

**2024 County SNAP Employment and Training Plan**  
for  
**County Coshocton County**



**Department of  
Job and Family Services**

Mike DeWine, Governor  
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**SNAP E&T Plan Contacts:**

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**Total Number of SNAP Staff: 7**

**Amendment Log**

If a county agency amends their plan during federal fiscal year (FFY) 2024, it must submit SNAP E&T plan revisions to the Ohio Department of Job and Family Services (ODJFS), Office of Family Assistance (OFA) for approval. The county agency must submit the proposed changes for approval at least 30 days prior to the planned implementation because certain county contracts must be added to the Ohio SNAP E&T plan and be submitted to the United States Department of Agriculture, Food and Nutrition Services (FNS) for approval.

Amendment Number	Description of changes or purpose for Amendment	Section of Plan Changed	Date submitted to OFA	Date approved by OFA
1.				

**Assurances**

The following statements should be reviewed by the county agency Director and fiscal representative. Each box should be checked to indicate that the parties have read and certify the below assurances are met.

<b>Budget</b>	
The county agency is accountable for the content of the county Supplemental Nutrition Assistance Program (SNAP) employment and training (E&T) plan and will provide oversight of any sub-grantees.	<input checked="" type="checkbox"/>
The county agency is fiscally responsible for SNAP E&T activities funded under the plan and is liable for repayment of unallowable costs.	<input checked="" type="checkbox"/>
County or state education costs will not be supplanted with federal SNAP E&T funds.	<input checked="" type="checkbox"/>
Cash or in-kind donations from other non-Federal sources have not been claimed or used as a match or reimbursement under any other Federal program.	<input checked="" type="checkbox"/>

If in-kind goods and services are part of the budget, only public in-kind services are included. No private in-kind goods or services are claimed.	<input checked="" type="checkbox"/>
Documentation of county agency costs, payments, and donations for approved SNAP E&T activities are maintained by the county agency and available for USDA review and audit.	<input checked="" type="checkbox"/>
Steps are taken to ensure that SNAP E&T funds are not spent on individuals who also receive Title IV-A funds.	<input checked="" type="checkbox"/>
Program activities and expenses are reasonable and necessary to accomplish the goals and objectives of SNAP E&T.	<input checked="" type="checkbox"/>
The county agency maintains its own operating budget and narrative which can be made available upon request by state or federal reviewers.	<input checked="" type="checkbox"/>

<b>Agreements and Contracts</b>	
Contracts for services are procured through competitive bid procedures governed by State and/or local procurement regulations.	<input checked="" type="checkbox"/>
The county agency has a procedure for ensuring all required SNAP E&T individuals are referred to a contractor or agency operating a component of its SNAP E&T, as soon as possible (recommended within 10 days following the completion of the appraisal). The appraisal must be completed no later than 30 days following the SNAP authorization.	<input checked="" type="checkbox"/>
Work Experience Program (WEP) site agreements and third-party contracts all contain language describing how they will provide SNAP E&T components, including when the county agency is operating the components, and when applicable, case management services for each participant.	<input checked="" type="checkbox"/>
The county agency has a procedure that ensures a contractor or agency operating a component of its SNAP E&T program notifies the county agency and the participant of the failed date(s) within 10 days of when the participant fails to comply with the employment and training requirements. The notification to the participant refers them to the county agency for determination of good cause.	<input checked="" type="checkbox"/>
Written agreements and third-party contracts all contain language that requires notification to the county agency of failed participation within 10 days.	<input checked="" type="checkbox"/>
Written agreements and third-party contracts all contain language of the process of how the county will be notified when there are no appropriate available slots for SNAP E&T individuals.	<input checked="" type="checkbox"/>
Written agreements and third-party contracts all contain language that requires notification to the county agency if any SNAP E&T participant, including a voluntary participant, is not suited for a SNAP E&T component (now referred to as "provider determination") within 10 days.	<input checked="" type="checkbox"/>
Sites are monitored on a regular cadence and their agreements are evaluated at least once per year.	<input checked="" type="checkbox"/>
Written agreements and third-party contracts are available upon request by State or Federal reviewers.	<input checked="" type="checkbox"/>
Plan amendments, including execution, termination or change of a contract or agreement must be submitted to the state.	<input checked="" type="checkbox"/>

<b>Case Management</b>	
The county agency has a procedure for ensuring all SNAP E&T individuals receive an appraisal no later than 30 days after SNAP authorization, to determine the best assignment to a contractor or agency operating a component of its SNAP E&T to help the participant achieve self-sufficiency. This includes when the county agency is operating the component of SNAP E&T.	<input checked="" type="checkbox"/>

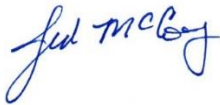
<b>Components</b>	
Program activities are conducted in compliance with all applicable Federal and State laws, rules, and regulations including Civil Rights and OMB regulations governing cost issues.	<input checked="" type="checkbox"/>
SNAP E&T education activities directly enhance the employability of the individuals; there is a direct link between the education activities and job-readiness.	<input checked="" type="checkbox"/>

All SNAP E&T individuals receive case management services and at least one E&T component.	<input checked="" type="checkbox"/>
Of the five SNAP E&T components, at minimum, the following three components are part of the county's SNAP E&T program: 1. Supervised Job Search 2. Educational Programs 3. Work Experience	<input checked="" type="checkbox"/>

<b>Provider Determination/Conciliation</b>	
The county agency has a procedure that ensures a contractor or agency operating a component of its SNAP E&T program notifies the county agency and the participant of their determination when a participant is found to not be suited for an E&T component/activity within 10 days of the determination, including when the county agency is operating the component/activity of SNAP E&T.	<input checked="" type="checkbox"/>
The county agency has a procedure that ensures a contractor or agency operating a component of its SNAP E&T program implements the provider determination with fairness, integrity, and in compliance with all Civil Rights Law and FNS regulations.	<input checked="" type="checkbox"/>
The procedure includes a channel for a contractor or agency operating a component of its SNAP E&T to communicate their reasoning for determining a participant is unsuitable for a SNAP E&T component/activity and a way for parties to share information to develop appropriate next steps.	<input checked="" type="checkbox"/>
The notification to the participant gives instruction on next steps, contact information, and notifies able-bodied adults without dependents (ABAWDS) that countable months will accrue unless the ABAWD fulfills work requirements, has good cause, lives in a waived area or is otherwise exempt.	<input checked="" type="checkbox"/>
The county has a due process procedure for the SNAP E&T individual to follow in the event the participant disagrees with a county good cause determination or a provider determination that an individual is not suited for a SNAP E&T component.	<input checked="" type="checkbox"/>

<b>Noticing</b>	
The assistance group receives a consolidated written notice and comprehensive oral explanation of all applicable work requirements for each individual within the assistance group.	<input checked="" type="checkbox"/>
The assistance group is informed by any reasonable means, of a work registration/SNAP E&T failure and the right to provide good cause information to the county agency, prior to being issued a notice of noncompliance.	<input checked="" type="checkbox"/>

