

Appendix I: Required Data Elements for Enrollment Forms

On July 22, 2015, the Departments of Labor and Education published a notice in the Federal Register announcing the joint information collection request for performance reporting to fulfill the requirements under section 116 of the Workforce Innovation and Opportunity Act. This represents a collaborative effort among staff from the Department of Labor's Employment and Training Administration and the Department of Education's Office of Career Technical, and Adult Education and the Rehabilitation Services Administration. The information collection request included WIOA common data elements, known as the Joint Participant Individual Record Layout (PIRL), with common definitions and data elements, to be used by states for reporting purposes. These common data elements are anticipated to be included in upcoming versions of the NRS Implementation Guidelines. The final ICR and related reporting regulations have not been released at the time of the publication of this guide. The information outlined below is current as of 6/13/16, but may be revised pending release of final reporting regulations.

More information on WIOA reporting can be found at: <http://www-tcall.tamu.edu/twcael/wioa.htm>

The following common data elements are required to be collected from participants by all Texas grant recipients and their providers.

- Items marked with a ^P are considered Personally Identifiable Information (PII).
- Items marked with ^{SP} are considered sensitive PII¹ and must be protected.
- Items marked with a ^{*SP} are only considered sensitive PII when they are paired with an individual's last name and first initial.
- For more information on protecting PII please see **Attachment 1**.

Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Identifying Information	Enrollment Date	Date that individual is beginning service in the adult education and literacy program	MM/DD/YYYY	Yes

¹ Sensitive PII that is not tied to an individual's last name and first initial is considered sensitive when it is combined with other information that can identify the individual. See Attachment 1 for more information.

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Identifying Information	Participant Name ^P	Salutation, last, first name and middle initial of participant	Salutation <ul style="list-style-type: none"> • Mr. • Ms. • Mrs. • Dr. Last name ^P First name ^P Middle Initial ^P	Yes
Identifying Information	Document Type (one only) ^P	Type of document being used to capture an identifying number for the participant	<ul style="list-style-type: none"> • Social Security Number (preferred) • Driver's License • Locally Assigned Number • Other 	Yes
Identifying Information	Document Number ^{SP}	Number corresponding to the document type	User-entered number (open-entry)	Yes
Identifying Information	Mailing Address ^P	Participant mailing address	<ul style="list-style-type: none"> • Street • City • State • Zip 	Yes
Identifying Information	Phone Number ^P	Phone number	<ul style="list-style-type: none"> • Mobile Telephone # • Work Telephone number • Home Telephone Number 	Yes
Identifying Information	Email Address ^{SP}	Email address	Email address	Yes
Equal Opportunity Information	Date of Birth ^{*SP}	Date of birth of the participant	MM/DD/YYYY	Yes
Equal Opportunity Information	Gender	Gender indicated by participant	<ul style="list-style-type: none"> • Male • Female • Participant did not self-identify 	Yes with some changes

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Equal Opportunity Information	Individual with a Disability ^{*SP}	Whether the participant indicates that he/she has any "disability", as defined in Section 3(2)(a) of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102). Under that definition, a "disability" is a physical or mental impairment that substantially limits one or more of the person's major life activities.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-disclose 	Yes with some changes
Equal Opportunity Information	Category of Disability ^{*SP}	Category of disability	(Select all that apply) <ul style="list-style-type: none"> • Physical/Chronic Health Condition • Physical/Mobility Impairment • Mental or Psychiatric Disability • Vision-related disability • Hearing-related disability • Learning Disability • Cognitive/Intellectual • Participant did not disclose type of disability • No disability 	No
Equal Opportunity Information	Learning-Disabled Adult ^{*SP}	Whether the individual indicates that he/she has a learning disability, as defined as a Learner with an IQ in the low-average and above level (70+ to any level) who has deficits (related to neurological impairments) in capacity in defined limited learning areas; this can include dyslexia (reading disability), dysgraphia (writing disability), and dyscalculia (math disability). The learner also has a history of previous educational efforts.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-disclose 	Yes

