Policy and Requirements Handbook

Chapter 2:
Student Support Services

March 15, 2022
# Table of Contents

## 2.0 Introduction

---

## 2.1 Counseling

### Requirements

- R1. Organization
- R2. Personal Assessment and Counseling Services
- R3. Career Assessment and Counseling
- R4. My Pathway to Achieving Career Excellence Career Plan
- R5. Placement Readiness

---

## 2.2 Community Living (Residential)

### Requirements

- R1. Student Self-Management Skills Development
- R2. Supervision of Student Living Areas
- R3. Recreational Planning
- R4. Recreational Activities
- R5. Recreation Supervision
- R6. Community Service Projects
- R7. Water Safety Training
- R8. Use of Movies
- R9. Leisure Time Employment
- R10. Student Benefit Fund
- R11. Welcome Kit
- R12. Laundry Services
- R13. Mail Services
- R14. Linen and Bedding
- R15. Inventory

## 2.3 Health Services

### Requirements

- R1. Student Introduction to Health Services
- R2. Health and Wellness Program
- R3. Oral Health and Wellness Program
- R4. Mental-Health and Wellness Program
- R5. Trainee Employee Assistance Program (TEAP)
- R6. Tobacco Use Prevention Program (TUPP)
- R7. Family Planning Program
- R8. HIV/AIDS
- R9. Healthy Eating and Active Lifestyles
- R10. Health Aspects of Sports
- R11. Basic Health Services Provided by Job Corps Centers
2.4 DISABILITIES ........................................................................................................... 2.4-1

Requirements.............................................................................................................. 2.4-1
  R1. Disability Coordinators ..................................................................................... 2.4-1
  R2. Disability Accommodations ............................................................................. 2.4-1
  R3. Reasonable Accommodation Process .............................................................. 2.4-1
  R4. CIS Disability Data Collection and Accommodation Plans ......................... 2.4-2
  R5. Referral Process ............................................................................................... 2.4-2

2.5 STUDENT CONDUCT ............................................................................................ 2.5-1

Requirements.............................................................................................................. 2.5-1
  R1. Incentives .......................................................................................................... 2.5-1
  R2. Rules and Sanctions ......................................................................................... 2.5-1
  R3. Investigation and Disposition of Incidents ....................................................... 2.5-2
  R4. Appeal Process ................................................................................................ 2.5-2
  R5. Regional Appeals Board .................................................................................. 2.5-2
  R6. Bullying and Sexual Harassment Training ..................................................... 2.5-5

2.6 EVALUATION OF STUDENT PROGRESS ....................................................... 2.6-1

Requirements.............................................................................................................. 2.6-1
  R1. Evaluation of Student Progress ....................................................................... 2.6-1
  R2. Content of Evaluations .................................................................................... 2.6-1
  R3. Transition to Career Development Period ..................................................... 2.6-2

EXHIBITS

Exhibit 2-1 Infraction Levels, Definitions, and Appropriate Center Actions
Exhibit 2-2 Requirements for the Conduct of Fact-Finding Boards
Exhibit 2-3 Menu of Progressive Discipline Interventions and Sanctions for Minor Infractions
Exhibit 2-4 Job Corps Basic Health Care Responsibilities
Exhibit 2-5 Placement Pathway Prerequisites for Entry
### APPENDICES

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix 201</td>
<td>Communicating with Persons with Disabilities</td>
</tr>
<tr>
<td>Appendix 202</td>
<td>Transmission, Storage, and Confidentiality of Medical, Health, and Disability-Related Information</td>
</tr>
<tr>
<td>Appendix 203</td>
<td>Medication Management Guidelines</td>
</tr>
</tbody>
</table>

### FORMS

<table>
<thead>
<tr>
<th>Form</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 2-01</td>
<td>Notice of Medical information Use, Disclosure, and Access</td>
</tr>
<tr>
<td>Form 2-02</td>
<td>HIV Testing Information Sheet</td>
</tr>
<tr>
<td>Form 2-03</td>
<td>Definitions and Documentation Requirements Related to Reasonable Accommodations for Applicants and Students with Disabilities</td>
</tr>
<tr>
<td>Form 2-04</td>
<td>Individualized Assessment of Possible Direct Threat</td>
</tr>
<tr>
<td>Form 2-05</td>
<td>Health Care Needs Assessment</td>
</tr>
<tr>
<td>Form 2-06</td>
<td>MyPACE Career Plan Review Checklist</td>
</tr>
</tbody>
</table>
2.0 INTRODUCTION

Chapter 2, Student Support Services which in addition to Chapter 3, covers career preparation period and career development period activities, provides a framework of requirements for center contractors in areas such as counseling, personal and career assessment, community living, leisure time employment, student benefit fund, health and wellness program, healthy lifestyle, disability accommodations and processes, student conduct, student sanctions, investigations, appeals, evaluation of student progress, and transition to the career development period among others. Requirements are detailed in the following sections within the chapter: Counseling; Community Living (Residential); Health Services; Disabilities; Student Conduct; and Evaluation of Student Progress. Job Corps enrollees must be provided services consistent with the Workforce Innovation and Opportunity Act and Job Corps requirements contained herein. Center staff are tasked with all areas of personal and career counseling and assessment of students, collaborating with students to create a My Pathway to Achieving Career Excellence Career Plan, overseeing residential community living and developing activities and events, providing welcome kits and basic living services, health services, trainee employee assistance program services, disability services, student conduct rewards and sanctions, and ongoing, frequent evaluations of student progress.
2.1 COUNSELING

REQUIREMENTS

R1. Organization

Centers must provide personal counseling services with the following features:

a. Designated counseling staff or qualified professionals
b. Assigned caseloads
c. Personal counseling sessions
d. Availability of counseling services on weekends and in the event of emergencies