**By signing below, the county agency director and financial representative certify that the above assurances are met.**



\_\_\_\_\_

County Agency Director

6/1/23

\_\_\_\_\_

Date



\_\_\_\_\_

County Agency Fiscal Reviewer

06/01/2023

\_\_\_\_\_

Date

## Section 1: Coordination with the Workforce Development System

*In accordance with 7 CFR 273.7(c)(5), state and county agencies must design the SNAP E&T program in consultation with the state and county workforce development boards.*

### 1. Describe how your county partners with the Workforce Development System and utilizes Ohio Means Jobs (OMJ).

#### Questions to address in response:

- **Is the SNAP E&T program a partner at the local OMJ center?**
  - SNAP is an integral part of the Ohio Means Jobs – Coshocton County Job Center. The Jobs worker is staffed within the Workforce Unit. She is responsible for all work assignments for the ABAWDS as well as case management for SNAP Recipients.
- **How does your county coordinate with education providers, career services, and eligible training providers?**
  - Coshocton County utilizes the WIOA program for secondary education opportunities for SNAP clients. We also use the ASPIRE program to remediate those without a high school credential or other equivalent certification. We also collaborate with the Opportunity school to assist with credit recovery.
- **Does your county look at the in-demand jobs list to determine what kind of components and activities that will be offered?**
  - The SNAP case worker as well as the WIOA case manager has access to the in-demand job list and use it to determine job plans for SNAP clientele. The list is also used to determine suitability for in demand and growth field training.
- **Does your county use the Office of Workforce Development (OWD) career pathways (specified sequence of jobs and trainings to attain a certain job) to determine how to assign an individual to education and training?**
  - Coshocton County has been in a transition process replacing our Caseworker. We still need to research the OWD Career pathways program and determine how we can use this in our programming. This is a goal for the upcoming year.
- **Does your county use the same Request for Proposal (RFP) for WIOA, SNAP E&T and/OWF work activities?**
  - We do use the same RFP for all.
- **Does your county assign ABAWDs to basic education if they do not have a high school diploma or GED?**
  - Yes, If the Client is willing to participate in the educational program. We recognize that Education is a fundamental core to the path of self-sufficiency. We also have found that if a client is not agreeable to working on the education part of the plan it is futile to assign them to remediation. We are a partner with ASPIRE and with the Opportunity School in Coshocton County.
- **How does your county utilize OhioMeansJobs.com in the SNAP E&T program?**
  - We offer a comprehensive ohiomeansjobs.com workshop to all snap participants.
- **Does your county assist ABAWDs in creating an account, backpack, and resume on OMJ?**
  - Yes, staff is available in the OMJ Job center to assist with all aspects of meeting the requirements on OMJ.com as well as using it for a tool to assist in their goal for self-sufficiency.

## Section 2: Eligibility Determination and Screening

*In accordance with OAC Rules 5101:4-3-11 and 51015:4-3-20, the county agency must determine if an individual is subject to SNAP work requirements. Work registrants must be screened to determine if they are required SNAP E&T individuals (i.e., ABAWDS in waived and non-waived counties).*

**1. The county agency must determine if a customer is subject to SNAP work requirements. Screening is a SNAP certification function that is to be completed by the eligibility worker during the eligibility interview. Please describe the county agency's process for screening work registrants to determine if they are required SNAP E&T individuals (ABAWDS). Please include:**

- **How are work registrants and required SNAP E&T individuals (ABAWDS) identified?**
- **How are exemptions screened during the interview process (what questions are asked during the intake process specific to screening)?**
- **Do county workers use a screening tool or questionnaire (if so, please attach)?**
- **When in the interview does the eligibility workers inform applicants of available supportive services and good cause for lack of available supportive service funding?**
- **How does your county ensure eligibility workers understand that only ABAWDS are referred to the SNAP E&T program for an appraisal?**
- The Public Assistance Group screens potential ABAWDS through OB which identifies those individuals that are required.
- Public Assistance workers are taught in training and reinforced in weekly unit meetings that only ABAWDS are referred.
- Applicants are screened by Public Assistance and only required clients (ABAWDS) are sent to JOBS Workers.
- Caseworker Follows guidelines for determining ABAWD eligibility per Food assistance.
- Once eligibility is determined Client is screened for exemptions. If no exemption, then appointment letter is mailed for SNAP E&T assessment within 30 days.
- Client is assessed and assigned to WEP sites or other components of education or training as appropriate. Caseworker receives monthly work participation reports from WEP sites of progress with assignment based on self-sufficiency plan.
- Recertification is scheduled every 6 months to redetermine eligibility. Caseworker reviews procedures for determining ABAWD Progress and continuous improvement. If circumstances have changed Caseworker will ask for verification for good cause. A new Employability plan is created and or updated. When a situation changes with a client's ability to participate Worker will reassess the client's suitability and possible new exemptions.
- The SNAP E&T Program will use the SNAP work registration, ABAWD, And Employment and training screening tool.
- The 7208 Screening tool covers all the questions that are shared. They are then asked if there are any questions.
- At the end of the interview once determination is made for eligibility, clients are instructed regarding Good Cause and supportive services.

**2. Does the county allow individuals to volunteer to participate in any of the SNAP E&T program components offered within the county (Supervised Job Search, other education programs not described in question three, Work Experience, Work Based Learning, and/or Job Retention)?** No

**If yes, please describe the enrollment process.**

*Description of enrollment process for volunteers. Enter text in this space.*

**3. Some counties allow educational activities in vocational and post-secondary programs to qualify students enrolled at least half-time for SNAP when they are already enrolled at the time of application and all other eligibility requirements are met. Education and training must be a SNAP E&T component offered by the county. An appraisal of the student must be completed; the student must be assigned to an education and training component in the statewide eligibility system and coded as a SNAP E&T volunteer. Does your county allow self-enrolled students as volunteers into the SNAP E&T Program as described in OAC rule 5101:4-6-04?** Yes

**Does your county participate in the Community College Acceleration Program (CCAP) and allow student volunteers through CCAP participation?** No

**If yes, please fill in the below:**

***SAMPLE LANGUAGE for CCAP Counties***

*[COUNTY NAME] is participating in the pilot of the Community College Acceleration Program (CCAP) and will be partnering with [COMMUNITY COLLEGE NAME]. SNAP E&T participants (including volunteers) will be assigned to participate in allowable SNAP E&T education/training activities at the community college. The community college may also provide the assigned SNAP E&T participant with supportive services that are reasonably necessary and directly related to participation in SNAP E&T activities.*

*The community college will be responsible for entering into an agreement with the Ohio Department of Job and Family Services (ODJFS) and invoicing will be handled by ODJFS. All participants in the CCAP will be assigned to participate in SNAP E&T according to the terms of the Memorandum of understanding (MOU) between the county agency and the community college; and participation (including the acceptance of volunteers and providing education/training activities as part of SNAP E&T) in the CCAP is limited to individuals identified within the MOU.*