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Equal Opportunity Information	Ethnicity: Hispanic/Latino	Whether the participant indicates that he/she is a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture in origin, regardless of race.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-identify 	Yes
Equal Opportunity Information	Race: American Indian/Alaskan Native	Whether the participant indicates that he/she is a member of an Indian tribe, band, nation, or other organized group or community, including any Alaska Native village or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688) [43 U.S.C. 1601 et seq.], which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-identify 	Yes
Equal Opportunity Information	Race: Asian	Whether the participant indicates that he/she is a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent (e.g., India, Pakistan, Bangladesh, Sri Lanka, Nepal, Sikkim, and Bhutan). This area includes, for example, Cambodia, China, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-identify 	Yes
Equal Opportunity Information	Race: Black/African American	Whether the participant indicates that he/she is a person having origins in any of the black racial groups of Africa.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-identify 	Yes
Equal Opportunity Information	Race: Native Hawaiian/ Other Pacific Island	Whether the participant indicates that he/she is a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-identify 	Yes
Equal Opportunity Information	Race: White	Whether the participant indicates that he/she is a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-identify 	Yes

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Veteran Characteristics	Veteran Status ^{*SP}	Whether the participant is a person who served on active duty in the armed forces and who was discharged or released from such service under conditions other than dishonorable. Record 0 if the participant does not meet the condition described above.	<ul style="list-style-type: none"> • Yes • No • Participant did not self-disclose 	No
Veteran Characteristics	Eligible Veteran Status ^{*SP}	<ul style="list-style-type: none"> • Whether the participant is a person who served in the active U.S. military, naval, or air service for a period of less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable; (select Yes, <=180) or • Whether the participant served on active duty for a period of more than 180 days and was discharged or released with other than a dishonorable discharge; or was discharged or released because of a service connected disability; or as a member of a reserve component under an order to active duty pursuant to section 167(a), (d), or (g), 673 (a) of Title 10, U.S.C., served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized and was discharged or released from such duty with other than a dishonorable discharge; (select Yes, eligible veteran) or • Whether the participant is: (a) the spouse of any person who died on active duty or of a service connected disability, (b) the spouse of any member of the Armed Forces serving on active duty who at the time of application for assistance under this part, is listed, pursuant to 38 U.S.C 101 and the regulations issued there under, by the Secretary concerned, in one or more of the following categories and has been so listed for more than 90 days: (i) missing in action; (ii) captured in the line of duty by a hostile force; or (iii) forcibly detained or interned in the line of duty by a foreign government or power; or (c) the spouse of any person who has a total disability permanent in nature resulting from a service connected disability or the spouse of a veteran who died while a disability so evaluated was in existence. (Select Yes, other eligible person). 	<ul style="list-style-type: none"> • Yes <=180 days • Yes, eligible veteran • Yes, other eligible person • No 	No

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Veteran Status	Campaign Veteran ^{*SP}	<i>May be removed for AEL participants</i> Whether the participant is an eligible veteran (i.e., coding value 1 in Element #301) who served on active duty in the U.S. armed forces during a war or in a campaign or expedition for which a campaign badge or expeditionary medal has been authorized as identified and listed by the Office of Personnel Management (OPM). A current listing of the campaigns can be found at OPM's website http://www.opm.gov/veterans/html/vgmedal2.asp .	<ul style="list-style-type: none"> • Yes • No 	No
Veteran Status	Disabled Veteran ^{*SP}	<ul style="list-style-type: none"> • Whether the participant is a veteran who served on active duty in the U.S. armed forces and who is entitled to compensation regardless of rating (including those rated at 0%); or who but for the receipt of military retirement pay would be entitled to compensation, under laws administered by the Department of Veterans Affairs (DVA); or was discharged or released from activity duty because of a service-connected disability (indicate Yes) • Whether the participant is a veteran who served on active duty in the U.S. armed forces and who is entitled to compensation (or who, but for the receipt of military retirement pay would be entitled to compensation) under laws administered by the DVA for a disability, (i) rated at 30 percent or more or, (ii) rated at 10 or 20 percent in the case of a veteran who has been determined by DVA to have a serious employment handicap (indicate Yes, special disabled) 	<ul style="list-style-type: none"> • Yes • Yes, special disabled • No 	No
Veteran Status	Date of Actual Military Separation ^{*SP}	Date on which the participant separated from the active duty with the U.S. armed forces	MM/DD/YYYY	No