R2. Personal Assessment and Counseling Services

Centers must provide intensive ongoing personal assessment and counseling services early within the first 60 days of the student’s stay on center. These services will continue as needed throughout the student’s enrollment to identify, assess, and assist students to address personal barriers to progress in academic and career technical training programs, with the following features:

a. An intake assessment, including student history, conducted during the first 48 hours of enrollment (see Chapter 3, Section 3.4, R7 and R8). A copy of this assessment must be submitted to the Health and Wellness center for review and inclusion in the student’s health record
b. Ongoing structured, scheduled, and documented individual social development and adjustment counseling
c. Group support sessions designed to identify and address specific issues, such as abuse, relationships, child care, homesickness, language and cultural barriers, etc.
d. Identification of students who need more intensive services and referral to such services
e. Intervention, implementation, and documentation of strategies to address personal issues, including mental health, medical issues, and challenges for English Language Learners (ELL)
f. Support services, to include assisting with Unauthorized Absence (UA) retrieval; conferring with parents, Admissions Counselors, Career Transition Specialists, and social service agencies; and providing referrals to community resources, as appropriate
g. Availability of counseling services on weekends and in the event of emergencies
R3. Career Assessment and Counseling

Centers must provide career assessment and counseling services throughout the student’s enrollment with the following features:

a. Ongoing structured, scheduled, and documented individual career counseling sessions, which may be scheduled as part of a student’s career development activities

b. Management of students’ career development through collaboration among the student, counselor, and interdepartmental Career Management Team (CMT) to assist the student in:
   1. Setting and updating incremental short-term, mid-term, and long-term personal and career goals by ensuring Pathway Achievement Record (PAR) completion progress is current
   2. Developing strategies and identifying actions necessary for students to prepare for and attain academic credentials and industry-recognized certifications
   3. Identifying personal strengths and career challenges
   4. Resolving personal issues affecting career readiness
   5. Assessing transitional support needs and developing strategies to meet those needs

c. Counselors must know and remain current on industry certifications offered and requirements for attainment

d. During the Career Preparation Period, staff will assist students in identifying initial career goals and developing personalized strategies to reach those goals through:
   1. An individualized schedule of appropriate academic, career technical training, and evening/weekend studies
   2. Exposure, practice, and experiences to meet the Career Success Standards
   3. Personal and career counseling to develop appropriate strategies and identify resources to address issues

e. A review and confirmation of the student’s initial My Pathway to Achieving Career Excellence (MyPACE) Career Plan and mid-term career pathway goals, within 30 days of entry into the Career Development Period

f. Trained staff who can assist students, for whom a change of mid-term career (placement) goal is determined appropriate to:
1. Modify the MyPACE Career Plan and reassign the student to a revised PAR.

2. Submit the revised Career Plan to the Center Director or senior management designee for review and approval.

3. Retain a copy of the approved revised Career Plan and revised Pathway Achievement Record in the student’s permanent personnel file. (See Chapter 6, Section 6.4, R17, Student Personnel File.)

g. Regular assessments and evaluations of student progress in meeting career goals in academic and career technical education and training programs, reviewing, and updating the student’s MyPACE Career Plan and the PAR in accordance with Chapter 2, Section 2.6, R1 and R2

**R4. My Pathway to Achieving Career Excellence Career Plan**

a. Centers must collaborate with each student to initiate a MyPACE Career Plan that must document the student’s personal career goals, training needs, challenges, progress and accomplishments throughout enrollment and the post-center Career Transition Period.

At a minimum, the MyPACE Career Plan must include:

1. Student long-term career goal (the ultimate career that the student will progress toward)

2. Mid-term career pathway placement goals (immediate next steps upon Job Corps completion to support career progression), including one of the following:
   (a) Entry-level job placement in an in-demand industry sector on the pathway to the student’s ultimate career
   (b) Entry into an apprenticeship program
   (c) Participation in one of Job Corps’ Advanced Training (AT) programs
   (d) Enlistment in the armed services to pursue a career in the military
   (e) Enrollment in post-secondary education

3. Student short-term specific, measurable, attainable, recorded, and time-bound (SMART) goals

4. Desired geographic residence/work location

5. Student interests, aptitudes, values, work styles, and career technical training preferences and choices

6. Details regarding a student’s prior employment, including:
   (a) employer
   (b) location
   (c) job title
(d) ending wage

Centers must verify the accuracy of this information.

7. Student training needs to achieve career goals
   (a) Academic
   (b) Career technical training
   (c) Career Success Standards
   (d) Job search skills
   (e) Information technology (IT) skills
   (f) Driver’s education and license

8. Progress/accomplishments/achievements

9. Career transition needs/challenges/strategies
   (a) Housing
   (b) Transportation
   (c) Child care
   (d) Health care
   (e) Work clothing and tools
   (f) Food and nutrition
   (g) Budgeting/money management
   (h) Counseling/mentoring
   (i) Job retention skills
   (j) Legal services
   (k) Application for federal funding for advanced education, as appropriate

b. Students must update their MyPACE Career Plan by completing the accompanying curriculum. Once the MyPACE Career Plan is complete, students must be assigned the appropriate Pathway Achievement Record (PAR) that matches their mid-term goal. Students must update their PARs on an ongoing basis, in cooperation with appropriate staff, no less frequently than at each student’s regularly scheduled evaluation of student progress.

c. Each student’s completed MyPACE Career Plan and PAR must be uploaded to the appropriate section of the Center Information System (CIS) e-Folder. Students must be provided copies of their MyPACE Career Plan and PARs whenever changes are made to the plan and at separation.