**4. The following policies must be provided verbally and in writing to each work registrant and SNAP E&T individual (ABAWDs in waived and non-waived counties), as applicable, at the eligibility interview:**

- E&T Program Requirements
- Work Registration Rights and Responsibilities
- Consequences of Failure to Comply
- ABAWD Work Requirements
- ABAWD Time Limits
- ABAWD Change Reporting Requirements

**Do you ensure the policies listed above are provided verbally and in writing during the interview/screening process?**

Yes

## Section 3: Referrals

*In accordance with OAC 5101:4-3-11, the county agency must screen each work registrant to determine if it is appropriate to refer them to the SNAP E&T program and, if appropriate, refer them for appraisal and a SNAP E&T component.*

**1. After an individual is screened and determined appropriate for SNAP E&T (i.e. they are an ABAWD even in a waived county), they are to be referred to the SNAP E&T program. Referral to the SNAP E&T program is a SNAP certification function that is to be completed by the eligibility worker. Please describe the step-by-step process workers use to refer eligible SNAP individuals to the E&T program staff. Include the time frame in which the referral is made from either interview or authorization.**

The determination is made during the intake interview. The referral is made, and the Job worker located in the Workforce unit does the appraisal. The client is then notified by mail for appointments which are handled within 30 days of Referral.

PA workers use a screening tool to assess client suitability for E&T program. Determination is made and added to workflow in On Base System to trigger Job Workers referral.

Job Worker then screens ABAWDS to determine client's Individual self-sufficiency plan.

Share assignment with appropriate staff based on Client's plan.

Internal staff receives and begins work with new client. Follow-up provided face-to-face.

**2. How are individuals informed that they are being referred to the SNAP E&T program? What type of information about SNAP E&T is provided to the individual when they are referred? (e.g., information about accessing E&T services, case management, dates, contact information)?**

Income Maintenance informs client of E&T requirement at the screening.

Clients meet with Jobs Worker to determine together which plan is best for clients Self Sufficiency. A plan is written up and client is given a monthly Calendar of required sessions for workshops and other meetings.

After the 7208 screening the client is informed that they are being referred to the SNAP E&T program.

Per the 7208 checklist they are given oral explanation of work requirements.

**3. How is information about the referral communicated within the county agency and/or to SNAP E&T providers, as applicable?**

IM notifies Job worker through Workforce action sheet in OB workflow and Job worker sends appointment letter.

**4. How does the referral process ensure that individuals are referred to an appropriate and available component? Describe the process for direct and reverse referrals, as applicable.**

Referrals are based on assessment and agreed upon by worker and client. Referral may be rejected anytime there is an issue and a reassignment made.

Once a client is referred to the Jobs Worker, the Caseworker performs screening using the Employability Plan and determines any barriers or Skills for assignment determination.

**5. If the county uses a third-party provider for E&T services, how does communication occur between the county agency and its providers, as well as between providers. Please include the mode(s) of communication (shared database, etc.) and the types of information that is shared (e.g., referrals, noncompliance with program requirements, provider determinations, etc.).**

Caseworkers within the Workforce unit meet face to face to discuss clients and progress pertaining to assignments within the silo of responsibility. For example, a client that is referred to WIOA for training will meet with WIOA caseworker and information is transferred to Job worker usually face-to-face but also using available technology, i.e. phone, fax, email, teams, etc.

**6.If the county uses a third-party provider, describe how new policies, procedures, or other information is shared with providers. This includes contracted and non-contracted third-party providers.**

Basically, the same as above. A third party will be notified VIA available technology.

## Section 4: Case Management

*Case management services are activities and resources that help the SNAP E&T individual achieve program goals, and they must directly support an individual's participation in the SNAP E&T program. Case management services can be provided either virtually or in-person. Please refer to OAC Rule 5101:4-3-29.*

**1.Required SNAP E&T individuals (ABAWDs) must be appraised to determine the best assignment to help them achieve self-sufficiency. Employability plans are required for every individual assigned to a SNAP E&T activity. Does your county use the state employability plan template? Yes If no, please attach your county's employability plan.**

**2.Describe the county's step-by-step appraisal process to develop employability plans for SNAP E&T individuals.**

- When/how are appointments scheduled?
- What questions are asked and how are they customized for everyone?
- How do you assign SNAP E&T activities so that they are unique to the individual's needs?
- Are there any assessment strategies?

Job worker schedules Client through OIES. Client comes through the workflow and Job worker pulls list daily. Client receives appointment letter and is required then to meet with Job worker for SNAP E&T assessment. The OMJ Jobs worker receives notification of application from public assistance through the OB system. Determination of eligibility and appointment is set. Caseworker screens for any possible exemptions. Caseworker then uses the SNAP employability plan to determine client goals, needs and work barriers. Caseworker determines specific supportive services based on individual needs and client's desires. SNAP work requirements, time limits, good cause, the sanction process are explained and documented. Worker determines assignment based on: vicinity of client, ability, availability, individual goals, and suitability.

**3.Who conducts the appraisal?**

Job caseworker.

**4.When are individuals scheduled for an appraisal (timeframe after intake or recertification interview)?**

Initial appraisal within 30 days of approval. Monthly appraisal of hours. Reappraisal every 6 months in person.

**5.Appraisals shall be conducted by county agency SNAP E&T staff or contracted staff and the SNAP E&T individual shall receive an appraisal appointment with a designated date and time for the appraisal. How are appraisals conducted (testing, etc.)?**

- Electronically on a computer
- Orally with staff
- Paper questionnaire
- Combination of all the above
- Other: Face to Face

**6.How is information from the appraisal communicated or shared within the county agency, with E&T providers, and with the individual, as appropriate?**

Specifics of appraisal are confidential, referrals to other agencies are made with only information needed to effectively serve the SNAP recipient. Again, communication to providers outside of the unit is done through technology such as Phone, Fax, E-mail, Microsoft Teams, etc. The Assessment results are shared with the client immediately after the appraisal process in person. The Caseworker and the client, together, then work on the employability plan to determine

the next steps and responsibilities of the Client and caseworker. The worker provides the client with hardcopy reproductions of the plans, rights and responsibilities, good cause information and other documents as required. Worker offers an electronic copy to the clients if they wish to have the documentation in a PDF form.

**7. Please indicate which of the following are explored to ensure a comprehensive appraisal in your county. Check all that apply:**

- Work history
- Education
- Training
- Skills
- Aptitude
- Interests
- Strengths
- Goals
- Barriers
- Domestic Violence (required)
- Other: *Define other.*

**8. The following policies must be provided verbally and in writing to each SNAP E&T individual (ABAWD) at the appraisal appointment:**

- SNAP E&T Program Requirements
- Work Registrants Rights and Responsibilities
- Consequences of Failure to Comply with Program Requirements
- ABAWD Work Requirements (if not under a waiver)
- ABAWD Time Limits (if not under a waiver)
- ABAWD Change Reporting Requirements (if not under a waiver)

**Does your county provide any additional case management services other than appraisals; individualized employability plans and ongoing progress monitoring?** No

**If yes, please describe additional case management services.** [Click or tap here to enter text.](#)

**9. Describe the ongoing progress monitoring processes (in general). Please include the following:**

- Who is responsible for providing ongoing progress monitoring?
- How are SNAP E&T individuals' ongoing progress tracked and by whom?
- Typically, how often does the agency meet with a participant?
- How is the contact made with the SNAP E&T participant (text, phone, in-person)?
- Is anything discussed beyond the ongoing progress monitoring, such as supportive services or other case management services? If yes, please describe.

