NEBRASKA DEPARTMENT OF LABOR | GREATER NEBRASKA WORKFORCE DEVELOPMENT BOARD

Transitional Jobs

Transitional jobs (TJ), defined as time-limited work experiences that are wage-paid and subsidized, and are in the public, private, or non-profit sectors for those individuals with barriers to employment who are chronically unemployed or have inconsistent work history.

TJ must be combined with comprehensive career services and supportive services. These jobs are designed to enable an individual to establish a work history, demonstrate work success in an employee-employer relationship, and develop the skills that lead to unsubsidized employment.

There is no requirement that the employer retain the individual upon completion of the TJ however, retention is preferred for the benefit of the worker and employer when appropriate.

Participant Eligibility

In addition to meeting general eligibility requirements for the WIOA program and being unemployed at the date of application to the WIOA program, the participant must also have one or more barriers to employment and be chronically unemployed or have an inconsistent work history. These eligibility requirements must be documented in the participant file.

Barriers to Employment

For participant eligibility for transitional job activities, participants must meet one or more of the following barriers:

1. Ex-offender
2. Homeless individual
3. English language learner
4. Displaced homemaker

Chronically Unemployed / Inconsistent Work History

Individuals with chronic unemployment or an inconsistent work history are those who:

1. Have been unemployed for 24 weeks or longer prior to application
2. Were unemployed at least 26 of the 52 weeks prior to application
3. Have held four or more jobs in the 12 months prior to application and are currently unemployed; or
4. Are on parole or probation, or have been released from prison/jail within the 12 months prior to application

Eligible Employers

Eligible employers can be from the public, private, or non-profit sectors. As TJs are structured to help participants achieve success in the workplace and develop skills needed to obtain and retain unsubsidized employment, the employer must be able to provide supervision and appropriate feedback to the participant at regular intervals during the course of the activity and be willing to participate in the required monthly monitoring conducted by the career planner.

An employer will be ineligible if they meet one or more of the following:

1. The employer has recently laid off an individual of the same or equivalent position.
2. The transitional job placement would infringe upon the promotion of or displacement of any currently employed worker or lead to a reduction in their hours.
3. The employer is a private for-profit employment agency including but not limited to temporary employment agencies, employee leasing firms or staffing agencies.

Future TJ requests from employers will be denied if the requirements set forth in previous worksite agreements were not honored.

Transitional Job Components

Transitional jobs at a minimum must include the following components:

1. Paid work experience of a fixed duration
2. Individualized career services
    a. At least one must be provided prior to or during the transitional job. (Examples include, but are not limited to: group and/or individual counseling, short-term prevocational services including soft skills training, workforce preparation activities, financial literacy activities, English language acquisition, etc.)
3. Supportive services
    a. At least one must be provided during the transitional job. (Examples include, but are not limited to: linkages to community services, assistance with child care, housing or transportation, assistance with education testing, referrals to health care). See Supportive Services policy for an all-inclusive list.

Length & Wage Limits

Transitional jobs are time limited to no more than 500 hours. Participants can work up to 40 hours a week. The participant may be placed with more than one employer during the transitional job activity, but the total number of hours for all worksites may not exceed 500 hours or 26 weeks, whichever comes first.

GN WIOA will pay 100% of the participant’s wages. Wages are set at the Nebraska minimum wage ($9/hr at the effective date of this policy).

The maximum cost to be paid per participant for the WE component of the TJ is $4,500. The supportive service maximum cost to be paid per participant is $4,000 and must be based off of participant need.

Forms

TJ forms are available at dol.nebraska.gov > Workforce Innovation Opportunity Act > Local Workforce Development Areas > Greater Nebraska > Local and Regional Plan Documents > Operations Manual & Forms

- Add to Payroll Checklist
- Debit Card Form
- Direct Deposit Form
- I-9 Form
- I-9 Form Instructions
- Payroll Calendar
- Payroll Information
- Timesheet
- Transitional Jobs Eligibility Summary
- W-4 Form (State and Federal Forms)
- WIOA Worker's Comp Accident Investigation Form
- Transitional Jobs Consent
- Worksite Agreement

Transitional Jobs Eligibility Summary

The transitional jobs eligibility summary form must be completed and approved by the manager prior to opening a TJ activity and completing the Add to Payroll process. The Transitional Jobs Eligibility Summary must be uploaded to ECM indexed under *Transitional Jobs Eligibility Summary.*

Add to Payroll

TJ participants are employees of the State and must be added to the State's payroll.

Career planners are responsible for completing the 'add to payroll' forms and submitting to the administrative entity. All forms must be completed in their entirety and submitted at least three business days prior to their start date.