R5. Placement Readiness

To ensure that each student is fully prepared to effectively access resources and services that assist them in making a successful transition to his/her mid-term goal the interdepartmental Career Management Team (CMT) must:

a. Collaborate with the Career Transition Service Provider and each student to:
1. Update and finalize the student’s My Pathway to Achieving Career Excellence (MyPACE) Career Plan and Pathway Achievement Records (PAR);

2. Review and verify the student’s mid-term career goal to:
   
   (a) Ensure the student has completed all assigned mid-term goal PAR tasks and activities and has proper supporting documentation of completed tasks;
   
   (b) Verify the student’s understanding of the next steps needed to transition to the chosen mid-term career goal; and career pathway remains appropriate;
   
   (c) Confirm the student’s transitional support needs and strategies to address them.

b. Facilitate the student’s connection with his/her assigned Career Transition Specialist.

c. Submit each student’s final MyPACE Career Plan and PAR to the Center Director or senior management designee for review and approval.

d. Retain a copy of the approved final MyPACE Career Plan and PAR in the student’s permanent personnel file. (See Chapter 6, Section 6.4, R17, Student Personnel File.)

e. Upload a copy of the final MyPACE Career Plan and PAR in the Center Information System (CIS) e-Folder for the student’s assigned Career Transition Specialist to access.

f. Ensure student has access to his/her final MyPACE Career Plan and PAR.
2.2 COMMUNITY LIVING (RESIDENTIAL)

REQUIREMENTS

R1. Student Self-Management Skills Development

Centers must develop systems that involve students in the management of their living areas, which must incorporate the following features:

a. Opportunities for all students to have input into the development of the center policies governing the management of their living areas

b. Procedures to solicit input and feedback from, and disseminate information to students

c. Student responsibility for maintaining cleanliness within their living areas

d. Progressive opportunities to learn, practice, demonstrate personal responsibility and self-management skills, and to complete career pathway planning activities and Pathway Achievement Records (PAR)

R2. Supervision of Student Living Areas

Centers must:

a. Provide staff supervision in all student living areas at levels that assure visibility, the safety, security, and accountability of all students at all times.

b. Develop a structured process for sharing information that ensures effective student accountability.

R3. Recreational Planning

Centers must:

a. Develop and maintain a calendar of recreational activities and events, and distribute the schedule to students in advance of the activities listed.

b. Involve students in selecting and planning recreational activities.

c. Conduct periodic surveys of student recreational interests and participation, and use the information gathered in planning recreational activities.

d. Coordinate with career technical, academic, counseling staff, and social development staff to ensure integration of student training, including completion of My Pathway to Achieving Career Excellence (MyPACE) PARs, with leisure time activities.
e. Consider cost effective options in planning off-center recreational activities.

R4. Recreational Activities

Centers must provide a wide variety of activities open to all students. Activities should reinforce and provide time to practice communication skills, to demonstrate positive attitudes and behaviors, and to work and participate in groups.

a. Activities must include but are not limited to:
   1. Group fitness classes
   2. Individual fitness activities
   3. Organized sports
   4. Exercise groups or clubs
   5. Group sessions with employers or career professionals
   6. Entrepreneurship classes
   7. Evening resume writing and interview techniques
   8. Volunteering, mentoring or tutoring

b. May include:
   1. Cultural events
   2. Dancing and theater
   3. Radio and/or television mockups
   4. Playwright, rap and poetry seminars
   5. Physical education and conditioning (yoga, spinning, etc.)
   6. Arts and crafts
   7. Reading and computer resource facilities
   8. Entrepreneurship classes
R5. Recreation Supervision

Centers must provide adequate staff supervision of events, activities, facilities, and equipment to ensure participant safety.

R6. Community Service Projects

Centers must provide opportunities for staff and students to participate in community service activities.

R7. Water Safety Training

Centers must:

a. Provide students with instruction in water safety as follows:
   1. All centers must provide a video-taped presentation on water safety.
   2. Centers sponsoring recreation trips that involve swimming, in-water activities, or access to pools/other bodies of water must provide water safety instruction and swimming proficiency tests for all students.
   3. Centers with pools or ready access to pools/other bodies of water must provide water safety instruction and swimming proficiency tests for all students.

b. Prohibit students from participating in swimming or other water-related activities until they have received water safety instruction and demonstrated swimming proficiency.

c. Ensure that all water-related activities are supervised by certified lifeguards.

d. Require the use of the buddy system in all swimming activities, and the use of personal flotation devices in all boating activities.

R8. Use of Movies

Centers showing movies of commercial motion pictures to students on center must be licensed to do so under an umbrella license through a national agreement between the National Office of Job Corps (NOJC) and the Motion Picture Licensing Corporation.

Centers will receive a list of movie titles directly from the vendor(s) each month indicating the movies covered under the agreement. Center Operators will assume liability for showing any movie(s) that do not appear on the list.

R9. Leisure Time Employment

a. Centers may authorize gainful leisure time employment of students so long as the
employment does not interfere with training activities.

b. Leisure time employment is not considered training or work-based learning. Accordingly, students are not considered federal employees for Federal Employees’ Compensation ACT (FECA) purposes while engaged in leisure time employment, except when the employment occurs on center.

**R10. Student Benefit Fund**

Centers must establish a student benefit fund to be managed by the Student Government Association (SGA) with the assistance of center staff. The purpose of the fund will be to provide the SGA with the ability to purchase items and services for the benefit of all students. The fund must have the following features:

a. Be self-supporting and must not include any appropriated Job Corps funds. Allowable sources of income include, but are not limited to, the following:

1. Operation of a store or canteen
2. Operation of other concessions, such as vending machines
3. Student fines
4. Student fund-raising activities

b. A staff member designated to assist the SGA officers in overseeing the operation of the fund.

c. May not be used to pay for goods or services that are normally part of center operating costs.

d. A simple accounting system for the student benefit fund and involve SGA officers in the management of the accounting system. The accounting system must include, at a minimum, the following:

1. A written accounting and audit plan
   
   The accounting plan must ensure the integrity of the fund by establishing an appropriate set of checks and balances, to include, at a minimum dual approval of all expenditures by the SGA president or designee and the center director or designee.

2. Separation of payment and collection duties

3. Maintenance of a bank account (checking or savings or both)
4. A written record of income and expenditures

5. Periodic financial reports

6. Annual audits by the center operator (corporate office or agency headquarters designee)

R11. Welcome Kit

Upon arrival, centers must provide each residential student with the following personal items at no cost to the student:

a. Towels and wash cloths
b. Laundry bag
c. Toiletries

R12. Laundry Services

Centers must provide adequate laundry facilities and supplies to residential students at no cost to the student, and training to students in the proper use of laundry equipment.

R13. Mail Services

Centers must establish a secure, confidential, and prompt system for the receipt and distribution of mail and packages through the U.S. Postal Service and commercial delivery services.