*Enter text in this space.*

- Clients are monitored by Jobs Worker who reviews all pertinent documentation from WEP sites or other entities using monthly participation sheets and other documentation. Immediate issues are shared with case manager and dealt with as reported by WEP site managers.
- The Jobs caseworker is responsible for providing the ongoing case management.
- Participants meet with case workers at least quarterly (4 times a year) unless there are barriers that require more face-to-face time. The client meets with the Resource Center attendant numerous times throughout the month to provide assistance with their job search activities.
- Contact with the Customer is done in various ways. US mail, E-mail, phone, Text, and sometimes for hard-to-reach client's social media is an option.
- Discussions are limited to the client's ongoing case. Usually regarding assignments and hours served. Discussions regarding self-sufficiency are common. Good Cause may be discussed if hours are not

satisfactory based on the client’s plan. Review of the job search plan and verifying hours are also discussed.

**10. Describe how the case manager will coordinate with SNAP E&T providers and other community resources.**

As a member of the OMJ Unit most of the providers are dealt with face-to face or technology. Communication with outside entities is usually achieved by technology via phone, Email, fax, mail, zoom or in person.

**11. Describe how SNAP E&T individuals will receive targeted case management services.**

Workshops are based on client’s individual needs and goals as described in the employability plan. Progress will be monitored and manipulated by the Job Caseworker.

**Section 5: Components**

**A county agency’s SNAP E&T program must include these three components: Supervised job search, education and training, and work experience (WEP). Work based learning and job retention are optional components. Please refer to OAC Rules 5101:4-3-33, 5101:4-3-34, and 5101:4-3-35.**

Use the boxes below to indicate which component(s) your county offers, who provides it, and the projected annual participation number per component in FFY 2023. Expected participation numbers are based on average monthly enrollment numbers for FFY 2022 per JFSR 5201-D- SNAPET- ABAWD Assignment Detail Report (SNAP). Counties can request their average monthly participation number by contacting [Outcomes\\_And\\_Analysis@jfs.ohio.gov](mailto:Outcomes_And_Analysis@jfs.ohio.gov).

**Supervised Job Search**

<b>1. Supervised Job Search</b>	
<p><b>Summary:</b> Provide a summary of the county guidelines implementing supervised job search. This summary must describe how the supervised job search component along with the county approved locations meet the requirement to directly supervise the activities of individuals, track the timing and activities of individuals and how individuals are provided access to the necessary tools and materials needed to perform supervised job search.</p>	<p>SNAP Clients will be assigned a minimum of 12 hours a month of supervised Job Search along with another component of the SNAP Education and Training Program equal to the hours assigned by JOBS Worker. The Supervised Job Search will be done in-house where there are already Career Coaches and support staff to assist and direct activities that will lead clients to learn and practice job skills towards the goal of obtaining suitable employment and become Self-Sufficient. The Client will be given instruction and direct assistance in workshops as well as one-on-one counseling from the staff. Client will be responsible for a checklist that will be provided to the JOBS worker monthly to show activities and hours signed off by Support Staff and coaches. Client will be assigned job search activities and follow-up activities that they will be responsible in completing apart from support staff. The OMJ Jobs Backpack will be introduced and used as a tool. Client will track applications, interviews,</p>

	follow-up interviews, dates and times, results and other business communications. Logs will be kept with verified hours for the Job Search and other components.
<b>Direct link:</b> Explain how the county agency will ensure that supervised job search activities will have a direct link to increasing employment opportunities (i.e., how the State agency will screen to ensure individuals referred to Supervised Job Search have the skills to be successful in Supervised Job Search and how the Supervised Job Search program is tailored to employment opportunities in the community).	It has been evident that the workshops and staff assistance within the realm of the OMJ Service Center and with the expertise of the OMJ staff that success for clients who are serious about employment will be successful within their endeavors with the Supervised Job Search activities. It is our goal to move each client to a work program during this time of high opportunity for job attainment. Continued assessment of clients will determine Goal development and viability of the search.
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	The targeted population is primarily any ABAWD that applies for SNAP benefits and have not been exempted for a good cause reason.
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	Although Literacy and Credentials will improve the goals of Self Sufficiency the Coaches, counselors and support staff are well versed in assisting job seekers work from any starting point. The workshops provided along with the individual assistance will make goal attainment possible.
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	Staff will include OMJ Service Center staff as well as JOBS worker, and career counselors/coaches. All staff of OMJ-Coshocton.
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	50, But this Number is duplicated because the Client will also be assigned most likely to WEP.
<b>Estimated Annual Component Administrative Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	Costs are absorbed through current training and workshops. No additional workshop should be required but if needs be we will amend the plan.

## 2. Basic/Foundational Skills Instruction (includes High School Equivalency Programs)

Does your county offer Basic/Foundational Skills Instruction?	Yes If no, continue to the next component #3
<b>Description of the component:</b> Provide a summary of the activities and services	High School Equivalency through the ASPIRE Program or The Coshocton City Schools Opportunity School.
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	Any Recipient that receives assistance that does not have a credential and agrees to attend the program.

<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	Basic Skills deficit clients are enrolled.
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	ASPIRE – Located at Central Ohio Technical College. Opportunity School – Located in the Coshocton High School Building (after hours).
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	5 Estimated
<b>Estimated Annual Component Administrative Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.  <b>Not supplanting:</b> Federal E&T funds used for activities within the education component must not supplant (i.e. replace) non-Federal funds for existing educational services and activities. For any education activities, provide evidence that costs attributed to the E&T program are not supplanting funds used for other existing education programs.	There are no costs associated with Students attending either location.
<b>Cost Parity:</b> If any of the educational services or activities are available to persons other than E&T individuals, provide evidence that the costs charged to E&T do not exceed the costs charged for non-E&T individuals (e.g., comparable tuition).	No Costs for anyone.

<b>3.Career/Technical Education Programs or other Vocational Training</b>	
Does your county offer Career/Technical Education Programs or other Vocational Training?	Yes If no, continue to the next component #4
<b>Description of the component:</b> Provide a summary of the activities and services.	Any training in a growth field through our WIOA Program. Both degree and certificate training are available.
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	Any ABAWD that has the desire and meets criteria for training program and is suitable for the training path chosen.
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	Clients that are 18 years with a high school or equivalent credential for degree training. HS diploma may not be needed for certain credentials such as CDL licensing.

