ -

Note: the total must match the total non-federal funds expended from above.

SECTION III - CERTIFICATION

Name of Authorized Agent		
Authorized Representative Signature		Date:
Name of Authorized Representative		
Title		Phone Number:

FAET-200 Plus Invoice and Non Federal Certification (Revised 9/28/2018)

This institution is an equal opportunity provider. Auxiliary Aids and Services Available to Individuals with Disabilities.



USDA Nondiscrimination Statement

SNAP and FDPIR State or local agencies, and their subrecipients, must post the following Nondiscrimination Statement:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: [How to File a Complaint](#), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.



Verification of Employment Hours
Food Assistance Employment and Training Plus

Participant Name:	Client/Recipient ID:
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EMPLOYMENT INFORMATION
Section 1 – To be completed by Employer or by MW! Staff if via phone contact

Employer Name:	
Employer Address:	City, State:
Phone:	Fax:
Date Employment Began:	Average Actual Weekly Hours Worked:
Wage:	Job Title:
If available, please provide	
Date of First Paycheck:	
How Often Paid? <input type="checkbox"/> Weekly <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Every 2 Weeks <input type="checkbox"/> Monthly	
Day of Week Paid: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	

Section 2 – To be completed by Employer

Name of Person Completing Form:	Title:
Signature:	Date:

Section 3 – To be completed by MW! Staff if verified via phone

Name of Employer's Staff Verifying Employment Hours:
Name of MW! Staff:
Title of MW! Staff:
Date of Phone Call:



Work Experience Log

Food Assistance Employment and Training Plus

Sunday:	to Saturday:	Due Date and Time:
Participant Name:		Client/Recipient ID:
Required Hours:	(Optional Data) Name of 2 nd person referred from a Multiple ABAWD Household:	

In accordance with the Fair Labor Standards Act, your maximum monthly hours limit for Work Experience is

Date	Actual Hours of Participation	Name of Worksite	Person Verifying Hours of Participation Must Complete the Following
			Name:
			Phone/Email:
			Signature:

Total Hours:
Participant Signature:

By signing above, I agree the information I have provided is true to the best of my knowledge. I understand that I am only able to complete the number of hours according to the Fair Labor Standards Act. Any amount of time I have completed in excess was done so voluntarily.



Job Search Training and Education Log Food Assistance Employment and Training Plus

Participant Name:	Client/Recipient ID:	Due Date:
Week Begin Date (Sunday):	Week End Date (Saturday):	Required Hours:

Date	Check an Activity (Abbreviations explained below)	Location of Activity Name and Address (Where did you participate?)	Describe Activity (What did you do?)	Actual Hours
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			
	<input type="checkbox"/> BL <input type="checkbox"/> EEST <input type="checkbox"/> JST <input type="checkbox"/> VT			

Participant Signature:	Total Hours Above:
------------------------	--------------------

By signing above, I agree the information I have provided is true to the best of my knowledge.

Activity Abbreviations: BL – Basic Literacy/GED; EEST – Employment Enhancement Skills Training; JST – Job Search Training; VT – Vocational Training
 FAET – 402 Plus Job Search and Education Log (Revised: 08/30/2018)
 This institution is an equal opportunity provider.
 Auxiliary Aids and Services Available to individuals with Disabilities.



Job Search Log

Participant Name:	Client/Recipient ID:	Due Date and Time:
Week Begin Date (Sunday):	Week End Date (Saturday):	

Date	Employer Name & Phone Number	Employer Address or Website Address	Activity	Actual Time Spent
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:
			<input type="checkbox"/> Interview <input type="checkbox"/> Application <input type="checkbox"/> Resume <input type="checkbox"/> Follow up <input type="checkbox"/> Internet <input type="checkbox"/> Other:	<input type="checkbox"/> 15min <input type="checkbox"/> 30min <input type="checkbox"/> 45min <input type="checkbox"/> 60min <input type="checkbox"/> More than 1 hour:

Participant Signature:	Total Hours Above:
------------------------	--------------------

By signing above, I agree the information I have provided is true to the best of my knowledge.

FAET – 403 Plus Job Search and Education Single Activity Log (Revised: 08/30/2018)
 This institution is an equal opportunity provider.
 Auxiliary Aids and Services Available to individuals with Disabilities.



**Food Assistance Employment and Training Plus (FAE&T Plus)
Acknowledgement Form**

Service Provider/Contractor:

Participant/Job Seeker Name:

FAE&T Plus is designed to assist adults with their educational and career goals. As a Plus participant I agree to be placed in career path activities focusing on my goal towards employment and self-sufficiency. I understand that wrap around services and resources to assist with barriers to participation will be provided, as available. I understand this is a voluntary program and if at any time I choose not to participate it will not affect my food assistance.

As a Food Assistant Program (FAP) recipient, I understand I must follow certain work-related requirements* to receive food assistance and my FAP benefits may be affected if I do any of the following:

- Voluntarily quit a job of 30 or more hours per week without good cause,
- Voluntarily reduce hours of employment below 30 hours a week without good cause, or
- Refuse to accept a bonafide offer of employment.

Participant/Job Seeker Signature:	Date:
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Staff Signature:	Date:
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***Note: an able-bodied adult without dependents (ABAWD) that is subject to time-limited food assistance must also meet the ABAWD work requirement to maintain food assistance.**