R14. Linen and Bedding

Centers must provide adequate linen and bedding for all residential students.

R15. Inventory

Centers must:

a. Conduct and record an inventory of clothing and other personal effects when a student enters the residential program, and update the inventory after each clothing issue or purchase.

b. Inventory and secure a student’s clothing and personal effects when the student is absent from the center without permission for more than 24 hours.
2.3 HEALTH SERVICES

REQUIREMENTS

R1. Student Introduction to Health Services

Centers must provide an overview of health services to new students by a member of the health services staff during the Career Preparation Period (CPP). This must include an explanation of procedures/tests that are performed as part of the medical and oral exam, information on Human Immunodeficiency Virus (HIV) and other sexually transmitted diseases, safe sex practices, family planning services, Trainee Employee Assistance Program (TEAP) services, mental health services, the importance of good health to obtain/maintain employment, and the notice describing how medical information about students may be used, disclosed, and how students can get access to this information.

R2. Health and Wellness Program (See Exhibit 2-4, Job Corps Basic Health-Care Responsibilities.)

Centers must provide basic medical services to students. The Health and Wellness Program must include the following components:

a. A cursory health evaluation, laboratory testing, and a medical history within 48 hours of arrival on center. The medical history must be documented on the Job Corps Health History Form. The cursory health evaluation and medical history must be conducted by a qualified health professional designated by the Center Physician.

b. A complete entrance physical examination and a review of the medical history within 14 days. The cursory evaluation, with the exception of the required entrance laboratory testing, may be omitted if the physical examination is conducted within 72 hours of a student’s arrival on center. The physical examination must be provided by a qualified health professional and documented on the Job Corps Physical Examination Form.

1. When indicated, the center must furnish one pair of glasses that meet American National Standards Institute (ANSI) standards.

2. Contact lenses must be provided if clinically indicated. Students who lose or damage glasses provided by Job Corps must replace them at their own expense.

3. Students identified as having chronic health problems during the cursory or entrance physical must be monitored as directed by the Center Physician or other appropriate center health-care provider.

---

1 For a description of basic services, refer to Exhibit 2-4 (Job Corps Basic Health Care Responsibilities).
2 Reinstated and transfer students are exempt from the cursory health evaluation/physical examinations.
3 Near and distant vision screening, color vision screening, and hearing screening shall be part of the entrance physical examination.
4 As determined by the center physician who authorizes the activity by a written personal authorization.
c. Laboratory tests within the time frames shown below:

<table>
<thead>
<tr>
<th>Entrance Laboratory Testing Requirements</th>
<th>Required Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Antibody Test</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>Syphilis Serology</td>
<td>Optional&lt;sup&gt;5&lt;/sup&gt;</td>
</tr>
<tr>
<td>Hemoglobin or Hematocrit</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>Sickle Cell Screening</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>(must be offered to all at-risk students)</td>
<td></td>
</tr>
<tr>
<td>Urinalysis (dipstick) for Glucose/Protein</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>Drug Screen (urine)</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>(Males Only)</td>
<td></td>
</tr>
<tr>
<td>Urinalysis (dipstick) for Leukocyte Esterase</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>(gonorrhea screen)</td>
<td></td>
</tr>
<tr>
<td>Chlamydia Testing (urine)</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>Gonorrhea Testing if Leukocyte Esterase Screen is Positive</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>(Females Only)</td>
<td></td>
</tr>
<tr>
<td>Pregnancy Test (urine)</td>
<td>Within 48 hours after arrival</td>
</tr>
<tr>
<td>Pap Smear</td>
<td>Females age ≥ 21 years (unless documented pap smear results within 24 months before arrival on center)</td>
</tr>
<tr>
<td></td>
<td>Within 14 days after arrival</td>
</tr>
<tr>
<td></td>
<td>Students younger than 21 years only require pelvic/speculum exam for clinical indications such as pelvic pain, vaginitis, menstrual disorders, pregnancy, etc.</td>
</tr>
<tr>
<td>Chlamydia Testing (endocervical or urine)</td>
<td>All females; perform on urine if age &lt; 21 years</td>
</tr>
<tr>
<td>Gonorrhea Testing (endocervical or urine)</td>
<td>All females; perform on urine if age &lt; 21 years</td>
</tr>
</tbody>
</table>

**Table Note:** Center physician may choose to continue screening for syphilis on entry if there is a significant prevalence in the center population.

d. Immunizations

All applicants are required to provide Admissions Counselors with current immunization records at the time of application. Records will be reviewed by center health staff on entry to determine currency of immunizations. Centers must immunize students for the following as directed by the Office of Job Corps:

1. Immunizations or boosters if the following immunization series are incomplete or if current immunization records cannot be produced:
   (a) Tetanus and diphtheria toxoid (Td) or Tetanus-diphtheria-acellular pertussis (Tdap)
   (b) Inactivated polio vaccine (IPV) for students younger than 18 years
   (c) Measles, mumps, and rubella vaccine
2. **Hepatitis B vaccine series**

   At a minimum, Hepatitis B vaccine must be provided to health personnel and health occupations training students. Vaccination consent/declination must be documented in the staff member’s personnel file or student health record. Vaccination of health occupations training students must begin six weeks prior to on-site clinical work experience.

   Refer to the Immunizations and Communicable Disease Control Technical Assistance Guide (TAG) for optional immunizations (e.g., influenza vaccine) that may be recommended but not required by the center physician, based upon availability.

   Centers should utilize the Vaccines for Children program to provide immunizations for eligible students according to the latest Centers for Disease Control and Prevention (CDC) guidelines.

**e.** A tuberculosis skin test (Mantoux) is required of all new students who do not have documented proof of a previous negative Mantoux test taken within the last 12 months. Annual tuberculin testing should be done for students in health occupations and for students at increased risk of infection. In addition, students in health occupations must receive a Mantoux test prior to clinical work experience in accordance with state or local health department requirements.

   Results of tuberculin skin testing should be interpreted without regard to a prior history of BCG vaccination.

   Refer to Treatment Guidelines in the Health-Care Guidelines TAG, for management of students with a positive Mantoux test.