<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	All providers on the state approved training list.
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	5 Estimated
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.  <b>Not supplanting:</b> Federal E&T funds used for activities within the education component must not supplant non-Federal funds for existing educational services and activities. For any education activities, provide evidence that costs attributed to the E&T program are not supplanting funds used for other existing education programs.	No additional costs. All cost for this component are absorbed through our WIOA Program.
<b>Cost Parity:</b> If any of the educational services or activities are available to persons other than E&T individuals, provide evidence that the costs charged to E&T do not exceed the costs charged for non-E&T individuals (e.g., comparable tuition).	No Cost to the SNAP program.

<b>4. Job Readiness Training</b>	
Does your county offer Job Readiness Training?	No If no, continue to the next component #5
<b>Description of the component:</b> Provide a brief description of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Administrative Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include,	<i>Click or tap here to enter text.</i>

but are not limited to the planning, implementing and operation of the SNAP E&T component.

<b>5. English Language Acquisition</b>	
Does your county offer English Language Acquisition?	No If no, continue to the next component #6
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>
<b>Cost Parity:</b> If any of the educational services or activities are available to persons other than E&T individuals, provide evidence that the costs charged to E&T do not exceed the costs charged for non-E&T individuals (e.g., comparable tuition).	<i>Click or tap here to enter text.</i>

## Work Experience

<b>6. Work Experience Program (WEP)</b>	
<b>Description of the component:</b> Provide a summary of the activities and services.	Improve the employability of participants through actual work experience and/or training and to enable them to move into regular employment.
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	ABAWDS recognized ready for Work experience through caseworker assessment.

<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	Basic Communication skills with skills based upon the choice of Work Experience site.
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	Coshocton County Animal Shelter, Coshocton Commons housing, Coshocton County Fairgrounds, Coshocton Handicapped Society, Coshocton Job & Family Services, Coshocton Meadow's Housing, Coshocton Senior Center, First Step - Family violence, Heritage Apartments, Salvation Army, Village of Warsaw, Village of West Lafayette, Humane Society, Kids Campus, Moving Mountains Ranch.
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	50, But this Number is duplicated because the Client will also be assigned to Supervised Job Search.
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<b>These costs are covered by RMS.</b> The administrative costs have been traditionally mixed in with the administrative cost for all the programs at OMJ. WE are working to rectify this and will adjust the plan accordingly.

**\*Please attach a sample WEP agreement**

## Work Based Learning

<b>7. Internships</b>	
Does your county offer Work Based Learning-Internships?	No If no, continue to the next component #8
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>

<p><b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&amp;T component.</p>	<p><i>Click or tap here to enter text.</i></p>
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<p><b>8. Pre-apprenticeship</b></p>	
<p>Does your county offer Work Based Learning-Pre-apprenticeships?</p>	<p>No If no, continue to the next component #9</p>
<p><b>Description of the component:</b> Provide a summary of the activities and services.</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>Projected Annual Participation:</b> Project the number of unduplicated individuals.</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&amp;T component.</p>	<p><i>Click or tap here to enter text.</i></p>

<p><b>9. Apprenticeship</b></p>	
<p>Does your county offer Work Based Learning-Apprenticeships?</p>	<p>No If no, continue to the next component #10</p>
<p><b>Description of the component:</b> Provide a summary of the activities and services.</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.</p>	<p><i>Click or tap here to enter text.</i></p>
<p><b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)</p>	<p><i>Click or tap here to enter text.</i></p>

<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

<b>10. Customized Training</b>	
Does your county offer Work Based Learning-Customized Training?	No If no, continue to the next component #11
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

<b>11. Transitional Jobs</b>	
Does your county offer Work Based Learning-Transitional Jobs?	Choose an item. If no, continue to the next component #12
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>

<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

<b>12. Incumbent Worker Training</b>	
Does your county offer Work Based Learning-Incumbent Worker Training?	<b>No</b> If no, continue to the next component #13
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

<b>13. On-the-Job Training</b>	
Does your county offer Work Based Learning-On-the-Job-Training?	<b>No</b> If no, continue to the next component #14

<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

<b>14.. Subsidized Employment</b>	
Does your county offer Work Based Learning-Subsidized Employment?	<b>No</b> If no, continue to the next component #15
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special populations such as ABAWDs, Returning Citizens, Homeless, Older Disconnected Youth, etc.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> What skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

<b>15. Job Retention Services</b>	
Does your county offer Job Retention Services?	No If no, continue to the next section.
<b>Description of the component:</b> Provide a summary of the activities and services.	<i>Click or tap here to enter text.</i>
<b>Target Population:</b> Identify the population that will be targeted. Include special employed populations.	<i>Click or tap here to enter text.</i>
<b>Criteria for Participation:</b> In addition to gaining employment, what skills, knowledge, or experience is necessary for participation in the component? For example, literacy or numeracy levels, recent labor market attachment, computer literacy etc.)	<i>Click or tap here to enter text.</i>
<b>E&amp;T Providers:</b> Identify all entities that will provide the service. Additional information about each provider is required in Section 11.	<i>Click or tap here to enter text.</i>
<b>Projected Annual Participation:</b> Project the number of unduplicated individuals.	<i>Click or tap here to enter text.</i>
<b>Estimated Annual Component Costs:</b> Project only administrative costs. This estimation should be based on all projected participants being served. Examples of administrative costs may include, but are not limited to the planning, implementing and operation of the SNAP E&T component.	<i>Click or tap here to enter text.</i>

**Note:** When the county agency is at full capacity for all SNAP E&T components and can no longer assign individuals, the county agency must notify Program Policy and Systems by emailing [OFA-PPS@jfs.ohio.gov](mailto:OFA-PPS@jfs.ohio.gov) within 30 days of the determination of no site availability. WEP site agreements and third-party contractors must notify the county agency if there are no available slots for SNAP E & T individuals.

## Section 6: Participant Tracking and Monitoring

***In accordance with OAC Rules 5101:4-3-20 and 5101:4-3-11.2, individuals must be monitored to ensure that both ABAWD and SNAP E&T Program requirements are met. County agencies must apply sanctions and/or terminate benefits as appropriate.***

**1. Which of the following methods does your county use to prevent overpayments to ABAWDs who reach their time limit (3 of 36 months), when not under a waiver? (If your county is currently under a waiver, please answer which method you would use should your county no longer be waived.) Check all that apply:**

- ABAWD Countable Months Detail Report (OB)
- ABAWD Time Limit Month (OB)
- Other: *Define other.*

**2. How does your county ensure that the participant is informed of an alleged failure prior to the imposition of a timely sanction for the ABAWD who fails to participate in a SNAP E&T activity for the appropriate number of hours? Check all that apply:**

- County notification form
- Phone call
- Email
- Text
- Other reasonable means: *Please describe.*

**3. ABAWDs are required to participate in SNAP E&T, even if the ABAWD resides in a waiver county. How does your county ensure that timely sanctions are applied to ABAWDs who fail to participate in a SNAP E&T activity for the appropriate number of hours? Check all that apply:**

- ABAWD Countable Months Detail Report (OB)
- ABAWD Time Limit Month (OB)
- Other: *Define other.*

## Section 7 Supportive Services

*In accordance with OAC Rule 5101:4-3-32, county agencies are responsible to pay for or reimburse individuals for expenses that are reasonable, necessary, and directly related to participation in SNAP E&T. County agencies may impose a maximum limit for reimbursement payments. The County agency must meet all costs associated with mandatory participation (i.e., the supportive services must cover the total cost, otherwise the individual will be exempt). Please include all supportive services that providers will require of participants or will pay for participants.*

Estimates of Participant Reimbursements/Service Arrangements	
Estimate the number of SNAP E&T individuals to receive participant reimbursements/service arrangements. Include both mandatory individuals and volunteers.	55

### Participant Reimbursement Details

Complete the table below with information on each participant reimbursement (service arrangement) offered by your county agency or provider (if SNAP E&T funds are paid to the provider for giving supportive services to participants).