Career planners must utilize the Add to Payroll Checklist for the list of required documentation. The Add to Payroll packet must be submitted as a single document emailed to ndol.billingandpayments@nebraska.gov, ndol.greaternebraska@nebraska.gov and Sandi Miller at sandi.miller@nebraska.gov. Label the email "Add to Payroll." The packet will include the below documents in the order listed on the checklist:

- Add to Payroll Checklist
- I-9 *(Work Experience Payroll)*
- I-9 Supporting Documents *(Reference the ECM Crosswalk for correct index)*

- W-4- State and Federal *(Work Experience Payroll)*
- Direct Deposit Form *(Direct Deposit Enrollment Form)*
- Payroll Card Form *(Debit Card Request Form)*
- Payroll Information Sheet- *(Work Experience Payroll)*
- Transitional Jobs Consent *(Work Experience- Consent)*
- Worksite Agreement *(Work Experience- Worksite Agreement)*

Each document must be individually uploaded to ECM and indexed as indicated in the blue text above.

I-9 Form

Section 1. Employee Information and Attestation

Last Name- Participant's legal last name
First Name- Participant's legal first name
Address- Participant's home address
Date of Birth- Participant's date of birth
U.S. Social Security Number- Participant's social security number
Employee's E-mail Address- Participant's email address
Employee's Telephone Number- Participant's phone number
Citizenship Status- Participant must select one of the four available choices
Signature of Employee- Participant's signature
Today's Date- Date form was completed

Preparer and/or Translator Certification

Select if a preparer or translator assisted the participant. If a preparer or translator was used, complete the below fields.

Signature of Prepare or Translator- Career planner's (or individual who assisted) signature
Today's date- Date form was completed
Last Name- Career planner's last name
First Name- Career planner's first name
Address- 550 S. 16th St, Lincoln NE 68509

Section 2. Employer or Authorized Representative Review and Verification

Employee Info from Section 1- Complete last name, first name, M.I., and citizenship/Immigration Status to match what was listed on the first page

Complete either List A or List B AND C. List of acceptable verification documents are on page 3. Collect copies of the verification documents listed.

Certification

Employee's first day of employment- Start date of the work experience
Signature of Employer or Authorized Representative- Career planner's signature

Today's date- Date form was completed
Title of Employer or Authorized Representative- Career planner's job title
Last Name- Career planner's last name
First Name- Career planner's first name
Employer's Business or Organization Name- Nebraska Department of Labor
Address- 550 S. 16th St, Lincoln NE 68509

Section 3. Reverification and Rehires

Leave blank

Reference the I-9 Form Instructions and example below if more assistance is needed.

W-4 Form- State

This should be completed by the participant. The career planner can assist the participant.

1. Participant's first legal name and middle initial, last name, and home address
2. Participant's social security number
3. Marital status- Select one
4. Page 2 of the form includes instructions on how to complete the form.
5. Utilize the Personal Allowances Worksheet at the bottom of the form to complete boxes 1-3.
6. Participant must sign and date the form.

W-4 Form- Federal

This should be completed by the participant. The career planner can assist the participant.

Step 1

a) Participant's first legal name and middle initial, last name, and home address
b) Participant's social security number
c) Marital status- Select one

Steps 2-4

Steps 2-4 only need completed in they apply to the participant. If they do not apply, skip to step 5. Have the participant utilize the instructions included on pages 2-4 to complete steps 2-4 or contact a tax professional for assistance.

Step 5

Participant must sign and date the form.

Employer's Only information must be left blank. Sandy Miller will complete this.

Direct Deposit Enrollment Form

This should be completed by the participant. The career planner can assist the participant.

Name- Participant's name
Address book #- Leave blank
Agency #- Leave blank

Check beginning new deposit
Account Information- Participant's checking or savings account they want their checks deposited in

Bank Name- Participant's bank name
Routing Number- Routing number off of check
Account Number- Account number off of check
Saving or Checking- Enter either S or C
Method Code- %
$ or % Amount- 100

Employee Name- Participant prints their name
Signature- Participant's signature
Date- Date form was completed

Focus Card Enrollment Form

This form should only be completed if the participant plans to use the Focus Card instead of having their checks direct deposited into their checking or savings account.

First Name- Participant's first name
Employee ID- Leave blank
Last Name- Participant's last name
Address, City, State, Zip- Participant's mailing address
Phone Number- Participant's phone number
Social Security Number- Leave blank
Date of Birth- Participant's date of birth
Email Address- Participant's email address
Signature- Participant's signature
Date- Date form was completed

Work Experience Payroll Information Form

Select "New Enrollee"
First Name- Participant's first name
Last Name- Participant's last name
Date of Birth- Participant's date of birth
Social Security Number- Participant's social security number
Address, City, State, Zip- Participant's address
Tax Filing Status- Select one (must match W-4 form)
Exemptions/ Deductions- Line 5 from W-4 form
Career Center- Career planner's career center
Effective Date- First day of the work experience
Salary- $10.00
Cost Center- Career planner's cost center
Account Number- Select either Adult or DLW
Method of Payment- Select the method of payment the participant chose
Career Planner- Print name, sign, and date

The Payroll Information form is also used for any changes/ updates to the participants payment method, address, etc. and to remove the participant from payroll. Remove from payroll procedures are included below.