**f.** A daily walk-in clinic outside of the training hours for students to receive routine health care.

**g.** An inpatient unit (during office hours) for minor conditions, such as respiratory infections or flu symptoms.

**h.** An appointment system for follow-up during the training day for treatment of chronic, urgent, and other conditions within the capabilities of center health professionals. Treatment guidelines for health must be used to manage common acute and chronic conditions.

**i.** Access to prescription medications.

**j.** An off-center specialist referral system.
k. A 24-hour emergency-care system, to include on-center Cardio Pulmonary Resuscitation (CPR) and first aid and written referral plan or agreement for off-center medical, oral health, mental health, substance use, and inpatient care.

l. Explain and have the student sign, on the first visit to health services, the notice describing how medical information about students may be used and disclosed, and how students can get access to this information (see Form 2-01, Notice of Medical Information Use, Disclosure, and Access).

R3. **Oral Health and Wellness Program (See Exhibit 2-4, Job Corps Basic Health Care Responsibilities.)**

Centers must provide basic dental services, as described below:

a. The general emphasis of the Oral Health and Wellness Program must be on early detection, diagnosis of oral health problems, basic oral-health care, dental hygiene, and prevention/education (e.g., oral hygiene instructions, caries risk assessments, the relationship between oral health and employability, oral health and wellness plans).

b. A dental readiness inspection must be completed within 14 days after arrival by the center dentist or designee as determined by the center dentist who authorizes the activity by a written personal authorization. The dental readiness inspection must be documented in the appropriate section on the Job Corps Physical Examination Form.

c. An elective oral examination, including bitewing X-rays, priority classification, and treatment plan, must be completed and recorded on the Job Corps approved oral examination form by the center dentist upon student request as a follow up to the dental readiness inspection. The X-ray images should be securely stored as part of the student’s health record.

d. Dental procedures to treat oral disease and correct oral health conditions that may represent employability barriers, to include: restorations, extraction of pathological teeth, root canal therapy on anterior/other strategic teeth, replacement of missing upper anterior teeth with a removable prosthesis, and dental hygiene treatment for periodontal disease.

e. Written referral plan or agreement with community facilities for emergent or urgent conditions treatable beyond the expertise of a general dentist.

f. Job Corps shall not pay for student orthodontics. Applicants with orthodontic appliances must furnish:

1. Proof of orthodontic care visits during previous three months consistent with orthodontic treatment plan.

2. Proof that a treatment plan is in place for continued care.
3. A signed agreement that the cost of continued treatment and transportation related to treatment will be borne by the student, parent, or legal guardian.

4. A signed agreement by the applicant (parent/guardian of a minor) that he or she will remain compliant with orthodontic care and schedule all orthodontic appointments such that he or she will not exceed authorized leave limits for elective dental treatment.

**R4. Mental-Health and Wellness Program (See Exhibit 2-4, Job Corps Basic Health-Care Responsibilities.)**

Centers must provide basic mental-health services as described below:

a. The general emphasis of the Mental-Health and Wellness Program must be on the early identification and diagnosis of mental-health problems, basic mental-health care, and mental-health promotion, prevention, and education designed to help students overcome barriers to employability. The program uses an employee assistance program approach that includes short-term counseling with an employability focus, referral to center support groups, and crisis intervention.

b. Assessment and possible diagnosis, to include:

1. Assessments and recommendations for Job Corps applicants;

2. Review of Social Intake Form (SIF) or intake assessment performed by counseling staff of students who indicate mental-health history, current mental-health problems, or who request to see the Center Mental-Health Consultant within one week of arrival;

3. Mental-health assessments and recommendations for referred students. Students who are assessed as a safety risk to self or others must be continuously supervised, until their case is resolved. Disposition should occur as soon as possible;

4. Determination when a Medical Separation with Reinstatement Rights (MSWR) or medical separation is appropriate and recommended for students with mental health conditions and/or substance use co-occurring conditions.

c. Mental health promotion and education, to include:

1. Minimum of a one-hour presentation on mental-health promotion for all new students during the Career Preparation Period with an emphasis on employability:
   (a) Presentations must explain the Mental-Health and Wellness Program, what services are available, and how to make a self-referral.
   (b) Students will learn basic skills in identifying and responding to a mental health crisis.
2. At least one annual center-wide mental-health promotion and education activity

3. Clinical consultation with Center Director, management staff, and Health and Wellness Director regarding mental health-related promotion and education efforts for students and staff

4. Coordination with other departments/programs on center, including, but not limited, to residential, recreation, student government association, and Healthy Eating and Active Lifestyles (HEALS), to develop integrated promotion and education services

d. Treatment, to include:

1. Short-term counseling with mental-health checks as needed. The focus of these sessions should be on retention and behaviors that represent employability barriers;

2. Collaboration with TEAP specialist for short-term counseling of students with co-occurring conditions of mental-health issues and substance use;

3. Collaboration with center physician and Health-and-Wellness staff on psychotropic medication monitoring of stable students, with the advice of consulting psychiatrist, if appropriate;

4. Collaboration with counseling staff in developing and/or leading psycho-educational skill-building groups to promote wellness (e.g., relaxation training, anger management, mood regulation, assertiveness skills, handling relationships, sleep hygiene, etc.);

5. Information exchange through regular case conferences between the Center Mental Health Consultant, counselors, and other appropriate staff based on individual student needs;

6. Crisis intervention, as needed. In the event of a mental health emergency, the Center Mental-Health Consultant or the Center Physician must conduct a mental health evaluation as soon as possible, and when necessary, refer the student for psychiatric care. If the Center Physician or Center Mental-Health Consultant is not available, the student must be referred immediately to the emergency room of the nearest medical facility. If there is a life-threatening situation, 911 or the emergency response team should be called;

7. Referral to off-center mental-health professionals or agencies for ongoing treatment and/or specialized services;

8. A written referral/feedback system must be established and documented in the student-health record.
R5. **Trainee Employee Assistance Program (TEAP)** *(See Exhibit 2-4, Job Corps Basic Health-Care Responsibilities.)*