- **Service**
- **Participant Reimbursement Cap:** Indicate any caps on the amount the county agency will provide for the participant reimbursement and whether they are a monthly or annual cap/maximum.
- **Who provides the participant reimbursement:** County agency, a provider, an intermediary, or some other entity?
- **Method of disbursement:** Indicate if the participant reimbursement is in *advance* or a *reimbursement*. Also indicate if the amount of the participant reimbursement is an *estimated amount* or *actual amount*.

Service	Offered	Reimbursement Cap Maximum per person- indicate monthly or annual maximum	Who provides participant reimbursement - County agency or Provider	Method of disbursement	
				Advance or Reimbursement	Estimated or Actual Payment
Automobile Repairs	Yes	\$600	Allocation	Advance	Estimated
Background Checks	No	\$	Name	R/A select	Pay select
Books	No	\$	Name	R/A select	Pay select
Child Care for Volunteers	No	\$	Name	R/A select	Pay select
Clothing for interview	Yes	\$100	Allocation	Advance	Estimated
Clothing for job; not uniform	Yes	\$125	Allocation	Advance	Estimated
Course Registration Fees	No	\$	Name	R/A select	Pay select
Dependent Care Costs	No	\$	Name	R/A select	Pay select
Driver's License fees/class	No	\$	Name	R/A select	Pay select
Drug Tests	Yes	\$50	Allocation	Advance	Estimated
Equipment	Yes	\$200	Allocation	Advance	Estimated
Fingerprinting	Yes	\$50	Allocation	Advance	Estimated
Gasoline	Yes	\$200	Allocation	Advance	Estimated
IT Service (internet/data plans)	No	\$	Name	R/A select	Pay select
Laptops or Tablets	No	\$	Name	R/A select	Pay select

Legal Services	No	\$	Name	R/A select	Pay select
Licensing/bonding fees	No	\$	Name	R/A select	Pay select
Medical Services	No	\$	Name	R/A select	Pay select
Personal Safety Items	Yes	\$150	Allocation	Advance	Estimated
Student Activity Fees	No	\$	Name	R/A select	Pay select
Test Fees	Yes	\$100	Allocation	Advance	Estimated
Tools	Yes	\$250	Allocation	Advance	Estimated
Training Materials	No	\$	Name	R/A select	Pay select
Transportation (excluding gas)	Yes	\$250	Allocation	Advance	Estimated
Tuition and Fees	No	\$	Name	R/A select	Pay select
Uniforms	Yes	\$150	Allocation	Advance	Estimated
Union Dues	No	\$	Name	R/A select	Pay select
Other: Define	No	\$	Name	R/A select	Pay select
Other: Define	No	\$	Name	R/A select	Pay select
Other: Define	No	\$	Name	R/A select	Pay select

## Section 8: Provider Determination

*In accordance with OAC 5101:4-3-11.2, the county agency shall ensure SNAP E&T providers are informed of their authority and responsibility to determine if a participant is not suited for a particular SNAP E&T component/activity.*

**1. Describe the county agency's procedure for a contractor or agency operating a component of the SNAP E&T program to notify the county agency of a provider determination (when and why a participant is determined to be not suited for participation in an E&T component).**

- Suitability for a site is determined during the assessment of the Job Caseworker based on availability, interest, capability, and proximity.
- The caseworker will assign client to a WEP site usually within 5 days of the assessment to allow for arrangements to be made for transportation, childcare, or other barriers to participation.
- Provider may deny any assigned worker without prejudice immediately by contacting Caseworker.
- Provider is responsible for providing appropriate site rules during the onboarding process for all clients.
- The agency will provide needed clothing, hygiene items, safety equipment, etc. that is required by the WEP site for the client to be successful.
- Provider will train the client regarding safety rules and may discharge client at any time for abuse or disregard of said rules.
- Provider has the authority to send home any client for abuse of work rules such as dress, hygiene, poor performance, lack of attendance, indifference to Provider work rules.
- Provider must contact Caseworker of incident so a determination can be made to assist the client within 48 business hours.
- Provider is responsible for confidentiality for each client as a basic right. Provider may not divulge any information regarding client to anyone not associated with the WEP program.
- Agency/Job worker may make a new assignment or determine suitability to give an exemption.
- Provider may discharge any client for reassignment due to lack of work with communication to agency within 48 hours.
- The provider is instructed to notify the jobs worker of any issues that would cause a client to be remove from a WEP site. Communication is via phone or email. Jobs Worker then will contact client to reassess and reassign to a suitable WEP site.

**2. Describe the timeframes in which a site is to notify the county agency regarding a provider determination.**

- Provider is requested to inform Jobs Worker of any change in determination regarding clients assignment.
- WEP site is instructed to contact Jobs Worker or Administrator immediately if possible or within 24 hours so that a client can be reassigned to be sure that the appropriate number of hours are met for that month.

**3. Describe and the steps and timeframes the county agency will take once a provider determination is made.**

- Contact affected client.
- Determine issues and find suitable new assignment.
- Review and update client employability plan.
- Refer client to new work assignment.
- Upon learning of a problem with a client and the assigned work site the jobs worker will immediately begin a process to contact the client to reassess and reassign. Client should be available the next workday due to the fact that he is being transferred.

## Section 9: Conciliation

*In accordance with OAC Rule 5101:4-3-38 the county agency shall have a conciliation process to resolve disputes. The conciliation process is to include but is not limited to: disputes over assignments, inappropriate treatment by a county*

*employee or worksite supervisor, irregular work hours that create hardship, worksite assignments that deviate from the normal duties of the job, disagreement with disciplinary action at the worksite, other areas of concern relating to participation, disputes concerning working conditions or workers compensation coverage, wage rate calculations to determine the hours of participant and/or disputes concerning failure to participate in SNAP E&T.*

**1. Describe the county's conciliation process. Please include how the process can be initiated, how requests are tracked, how long decisions take, and who can attend.**

*The CDJFS has a conciliation process to resolve disputes which arise concerning required SNAP employment and training participation. The conciliation process shall include, but is not limited to:*

- (1) Disputes over assignments.
- (2) Inappropriate treatment by a county agency employee or worksite supervisor.
- (3) Irregular work hours that create a severe hardship on the participant.
- (4) Worksite assignments that deviate from the normal duties of the job.
- (5) Disagreement with disciplinary action at the worksite involving the participant.
- (6) Other areas of concern to the participant relating to participation.
- (7) Disputes concerning working conditions and workers' compensation coverage.
- (8) Wage rate calculations to determine the hours of participation.
- (9) Disputes concerning failure to participate in the SNAP employment and training program.

