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DEPARTMENT OF LABOR AND EMPLOYMENT DIVISION OF EMPLOYMENT AND TRAINING

OFFICE OF WORKFORCE DEVELOPMENT PROGRAMS
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Category: Workforce Investment Act (WIA)
Subject#: Rapid Response Layoff Reserve Funds
Source: Federal/State
Revise/Replace: Program Guidance Letter # 00-22-WIA1
Contact: Workforce Development Programs Director
Distribution: All Workforce Investment Regions, One Stop Operators
Colorado One-Stop System Policy Guidance Letter#: 03-18-WIA
Date: October 8, 2003

- I. **REFERENCE (S):** Workforce Investment Act of 2000, effective August 11, 2000, Section 134(a)(2)(A)(ii) and WIA Final regulations, 675.300(b).
- II. **PURPOSE:** These guidelines define the process by which local workforce regions and local Workforce Investment boards (WIB) can solicit additional dislocated worker resources through Rapid Response Layoff Reserve funds. For PY03 there is a total of \$200,000 to be distributed. However this amount varies from year to year. These funds can also be used in tandem with any Rapid Response 25% Discretionary Grants that you may receive. See also PGL#03-16-WIA.
- III. **BACKGROUND:** The WIA Final regulations, section 665.300 state that "States must establish methods by which to provide additional assistance to local areas that experience disasters, mass layoffs, plant closings, or other dislocation events when such events substantially increase the number of unemployed individuals". Per section 665.340 funds are "----for provision of direct services to participants (such as intensive, training, and other services) if there are not adequate local funds available to assist the dislocated workers".
- IV. **POLICY/ACTION:** Each local WIB and One Stop operator must follow the guidelines below if they need to solicit additional resources for Program Year 2003 (PY03). These layoff reserve funds are for augmenting services to dislocated workers due to disasters, mass layoffs, plant closings or other substantial dislocation events. There is no deadline for requesting these funds, however they are three-year funds and must be expended by June 2005. Therefore these funds must be expended within two years. There is a requirement that 70% of the funds must be expended by the end of a one year period. In the event that the dislocation event will impact two regions inter-regional cooperation is encouraged and should be addressed in the request.

Requests will be received and processed so long as there are still funds available and there is assurance that they will be expended within the allowable timeframe. Upon approval of a request, funds will be distributed through the usual EA Process. **Each request must include:**

- **Signature Sheet** (see Attachment) With the name, address, and contact information for the region, and signature of the person preparing the request, the workforce region director, and local workforce board chairperson.
- **Identification of Layoffs and Target Group(s):** This must include documentation of the dates of anticipated layoffs, the number and job titles of workers to be affected by them, and an analysis of the transferability of skills of the dislocated workers. It will also include an assessment of the number of individuals estimated to need training services vs. reemployment (i.e., job search assistance) only (explain the basis for your assessment). Funds may be requested for more than one layoff. However, each request must include a service target of at least one “substantial” layoff, i.e., twenty five or more workers and one-third of the total workforce, or 500 or more workers, and no 9-11 NEG funds may be used with these funds.
- **Identification of Other Cooperating Regions:** Identify other regions which will be impacted by the dislocation event and how you will work with them.
- **Job Market Analysis:** Provide an analysis of the occupations and industries in need of people with the skills these dislocated workers possess or in which they could feasibly be retrained. Explain why additional training, if any, will be needed to equip these dislocated workers for jobs in these occupations and/or industries.
- **Reemployment and Training Services:** Describe the services which you expect to provide which are in addition to those normally given by the Workforce Center, if any, such as establishment of a Worker Transition Center, special training program, on-site services or workshops, layoff aversion efforts or other.
- **Budget and Performance Outcomes:** Your request must include:
 - A description of the project outcomes and planned achievements that will be used to determine the success of the project.
 - A chart with the quarterly cumulative numeric outcomes such as enrollments, number enrolled in vocational/occupational training, training completions, entered employments, retention, and the number and percent of training-related entered employments. The planned Enrollment and Termination Summary from the Expenditure Authorization format may be utilized, if appropriate. See Attachment #2.
 - A line item budget that delineates staff, training, and other identifiable costs (administrative costs are not allowed).
 - A chart indicating the quarterly cumulative expenditures anticipated.
 - A budget narrative explaining how funds will be used.
 - Performance outcome measures to be achieved: % entered employment, % of replacement wage at placement.
- **Analysis of your one-stop operation need:** Describe why these resources are needed in addition to your WIA Title I formula allocated dislocated worker resources. You can contract for the completion of this analysis.
- **Requests:** Please direct three original hardcopies of your request to your State Field Representative at: 1515 Arapahoe Street, T2/400, Denver, Colorado, 80202. Requests will be reviewed for content and compliance with the provisions of WIA. Requests will be reviewed by Office of Workforce Development Staff, the State Rapid Response Unit and your State Field Representative. The Director of Workforce Development Programs will provide a response within two weeks of receipt of the request.

V. **IMPLEMENTATION DATE:** Immediately upon receipt.

VI. INQUIRIES: Please direct any questions regarding this PGL to Terry Bohannon at Workforce Development Programs, terry.bohannon@state.co.us or (303) 318-8840.

Donald B. Peitersen, Director
Division of Employment & Training

SIGNATURE SHEET

RAPID RESPONSE LAYOFF RESERVE FUNDS REQUEST

PROJECT INDUSTRY OR EMPLOYER _____

NAME OF APPLICANT REGION: _____

Address: _____

City: _____

Telephone/Fax: _____

Contact Person: _____

Title: _____

PERIOD OF PERFORMANCE: _____

AMOUNT REQUESTED: \$ _____

Name and Signature of Person Preparing Proposal

Date _____

Name and Signature – Director

Date _____

Name and Signature – Local Workforce Board Chairperson

Date _____

Other

Date _____

Three copies of the proposal must be submitted to CDLE, ATTN: (name of your State Field Representative) and must include:

- **This signature page**
- **Request narrative detailed in the PGL**

PLANNED PARTICIPATION AND TERMINATION SUMMARY – CUMULATIVE

Workforce Region:	Funding Stream and Program Year:
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CATEGORY	1 ST QUARTER	2 ND QUARTER	3 RD QUARTER	4 TH QUARTER
Total Participants				
Carry In				
New				
Total Exiters				
Completed Training				
Entered Employment				
% of Training Related Entered Employments				
Employment Retention Rate				
Carry Out				

PLANNED PROGRAM ACTIVITIES – CUMULATIVE

CATEGORY	1 ST QUARTER	2 ND QUARTER	3 RD QUARTER	4 TH QUARTER
Registered Core Services				
Intensive Services				
Training Services				