Centers must provide basic TEAP services, as described below:

a. The general emphasis of TEAP must be on prevention, education, identification of substance use problems, relapse prevention, and helping students overcome barriers to employability.

b. Substance use prevention and education, to include:

1. Minimum of a one-hour presentation on substance use prevention for all new students during the Career Preparation Period. This presentation must explain (1) TEAP prevention, education, and intervention services, (2) Job Corps drug and alcohol testing requirements and procedures, and (3) the consequences of testing positive for drug or alcohol use while in Job Corps

2. Presentation(s) on managing substance misuse, abuse, and dependency symptoms and issues in the workplace for students during the Career Development and Transition Periods

3. At least three annual center-wide substance use prevention and education activities

4. Clinical consultation with Center Director, management staff, Center Mental Health Consultant, and Health and Wellness Director regarding substance use prevention and education efforts for students and staff

5. Coordination with other departments/programs on center, to include, but not be limited to, residential, recreation, student government association, and HEALs, to develop integrated prevention and education services

c. Assessment for identification of students at risk for substance use problems to include:

1. Review of Social Intake Form (SIF) or intake assessment of all students performed by counseling staff within one week of arrival

2. Formalized assessment measures (e.g., SASSI3 or SASSIA2), and clinical judgment to determine students’ level of risk for substance use

3. Collaboration with the Center Mental-Health Consultant to determine when a MSWR or medical separation is appropriate and should be recommended for a student with substance use conditions (see Chapter 2, Section 2.3, R5, e.5)

d. Intervention services for students identified at an elevated risk for substance use, to include:
1. Individual and group intervention services with a focus on behaviors that represent employability barriers

2. Collaboration with the Center Mental-Health Consultant for students with co-occurring conditions of mental health issues and substance use

3. Referral to off-center substance abuse professionals or agencies for ongoing treatment and/or specialized services. Any student separating from Job Corps who has a substance use condition must be provided with a referral for support services in his or her home community

e. Drug and alcohol testing

1. Drug testing procedures:
   (a) Students in the following categories must be tested for drug use:
      (1) New and readmitted students must be tested within 48 hours of arrival on center.
      (2) Students who tested positive on entrance must be retested between the 37th and 40th day after arrival on center.
      (3) Students who are reasonably suspected of using drugs at any point after arrival on center must be tested; this testing must take place as soon as possible after staff suspects use.
      (4) During a qualified emergency as defined in Section 3502(a)(4) of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), Pub. L. 116-136, the procedures in R5.e.1(a)(1)-(3) are not applicable to students participating in distance learning off-center until they begin or resume on-site participation at a Job Corps center.
   (b) Biochemical testing is never permissible on a random basis, with the exception of designated licensed student drivers who are subject to 49 CFR Part 382 DOT Federal Motor Carriers Safety Administration. In addition, biochemical testing requested by work experience sites, union trades, or potential employers may only be performed by the requesting entity.
   (c) If a student refuses to provide a specimen or has an unexcused absence from his or her follow-up drug test, he or she shall be presumed guilty of the Level I infraction Drugs: Use of drugs as evidenced by a positive drug test. Students who state they are unable to produce a specimen must be referred to the center physician or designee for follow up.
   (d) Collection of urine for drug testing must be in accord with chain-of-custody principles and conducted by health and wellness staff or a staff member trained

---

6 Reasonable suspicion is context specific, supported by specific and articulable facts, and may include (1) direct observation of drug use or behavioral signs or symptoms suggestive of drug use, or (2) specific reliable information that a student recently used drugs.
in urine collection procedures.

(e) The Job Corps nationally contracted laboratory must be used for all required drug testing. On-center urine drug testing is prohibited.

(f) Reinstated students cannot be subject to entry drug testing upon return to the center. Transfer students cannot be subject to drug testing upon arrival at receiving center. Both reinstated and transfer students shall be subject to testing for drugs upon suspicion of use only.

2. Alcohol testing procedures:
   (a) Students who are reasonably suspected\(^7\) of being intoxicated or consuming alcohol on center or under center supervision must be tested; this testing must take place immediately after staff suspects use.

   (b) Centers must use devices that measure alcohol in the breath or saliva (e.g., breathalyzers or alcohol test strips/tubes/swabs). Alcohol testing must only be administered by a staff member trained in the use of these testing devices. All testing must be documented and the results submitted to the health and wellness center.

   (c) If a student refuses to submit to a breathalyzer or provide a sample for alcohol testing, the student shall be presumed guilty of the Level I infraction Alcohol: Possession, consumption, or distribution while on center or under center supervision.

3. Students testing positive for drug or alcohol use:
   (a) New students and readmitted students not previously separated for drug use Zero Tolerance (ZT separation code 5.2a); possession, use or distribution of drugs on center or under center supervision (ZT separation code 5.2b); possession, consumption, or distribution of alcohol while on center or under center supervision (ZT separation code 5.1b); or abuse of alcohol (ZT separation code 5.1b) who test positive on entry must receive intervention services and a follow-up drug test. The results of the follow-up drug test must be received on center prior to the end of the intervention period.

      To remain in the program, students who test positive on entry must have a negative drug-test result at the end of the intervention period.

      If an intervention period takes place during a center vacation period (i.e., winter break), the intervention period is suspended and resumes the day the student is scheduled to return to the center (e.g., if a student is on day #30 of his or her intervention period at the time of the center vacation, the day count will be

---

\(^7\) Reasonable suspicion is context specific, supported by specific and articulable facts, and may include (1) direct observation of alcohol use or behavioral signs or symptoms suggestive of alcohol use, or (2) specific reliable information that a student recently used alcohol.
suspended at 30 days, and resume as day #31 the day, he or she is due back on center). If a student does not report to the center on the day he or she is expected to return, the intervention period still resumes and the student is labeled an Unauthorized Absence.

If an intervention period takes place during off-center distance learning due to a qualifying emergency under the CARES Act, the intervention period restarts the day the student returns to the center to resume on-site participation.

