** Western Wisconsin**

# Workforce Innovation and Opportunity Act (WIOA)

**Disability and Medical Disclosure**

## Applicant

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  |  |  |
|  | Last | First | M.I. |  |  |

***The*** ***definition of disability***:

* have a physical or mental impairment that substantially limits one or more of their major life activities such as caring for themselves, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, working, and the operation of major bodily functions;
* have a record of such impairment; OR
* are regarded as having such impairment (which means they can establish that they have been the subject of a discriminatory action under the American with Disabilities Act because of an actual or perceived impairment, regardless of whether the impairment actually limits a major life activity).

## Category of Disability (check all that apply)

|  |  |
| --- | --- |
| No Disability  Physical/Chronic Health Condition  Physical/Mobility Impairment  Mental or Psychiatric Disability  Do not wish to disclose | Vision-related Disability  Hearing-related Disability  Learning Disability  Cognitive/Intellectual Disability |

## Services Received (check all that apply)

|  |  |  |
| --- | --- | --- |
| Received services from a State Development Agency (SDDA): | YES | NO |
| Received services from a State or Local mental Health Agency (LSMHA): | YES | NO |
| Received services from a Home & Community Based Service Provider under a State Medicaid (HCBS) waiver: | YES | NO |

|  |  |  |
| --- | --- | --- |
| Disability Work Setting:  Competitive Integrated Employment  Individual Supported Employment  Group Supported Employment  Sheltered Workshop  Combination of two or more settings  Not Employed  Prefer not to answer | Type of Customized Employment Services Received:  Discovery Assessment Services  Developed a customized employment search plan  Employer Negotiation Services  Employed result of customer employment services and external support services  No CES services  Prefer not to answer | |
| Received Disability Financial Capability:  Benefit Planning Services  Financial capability/asset development services  Benefit plan/fin capability/asset development  No  Prefer not to answer | Disability Individualized Education Program:  Current IEP  Previous IEP  Prefer not to answer | Section 504 Plan:  Yes  No |

## Pregnancy

|  |  |  |
| --- | --- | --- |
| Are you currently pregnant? | YES | NO |

## Social Security Administered Funds

|  |  |  |  |
| --- | --- | --- | --- |
| Do you or a family member receive Supplemental Security Income (SSI)? | I receive | Family member receives | Neither |
| Amount:  Do you or a family member receive Social Security Disability Insurance (SSDI)? $      per | I receive | Family member receives | Neither |
| Are you or a family member a Ticket holder for the Ticket to Work program? | I am | A family member is | Neither |

***I attest that the information provided on this form is true to the best of my knowledge.***

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

**Babel Notice**

In accordance with 29 CFR 38.9 (g)(3), Limited English Proficient (LEP) individuals seeking access to information about WIOA programs offered through the Western Wisconsin WDB and its American Job Center partners, will receive language assistance in all communications of vital information. Vital information is defined as information, whether written, oral or electronic, that is necessary for an individual to understand how to obtain any aid, benefit, service and/or training; necessary for an individual to obtain any aid, benefit, service and/or training; or required by law. An interpreter, as well as the availability of free language assistance such as rulebooks; written tests that do not access English language competency, but rather assess competency for a particular license, job or skill for which English proficiency is not required; and letters or notices that require a response from the beneficiary or applicant, participant or employee will be provided to all LEP individuals at no cost to the individual.

**English** IMPORTANT! There are documents that contain important information about WIOA training services; how to apply for training services; and your rights, responsibilities and/or benefits. It is critical that you understand the information in these documents. You can receive telephone translation assistance of all documents by calling (608) 789-5499 at no cost to you.

**Español** ¡IMPORTANTE! Hay documentos que contienen información importante acerca de los servicios de capacitación de WIOA, cómo solicitar servicios de capacitación, sus derechos, responsabilidades y / o beneficios. Es fundamental que entienda la información de estos documentos. Usted puede recibir asistencia de traducción telefónica de todos los documentos por calling (608) 789-5499 sin costo alguno para usted.

**Hmong** TSEEM CEEB! Muaj cov ntaub ntawv uas muaj cov ntaub ntawv tseem ceeb txog WIOA cov kev pabcuam kev cob qhia; yuav ua li cas thov rau kev pabcuam kev cob qhia; thiab koj cov cai, lub luag haujlwm thiab / lossis cov txiaj ntsig. Nws yog ib qho tseem ceeb uas koj nkag siab cov ntaub ntawv hauv cov ntaub ntawv no. Koj tuaj yeem tau txais kev pab txhais lus hauv xov tooj ntawm txhua cov ntaub ntawv los ntawm kev hu rau (608) 789-5499 yam tsis tau them nqi rau koj.

**Accommodation Requests**

Auxiliary aids and services are available upon request to individuals with disabilities. Please contact your WIOA Title I Career Planner or the WWWDB office for such requests.

**Wisconsin Relay (7-1-1)**

Wisconsin Relay is a free service that provides full telephone accessibility to people who are deaf, hard-of-hearing, deaf-blind and speech-disabled. The service is available by dialing 7-1-1 or by calling TTY 1-800-947-3529. For more information, visit [www.wisconsinrelay.com](http://www.wisconsinrelay.com/).  
  
**EO Tagline**  
Western Wisconsin Workforce Development Board is an Equal Opportunity Employer and Service Provider. Auxiliary aids and services are available upon request to individuals with disabilities. If you need this information interpreted to a language you understand or in a different format, please contact Melisa Myers, Equal Opportunity Officer, at 608-789-5499 or myersm@westernwdb.org. Callers who are deaf or hearing or speech-impaired may reach us at Wisconsin Relay Number 711.

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