The conciliation process can be initiated by any of the following:

- (1) A written notice from the county agency to the participant for a conciliation conference.
- (2) A written or verbal request from the participant to the county agency for a conciliation conference; or (3) A written or verbal request from the participant to the county agency for a conciliation conference when there is an act of nonparticipation. The conciliation process requires that such requests shall be made within seven calendar days which begins the day following the day of nonparticipation.

The county agency shall maintain an accurate record of all conciliation requests, including any pertinent facts and the resolution of the conciliation. Once a conciliation request is initiated, the county agency should attempt an informal resolution.

A resolution of the conciliation process initiated in accordance with paragraph (B) of OAC Rule 5101:4-3-38, shall be reached within a maximum of fifteen calendar days beginning with the date the conciliation process was initiated. No adverse action, as related to the SNAP employment and training program, may be proposed until the conciliation process, if requested, is concluded.

When a conciliation process is initiated, the county agency shall convene a conciliation conference which is presided over by the director or a designee. Both the county agency and the individual may bring whomever each reasonably wants to be at the conference in an attempt to informally resolve differences. When appropriate, the worksite supervisor may attend, or information from the worksite supervisor as requested by the county agency may be presented.

***The conciliation conference does not replace the right to request a county conference pursuant to the provisions of Chapters 5101:6-1 to 5101:6-9 of the Administrative Code and the conciliation process shall not in any way limit the participant's hearing rights.***

The individual shall be notified in writing of the outcome of the conciliation conference. The notification shall also contain an explanation of the right to a state hearing pursuant to the provisions of Chapters 5101:6-1 to 5101:6-9 of the Administrative Code. When the conciliation conference is to be followed by a proposal of an adverse action, the prior notice sent to the individual will fulfill this requirement.

Conciliation requests may be derived from Human Resources, OMJ Administration are directly through Job Worker. Request will be monitored by Human Resources as well as Journal note by those workers that touch the case in any aspect of the grievance.

All notes will be scanned into OB as well the agency file located in Human Resources in Sharepoint.

## Section 10: Budget and Contracts

**The county agency must have budgets and track expenditures. Budget narratives must be kept on file and made available upon request by state or federal reviewers.**

### 1. Does your county have any monetary contracts with SNAP E&T providers?

- YES-If yes, please complete Tab A-1 of the attached "County SNAP E&T Plan Contracts Workbook"
- NO

#### **Instructions for Tab A-1-Monetary contracts, if applicable:**

- This section should be completed when a county agency directly holds monetary contracts with employment and training providers for the delivery of SNAP E&T services. This information includes: The name of the county, the name of the provider; geographic area served; the year the contract began; the year the contract ended; the components to be provided; the participant reimbursements that will be provided by the provider; whether virtual services are available and the annual number of SNAP E&T individuals to be served.

### 2. Is the county using multiple funding sources to implement its SNAP E&T program? Choose an item.

**If yes, which program do you co-braid funding with? Check all that apply:**

- WIOA
- TANF
- Private: *define*
- Other: *define*

### 3. Total SNAP E&T Operating Budget: *\$59,659.53 (Represents direct costs and projected reimbursements) LAST YEAR – I believe that it represents the total cost of the Jobs Worker Salary and Fringe Benefits.*

4. Describe how your county evaluates the performance of SNAP E&T providers in achieving the purpose of the SNAP E&T program (such as assisting members of the SNAP household in gaining skills, training, work, or experience that will increase their ability to obtain regular employment). **Administrator and Jobs Case Worker will visit the WEP sites annually to discuss goals and progress of clients placed at that site. Best practices will be shared and put into practice.**

**Jobs Worker will Evaluate monthly progress monitoring to determine each site's ability to provide necessary skills growth for clients to achieve self-sufficiency. Any issues with a site will require an additional visit and review of WEP plans and procedures.**

#### 5. Direct Costs:

Salary/Wages: List staff positions in full-time equivalent (FTE) and time spent on SNAP E&T	\$33,404.80
Fringe Benefits: if charging fringe benefits to the SNAP E&T program, provide the approved fringe rate.	\$7428.50
Number of monetary contacts:	-0-
Total contractual costs:	-0-
Non-capital equipment and supplies: describe non-capital equipment and supplies purchased with SNAP E&T funds.	Supplies have not been separated out for the programs at OMJ. Once Rectified we will amend the plan.
Materials: describe materials to be purchased with SNAP E&T funds.	Supplies have not been separated out for the programs at OMJ. Once Rectified we will amend the plan.
Travel and staff training: describe the purpose and frequency of <u>staff</u> travel charged to the SNAP E&T program.	Currently Staff Training Is offered through Zoom and no travel is recorded.

Building/Space: if charging building space to the SNAP E&T program and describe the method used to calculate the space value.	Minimal cost absorbed through the agency.
Equipment & Other Capital Expenditures: describe equipment and other capital expenditures over \$500 per item.	

Please complete the questions below for each contract with a third-party provider or partner:

1.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>
Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services

	<input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees <input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Type of ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

2.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>

Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees <input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Type of ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

3.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>

Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>
Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees <input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>

	<input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Means ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

4.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>
Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting

	<input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees <input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Type of ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

5.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training

	<input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>
Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees <input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Types of ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

6.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>
Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees

	<input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Types of ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

7.

Third Party Contractor or Partner Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Intermediary	Choose an item.
Name of subcontractor, if applicable	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered	<i>Click or tap here to enter text.</i>
Participant Reimbursement(s) Offered	<input type="checkbox"/> Automobile Repairs <input type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input type="checkbox"/> Clothing for Interview <input type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs

	<input type="checkbox"/> Driver's License Fees/Class <input type="checkbox"/> Drug Tests <input type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input type="checkbox"/> Test Fees <input type="checkbox"/> Tools <input type="checkbox"/> Training Materials <input type="checkbox"/> Transportation (excluding gas) <input type="checkbox"/> Tuition and Fees <input type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	Choose an item.
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
How is the contract monitored? Describe how the county monitors the provider.	<i>Click or tap here to enter text.</i>
Type of ongoing communication with contractor:	<i>Click or tap here to enter text.</i>
Type of Agreement	<i>Click or tap here to enter text.</i>
Total Cost of Agreement	<i>Click or tap here to enter text.</i>
New Partner	Choose an item.
Year contract or subcontract established	<i>Click or tap here to enter text.</i>
Year contract or subcontract ended	<i>Click or tap here to enter text.</i>

## Section 11: SNAP E&amp;T Providers

Please complete the questions below for each provider that is NOT a contracted provider or partner identified in Section 10 above:

1.