Students who are an Unauthorized Absence on the day of their scheduled follow-up drug test shall be presumed guilty of the Level I infraction *Drugs: Use of drugs as evidenced by a positive drug test.*

(b) Readmitted students previously separated for drug use (ZT separation code 05.2a) that test positive on entry or any time during their second enrollment at Job Corps must be separated immediately without an intervention period. Such students shall not be allowed to reapply to Job Corps.

(c) Students who test positive for drug use by an off-center facility must be retested on center using the Job Corps nationally contracted laboratory as soon as possible, to include:

1. Work-based learning students who tested positive on a drug test administered by experience sites, union trades, or potential employers;
2. Students who tested positive on a drug test administered at a referral health facility (e.g., hospital emergency department, urgent care facility).

This retest by the Job Corps nationally contracted laboratory must be classified as a suspicion-of-drug-use test. For students who test positive for drug use on this retest, centers must follow the same procedures outlined in (c) above.

(d) Student drivers who test positive for drug use under 49 CFR Part 382 DOT Federal Motor Carriers Safety Administration must follow the same procedures outlined in (c) above for positive suspicion tests. In addition, during the intervention period, student drivers who fall under DOT regulations are not permitted to drive.

(e) Students who test positive for alcohol use on suspicion must be referred to the TEAP specialist for assistance and the center’s student conduct system for disciplinary action.

4. Student notification of drug or alcohol test results
   (a) Students who test positive for drug use must be informed of their results by the TEAP specialist, Center Physician, or designee within 24 hours of receipt of positive result, or as soon as possible, given staff and student availability. Minor student’s parent/guardian must be notified of positive test results as
required by applicable state laws for the state in which the center is located.

(b) Alcohol test results must be provided to the student by the person administering the test.

(c) Drug and alcohol test results must be shared only with center personnel who have a need to know for purposes of discipline, counseling, administration, and delivery of services (in accordance with 42 CFR, Part 2).

(d) If a student questions the validity of a confirmed positive drug test, he or she must be referred to the Center Physician or designee for counseling.

5. Medical Separations with Reinstatement Rights (MSWR) for substance use conditions:
   (a) Students may be given a MSWR for a diagnosed substance use condition, allowing the student to return to Job Corps to complete his or her training within 180 days. To return to Job Corps, proof of treatment completion from a qualified provider must be received.

   (b) A MSWR for substance use conditions can only be given if the following conditions are met:
       (1) The TEAP specialist and Center Director agree that the student has a diagnosed substance use condition.
       (2) There is a documented assessment of the student’s diagnosed substance use condition by the TEAP specialist in collaboration with the center mental health consultant.

   (c) A MSWR cannot be granted in lieu of ZT separation when a positive follow-up test is reported during the intervention period.

   (d) If a student is placed on a MSWR during the intervention period, the intervention period is suspended and resumes the day the student is scheduled to return to the center.

R6. Tobacco Use Prevention Program (TUPP)

   Implement a program to prevent the onset of tobacco use and to promote tobacco-free environments and individuals. To support this program, a TUPP Coordinator must be appointed (he or she need not be a health services staff member). At a minimum, this program must include:

   a. Educational materials and activities that support delay and/or cessation of tobacco use

   b. A smoke-free, tobacco-free environment that prohibits the use of all tobacco products in center buildings and center-operated vehicles
c. Designated outdoor smoking areas located a minimum of 25 feet, or as required by state law, away from the building entrance

d. Prohibition of the sale of tobacco products on center

e. Adherence to federal and state laws regarding the use of tobacco products by minors

f. Minors who use tobacco products must be referred to the TUPP

g. All services provided should be documented in the student health record

**R7. Family Planning Program**

a. A family planning program must be provided to all students on a voluntary basis. At a minimum, this program must include counseling, health promotion activities, and medical services, including birth control. The Center Director must appoint a staff member to implement and monitor this program.

b. Students who are pregnant and/or experiencing pregnancy-related medical conditions must be afforded the same access to medical services, leave and medical separation as any other student experiencing a medical condition, unless otherwise provided by law.

c. Once a center learns that a student is pregnant, pregnancy-related services must include:

1. Prenatal services on center and/or in the community until separation, to include a comprehensive gestational record.

2. The Center Physician, in conjunction with an obstetrical/gynecological provider and the student, will agree upon a care-management and separation plan that takes into account the health and safety of the pregnant student before and after childbirth.

3. The center must identify available community health/social resources and services, and will make arrangements for transportation for the purpose of obtaining such resources and services consistent with Chapter 6, Section 6.7, R9.d. In lieu of the center providing transportation, the center may approve a student’s request to be transported by a friend, partner or family member.

4. The center cannot pay for an abortion unless the pregnancy is the result of rape or incest or unless a physician has certified that the student suffers from a physical disorder, injury, illness, or condition that places her in danger of death unless an abortion is performed.\(^8\)

---

\(^8\) The Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act of 2014, Title 5, Sec. 507(a) (P.L. 113-76) provides that the prohibition on the use of Federal funds for abortions described in Section 506 “shall not apply to an abortion (1) if the pregnancy is the result of an act of rape or incest; or (2) in the case where a woman suffers from a physical disorder, physical injury, or physical illness, including a life-endangering physical condition caused by or arising from the pregnancy itself, that would, as certified by a physician, place the woman in danger of death unless an abortion is performed.”
5. A student that is experiencing a pregnancy-related medical condition may be placed on paid administrative leave in accordance with Exhibit 6-1 (see Pay status: Paid, Duty status: Not Present for Duty-Administrative Leave with Pay).

d. Pregnancy-related services must include information on the options of continuing or terminating the pregnancy.

e. If required by applicable state laws in which the center is located, the center must notify the student’s parent/guardian of her pregnancy if she is a minor, and if required by applicable state law, inform the student of this requirement prior to the disclosure.