Work Experience Consent Form
Wage- 10.00
Participant must sign and date
Career Planner must sign and date
If under 18, parent/guardian must sign and date

Worksite Agreement
Participant Name
SSN- Participant's SS number
Start Date- Frist day of the work experience
Hours per Day- Up to 8 hours
Rate of Pay- $10.00
End Date- Projected end date of the work experience
Hours per Month- Up to 192 hours
Cost Center- Career planner's cost center
Job Title- Participant's job title (provided by employer)
*O*Net Code*- Occupation code
Job Description- Basic description of job duties
Worksite Name- Name of worksite
Address, City, State, Zip- Worksite address
Phone Number- Worksite phone number
Select which program will fund the work experience

Form must be signed by the worksite representative, worksite supervisor, participant, and career planner.

Academic Educational Component Goals- List any academic skills the participant is expected to learn. Worksite supervisor will sign off as they are completed.

Occupational Educational Component Goals- List any occupational skills the participant is expected to learn. Worksite supervisor will sign off as they are completed.

Payment Procedures

TJ clients are considered employees of the State of Nebraska. The WIOA program, not the worksite covers payroll, social security and worker's compensation expenses. TJ clients do not receive sick leave, holiday pay, vacation time, or overtime and may not work more than 40 hours per week. TJ clients may be paid for hours worked on a holiday if the career planner verifies with the worksite supervisor that the worksite was operational and the hours were in fact worked.

TJ payroll is completed biweekly, on the same schedule as the State payroll. Timesheets must be submitted between Friday, end of payroll and Monday, beginning of next payroll to ndol.billingandpayments@nebraska.gov and ndol.greaternebraska@nebraska.gov. Timesheets must be signed by the supervisor, participant, and career planner.

Late timesheets- If timesheets are not submitted by noon the Monday following the end of payroll the participant will not be paid until the following payroll.

Timesheet

A new timesheet must be completed each pay period.

Participant Name
Pay Period #- B1 (There are 26 pay periods in a year. The first pay period in January is B1, each pay period counts up from there)
Participant Address
Worksite Name
Worksite Address

Calendar work week is Monday-Sunday. Enter the start and end date of each work week. For each day worked enter the in and out time. Timesheets should be completed by the worksite and submitted to the career planner bi-weekly.

Note: Ensure breaks are tracked for participants working six hours or longer at a time. If breaks are not being tracked, remind the worksite that breaks are required for six hour or longer shifts.

If the timesheet is completed online the totals will automatically calculate. If the timesheet is completed manually, you will have to calculate the total hours worked each day, total hours for the week, total hours for both weeks, and gross wages for both weeks. If the timesheet is completed manually, include a typed version when you submit for payment. Only one timesheet needs signatures.

Timesheets must be signed and dated by the worksite supervisor, participant, and career planner. Timesheets can be submitted without signatures, but a signed version must be submitted before the next pay period ends.

Career planners must review timesheets for legibility and accuracy. Calculations errors do not have to be sent back to the worksite. Cross out the error with a single line, write the correct amount, and initial beside the correction.

Garnishment

Notify the administrative entity immediately upon receipt of any legal order for payroll garnishment of TJ wages.

Workers Compensation

Workers Compensation insurance for WIOA clients is provided through the Travelers Insurance Company. Immediately report on-the-job injury or illness to the administrative entity. Workers Compensation does not cover travel to and from work.

Remove from Payroll

When a participant completes their TJ, successfully or unsuccessfully, they must be removed from payroll. To remove a participant from payroll email the completed Payroll Information form to ndol.billingandpayments@nebraska.gov and ndol.greaternebraska@nebraska.gov. Label the email "Remove from Payroll."

If a participant ends a TJ, but hasn't worked the total 500 hours, they may participate in a second TJ with a different employer. In this case, submit a new Worksite Agreement and any other updated forms for the new TJ to the ndol.billingandpayments@nebraska.gov and nodol.greaternebraska@nebraska.gov inboxes.

Required Action

Complete the above Add to Payroll process prior to the TJ starting. Complete the above Payment Procedures biweekly. Timesheets must be submitted between Friday end of payroll and Monday beginning of next payroll to ndol.billingandpayments@nebraska.gov. Complete the Remove from Payroll process above at the end of the TJ.

Opening the NEworks Activity

Career planners must open the NEworks activity, voucher, and IEP objective the day the participant begins their TJ. Follow the Opening an NEworks Activity procedures in Section 4 Documentation of this manual. The participant need, eligibility, and all three components of the transitional job must be documented in a case note and the IEP.

NEworks Code & Service, Course or Contract Name		
21B	Transitional Jobs	

Worksite Monitoring

Monitoring must be completed at least once a month, in person or via phone or email, and must be documented in a case note and IEP. The monitoring should include an evaluation of soft skills and occupational skills. The case note must include who the career planner spoke with, how the participant is doing, any concerns the employer has, etc.

Example

TJ Monitoring(case note title): Conducted a TJ site visit today. Met with Jennifer Smith, Matt's direct supervisor. Jennifer said Matt is quickly learning how to operate the cash register, but more often than not shows up at least 10 minutes late for his shift. I let her know that I would work with Matt on his attendance and to let me know if she sees any positive change.

Closing the NEworks Activity

Close the activity and IEP objective on the last day the participant works at the TJ. Follow the Closing an NEworks Activity procedures in Section 4 Documentation of this manual.