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Employment and Education Information	Employment Status at Program Entry	<ul style="list-style-type: none"> • Whether the participant (a) did any work at all as a paid employee, (b) did any work at all in his or her own business, profession, or farm, (c) worked as an unpaid worker in an enterprise operated by a member of the family, or (d) is one who was not working, but has a job or business from which he or she was temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time-off, and whether or not seeking another job (Select Employed); or • Whether the participant is a person who, although employed, either (a) has received a notice of termination of employment or the employer has issued a Worker Adjustment and Retraining Notification (WARN) or other notice that the facility or enterprise will close, or (b) is a transitioning service member (i.e., within 12 months of separation or 24 months of retirement (Select Employed but Received notice of Termination or Military Separation); or • Whether the participant is a not in the labor force (i.e., those who are not employed and are not actively looking for work, including those who are incarcerated.) (Select not in labor force); or • Whether the participant does not meet any one of the conditions described above (Select Not Employed) 	<ul style="list-style-type: none"> • Employed • Employed, but Received Notice of Termination • Not in labor force • Not Employed 	Yes with some changes
Employment and Education Information	Long-Term Unemployed	Whether the participant has been unemployed for 27 or more consecutive weeks at program entry.	<ul style="list-style-type: none"> • Yes, Unemployed ≥ 27 consecutive weeks • No 	No
Employment and Education Information	Hours Employed per Week	If the participant has identified that they are employed, or not unemployed, the number of hours per week that participant, on average, works.	Number	Yes

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Employment and Education Information	Reason not Looking for Work	For participants identified as “not in the labor force”, the reason the participant is not actively seeking employment.	<ul style="list-style-type: none"> • Full-time caregiver/parent • Disabled • Incarcerated • Ineligible to work • Dependent • Institutionalized • Other 	Yes
Employment and Education Information	Type of Community	Whether the participant resides in a location with less than 2,500 inhabitants and located outside urbanized areas (Select Rural).	<ul style="list-style-type: none"> • Rural • Urban 	

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Employment and Education Information	Highest School Grade Completed	The highest grade completed by the participant at program entry.	<ul style="list-style-type: none"> •First Grade Complete •Second Grade Completed •Third Grade Completed •Fourth Grade Completed •Fifth Grade Completed •Sixth Grade Completed •Seventh Grade Completed •Eight Grade Completed •Ninth Grade Completed •Tenth Grade Completed •Eleventh Grade Completed •Twelfth Grade Completed •One college, or full-time technical or vocational school years completed •Two college, or full-time technical or vocational school years completed •Three college, or full-time technical or vocational school years completed • Bachelor’s degree or equivalent •Education beyond the Bachelor's degree •Attained High School Diploma •Attained GED or Equivalent •Attained Certificate of Attendance/Completion •Attained Other Post-Secondary Degree or Certification •Attained Associates Diploma or Degree •No school grades completed 	Yes with some changes
Employment and Education Information	Location of Highest Grade Completed	Location where the individual completed their highest level of education	<ul style="list-style-type: none"> • In the US • Outside the US 	Yes

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Public Assistance Information	On Public Assistance* ^{SP}	Whether the participant is receiving financial assistance from Federal, State, or local government agencies, including Temporary Assistance for Needy Families (TANF) or equivalent general assistance, food stamps, refugee cash assistance, old-age assistance, and aid to the blind or totally disabled. Social Security benefits, unemployment insurance, and employment-funded disability are not included in this definition	<ul style="list-style-type: none"> • Yes • No • Did not disclose 	Yes
Public Assistance Information	Expanded Eligibility for TANF* ^{SP}	Whether the individual is eligible for TANF services, per AEL 01-15c1	<ul style="list-style-type: none"> • Yes • No • Did not disclose 	Yes
Migrant Seasonal Farmworker Characteristics	Migrant and Seasonal Farmworker Status	<ul style="list-style-type: none"> • Whether the participant is a low-income individual (i) who for the 12 consecutive months out of the 24 months prior to application for the program involved, has been primarily employed in agriculture or fish farming labor that is characterized by chronic unemployment or underemployment; and (ii) faces multiple barriers to economic self-sufficiency (Select Seasonal Farmworker); or • Whether the participant is a seasonal farmworker and whose agricultural labor requires travel to a job site such that the farmworker is unable to return to a permanent place of residence within the same day (Select Migrant and Seasonal Farmworker); or • Whether the participant is a dependent (as defined in 20 CFR 685.110) of the individual described as a seasonal or migrant seasonal farmworker above (Select A dependent of a seasonal, or migrant and seasonal farmworker). 	<ul style="list-style-type: none"> • Seasonal Farmworker • Migrant and Seasonal Farmworker • A dependent of a seasonal, or migrant and seasonal farmworker • No 	Yes with some changes

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Item Category	Item Name	Item Description	Item Options	Was item collected prior to 2016? (Yes, Yes with some changes, no)
Additional Youth Characteristics	Foster Care Youth* ^{SP}	Whether the participant is a person who is currently in foster care or has aged out of the foster care system, or has been in the foster care system at any point during his/her lifetime.	<ul style="list-style-type: none"> • Yes • No 	No