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| **Case Name:** | **Case DCN/User ID:** | **Contractor:** | **Staff Name/ID:** |
| **Reviewed By:** | **Review Date/Type:**   * Monitoring * Targeted ☐ Other | **Participant Status:**  □ ABAWD ☐ Volunteer | **Review Period:** |
| **SNAP Application & Activities**  SNAP application enrolled correctly (participation type, DCN present, correct provider selected, exited app process followed correctly)  Five required SNAP activities present (funding/101/107/205/213) Activities closed correctly  Correct activity codes entered  Notes: | | | |
| **Objective Assessment:**  Current to the SNAP application  Career pathway and desired wage noted Services sought are identified  Education and/or work history completed All skills and barriers sections completed  Additional assessments completed if need was indicated  Notes: | | | |
| **Individual Employment Plan:**  Objectives present for each goal, outline steps to achieve the goal and not the same as the goal  Minimum of one short term and one long term goal and goals are not the same  Goals align with activities on SNAP application  Goals/objectives reflect the desired career pathway/wage stated in Objective Assessment Timeframe for completion  Assessment/skills/barriers reflected in objectives and/or goals Employment is the final goal  Updated with changes  Notes: | | | |
| **Case Notes:**  Mandatory Initial case note entered and contains required information DWD Statewide Service Notes policy followed (see handbook for guidance)  Present for any activity or service provided, including actions outside of MoJobs system  Present for any supportive service,with details of justification/need/exploration of other resources Entered at time of contact  Notes: | | | |
| **Intensive Case Management/Supportive Services:**  TRE/WRE issuances follow policy (justified, open activity, verified attendance) TRE/WRE issued in accordance with provider policy (timeframes, amounts, etc) Barriers addressed and/or referred to Community Based Organizations  Job Retention Services follow policy (see handbook for guidance)  Notes: | | | |
| **Documentation – Required Forms**  FS-5 (DWD-PO-608) in case file and/or submitted for gained employment or ABAWD use Eligibility & DCN verification form if SNAP application was created by staff in MoJobs  ABAWD only:  Job Center WIOA Services form (DWD-PO-609) for regaining eligibility Agreement to Volunteer completed and submitted to FSD  Job description form for WE activity Hours reported log  Job Search Contract (DWD-PO-604A) and logs (DWD-PO-604B) for self-directed job search | | | |

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| Notes: |
| **ABAWD Requirements:**  Exclusions Checklist present or discussion case noted Wagner-Peyser application  Resume  Verification of hours entered within 48 hrs and submitted to FSD Participant was assigned a component for each month of the review LWDB funded training/education  JS/JST hrs of no more than 39 hrs/month & open with another activity  Notes: |
| **Outcomes:**  Employment added to SNAP application Credentials/certificates added to SNAP application  Assessment scores added if known or administered if need was indicated  Notes: |
| **Reviewer Comments/Recommendations:** |