Provider Name	Coshocton County Animal Shelter
Address	21755 TR 164, Coshocton Ohio 43812
Overview of the Services Provided	Caring for and receiving new animals in need, returning pets to owners, and finding new loving homes via private adoptions and rescue placement.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services

	<input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Mail, phone

2.

Provider Name	Coshocton Commons housing
Address	1171 Commons Drive, Coshocton, Ohio 43812
Overview of the Services Provided	Subsidized Low Rental Housing Community
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs

	<input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

3.

Provider Name	Coshocton County Fairgrounds
Address	707 Kenilworth Ave., Coshocton, Ohio 43812
Overview of the Services Provided	County Fairgrounds and events center.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP

	<input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	40
Type of ongoing communication with provider:	Mail, phone, in-person

4.

Provider Name	Coshocton Handicapped Society
Address	1005 Main St., Coshocton, Ohio 43812
Overview of the Services Provided	Service and support to those with medical infirmities and limited resources to maintain self-sufficiency.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition

	<input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

5.

Provider Name	Coshocton Job & Family Services
Address	725 Pine St., Coshocton, Ohio 43812
Overview of the Services Provided	Social Services providing assistance with all aspects of daily living.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas)

	<input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<i>Click or tap here to enter text.</i>
Are virtual services offered?	No
Annual Number of Individuals to be served	150
Type of ongoing communication with provider:	In-person

6.

Provider Name	Coshocton Meadow's Housing
Address	823 Magnolia St., Coshocton, Ohio 43812
Overview of the Services Provided	Assistance to low-income families and individuals by providing safe, low income housing.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans)

	<input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

7.

Provider Name	Coshocton Senior Center
Address	201 Brown's Lane, Coshocton, Ohio 43812
Overview of the Services Provided	Provides a variety of activities to promote and sustain a healthy, more active lifestyle, and provide a wide range of services to meet the needs of every senior.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books

	<input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	50
Type of ongoing communication with provider:	Phone, mail, fax

8.

Provider Name	First Step - Family violence
Address	647 Locust St., Coshocton, Ohio 43812
Overview of the Services Provided	Intervention for individuals and families dealing with violence in many forms. Serving Adults and Youth.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training

	<input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

9.

Provider Name	Heritage Apartments
Address	1520 North St., Coshocton, Ohio, 43812
Overview of the Services Provided	An affordable housing community providing apartments to those with Income restrictions.

Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>

	<input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

10.

Provider Name	Salvation Army
Address	219 North 4th St., Coshocton, Ohio 43812
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items

	<input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

11.

Provider Name	<i>Click or tap here to enter text.</i>
Address	<i>Click or tap here to enter text.</i>
Overview of the Services Provided	<i>Click or tap here to enter text.</i>
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class

	<input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	<b>ABAWDs with desire for this type of work</b>
Are virtual services offered?	No
Annual Number of Individuals to be served	<i>Click or tap here to enter text.</i>
Type of ongoing communication with provider:	<i>Click or tap here to enter text.</i>

12.

Provider Name	<b>Village of Warsaw</b>
Address	<b>331 Main Street, Warsaw, Ohio 43844</b>
Overview of the Services Provided	<b>Assists with village maintenance crews. Mowing, Landscape, plumbing etc.</b>
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP

	<input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

13.

Provider Name	Village of West Lafayette
Address	113 East Railroad Street, West Lafayette, Ohio 43845
Overview of the Services Provided	Assists with village maintenance crews. Mowing, Landscape, plumbing etc.
Activities Offered Check all that apply	<input type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition

	<input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

14.

Provider Name	Humane Society
Address	PO Box #11 Coshocton, Ohio 43812
Overview of the Services Provided	Saving and preparing Animals to be adopted. Providing medical assistance to veterinarians.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials

	<input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

15.

Provider Name	Kids Campus
Address	468 Brown's Lane, Coshocton, Ohio 43812
Overview of the Services Provided	Childcare services. Clients assist with all aspects of childcare including food prep, Educational Development, etc.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention
Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment

	<input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail, fax

16.

Provider Name	Moving Mountains Ranch
Address	23839 CR 17 Coshocton, Ohio 43812
Overview of the Services Provided	Therapeutic horseback riding for Recovery patients WEP Workers assists with animal care, monitoring riding groups and cleaning of facilities.
Activities Offered Check all that apply	<input checked="" type="checkbox"/> Supervised Job Search <input type="checkbox"/> Job Readiness Training <input type="checkbox"/> Basic Skill Instruction <input type="checkbox"/> Career-Technical Education/Vocational Ed <input type="checkbox"/> English Language Acquisition <input type="checkbox"/> Integrated Education & Training <input type="checkbox"/> Work Readiness Training <input type="checkbox"/> Internships <input type="checkbox"/> Pre-apprenticeships <input type="checkbox"/> Apprenticeships <input type="checkbox"/> Customized training <input type="checkbox"/> Transitional jobs <input type="checkbox"/> Incumbent worker training <input type="checkbox"/> On-the job training <input type="checkbox"/> Subsidized employment <input checked="" type="checkbox"/> WEP <input type="checkbox"/> Job Retention

Credentials Offered, if applicable	N/A
Participant Reimbursement(s) Offered, if applicable	<input checked="" type="checkbox"/> Automobile Repairs <input checked="" type="checkbox"/> Background Checks <input type="checkbox"/> Books <input type="checkbox"/> Child Care for Volunteers <input checked="" type="checkbox"/> Clothing for Interview <input checked="" type="checkbox"/> Clothing for Job; Not Uniform <input type="checkbox"/> Course Registration Fees <input type="checkbox"/> Dependent Care Costs <input checked="" type="checkbox"/> Driver's License Fees/Class <input checked="" type="checkbox"/> Drug Tests <input checked="" type="checkbox"/> Equipment <input type="checkbox"/> Fingerprinting <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> IT Service (internet/data plans) <input type="checkbox"/> Laptops or Tablets <input type="checkbox"/> Legal Services <input type="checkbox"/> Licensing/Bonding Fees <input type="checkbox"/> Medical Services <input checked="" type="checkbox"/> Personal Safety Items <input type="checkbox"/> Student Activity Fees <input checked="" type="checkbox"/> Test Fees <input checked="" type="checkbox"/> Tools <input checked="" type="checkbox"/> Training Materials <input checked="" type="checkbox"/> Transportation (excluding gas) <input checked="" type="checkbox"/> Tuition and Fees <input checked="" type="checkbox"/> Uniforms <input type="checkbox"/> Union Dues <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i> <input type="checkbox"/> Other: <i>define other.</i>
Target Population	ABAWDs with desire for this type of work
Are virtual services offered?	No
Annual Number of Individuals to be served	5
Type of ongoing communication with provider:	Phone, mail