R8. HIV/AIDS

Centers must:

a. Test students for HIV infection under the following circumstances:

1. As part of the cursory medical examination (see Chapter 2, Section 2.3, R2.c)

2. If a student exhibits signs and/or symptoms of a possible AIDS-related condition

3. Upon reasonable suspicion of student exposure to HIV

4. When student is diagnosed with a newly contracted sexually transmitted disease

5. Upon student request and after physician consultation

b. Submit specimens for HIV testing to the nationally contracted laboratory. Centers shall not be reimbursed for HIV tests performed at other than the nationally contracted lab.

c. Provide pre-test counseling, in accordance with state laws, to all students regarding the HIV test.

1. Counsel each student about the test and its implications and document in the health record that the student received the HIV pre-test counseling and signed the “HIV Testing Information Sheet” in Form 2-02

2. Student refusal (see Chapter 2, Section 2.3, R15)

3. Testing waiver (see Chapter 2, Section 2.3, R15, Waiver of Medical Care)

d. Provide post-test counseling, in accordance with state laws, to all students regarding HIV test results:

1. **HIV Negative Students:** Individually inform and counsel (e.g., measures to
prevent HIV infection/transmission) all students with a negative HIV test result within 14 calendar days after receipt of test results.

2. **HIV Indeterminate Students:** Individually inform and counsel all students with an indeterminate HIV test result within five calendar days after receipt of test results. A student who has an indeterminate test result must be retested at three-month intervals until a conclusive test result (i.e., negative or positive) is obtained. If a conclusive result is not obtained within 6 months, no further testing is required.

3. **HIV Positive Students:**
   (a) **Inform and Counsel:** Individually inform and counsel all students with a positive HIV test result, preferably within 24 hours, but not later than 5 calendar days, after receipt of the written positive result. The Center Mental Health Consultant must be in attendance to assist in informing and counseling.

   (b) **Contact Notification:** HIV positive students must be instructed in how to notify their sexual contacts and intravenous drug contacts that they may have been exposed to HIV infection and to refer them for counseling and testing.

   The Center Physician or designee must report the student’s HIV infection to the state and/or local health department, which will be responsible for contact notification both on- and off-center.

4. **Students Off-Center:** If a student is not on-center (e.g., Unauthorized Absence, Missing Minor Student, on leave) when his or her positive or indeterminate test result is received by the center, the Center Director or designee must make every attempt to contact and inform the student of his or her result. The health department at the student’s location must be used to assist with the task of informing students who are no longer on-center.

5. Document post-test informing and counseling activities in the student’s health record, including attempts to contact students not on-center (d.4 above).

e. Ensure that students who test positive for HIV infection are engaged in an interactive process to determine if an accommodation plan is needed (see center reasonable accommodation policy/process or national reasonable accommodation guidelines for specific requirements of accommodation process).

f. Ensure that students who test positive for HIV infection are engaged in case management for chronic illness on center.

g. Provide all students with information on HIV infection; including transmission and prevention (see Chapter 3, Section 3.4, R21, and Chapter 2, Section 2.3, R1).
R9. Healthy Eating and Active Lifestyles

Centers must provide students with an environment that supports healthy eating and active lifestyles, and provide students with education and experiences that promote lifelong health and physical well-being. At a minimum, this program must include the following components:

a. Planning

1. Establish a Healthy Eating and Active Lifestyles Committee to oversee and coordinate this program. At a minimum, this committee must include the Health and Wellness Director, Food Services Manager/Supervisor, Recreation Supervisor or Specialist, TEAP Specialist, Residential Manager/Counseling Manager, and student representative.

2. Incorporate student interests and preferences when planning activities.

3. Demonstrate collaboration between various departments on center.

b. Environment

1. Provide a variety of fitness activities open to all students, as outlined in Chapter 2, Section 2.2, R4.

2. Provide healthy eating selections and limit non-nutritious eating selections, as outlined in Chapter 5, Section 5.10, R3.

c. Education and counseling

1. Provide educational activities and materials to all students that support regular physical activity, nutrition, and achieving a healthy weight, as outlined in Chapter 3, Section 3.4, R21.

2. Provide individualized weight management programming and/or counseling. Student participation in this program is highly recommended.

3. Incorporate motivational interviewing and goal setting at student’s level of readiness for change.

d. Assessment

1. Document, monitor, and assess program.

R10. Health Aspects of Sports

a. All students participating in organized contact or rigorous sports (e.g., football,
basketball, boxing, and running) must be medically cleared by a health professional prior to participating. Physical examinations performed by center health personnel within one year of the organized sports activity can fulfill this requirement, at the discretion of the Center Physician. After one year, a current physical examination is required.

b. A staff member trained in CPR/First Aid, with specific authorization in the center’s standing orders, must be present at all organized contact or rigorous sports activities, including practice sessions and sports events.

c. At a minimum, staff certified in CPR/First Aid must be present at all student boxing events and contact football games.

d. In case of possible emergency, adequate transportation must be on the scene of all center-sponsored organized sports.

**R11. Basic Health Services Provided by Job Corps Centers**

a. Center operators are responsible for providing and paying for basic health care as detailed in Exhibit 2-4 (Job Corps Basic Health Care Responsibilities).

b. Job Corps shall not pay for any health-related costs incurred by a student while on leave or pass unless previously authorized by the Center Director upon recommendation of a center health professional.

**R12. Health and Medical Costs Exceeding Basic Health Services Provided by Job Corps Centers**

a. Centers should assist students in seeking third-party health insurance coverage that will be available should the student have medical needs or costs beyond the basic health services provided by the center.

b. If a student is determined to have a pre-existing or acquired health condition that significantly interferes with or precludes further training in Job Corps, or if a student is determined to have a health problem that is complicated to manage or for which necessary treatment will be unusually costly, the center must follow medical separation procedures (Chapter 6, Chapter 6, Section 6.2, R5, and Chapter 6, Section 6.2, R4.c.5) and determine whether referral to the Office of Workers’ Compensation Programs (OWCP) is required (Chapter 5, Section 5.1, R40).

**R13. Professional Standards of Care**

All center health staff and providers must follow accepted professional standards of care and are subject to prevailing state laws, including but not limited to:

a. Maintaining a copy of current provider’s license, Drug Enforcement Agency (DEA)
registration, and proof of liability insurance, if applicable, in center health facility.

b. Documenting all prescribed medications and treatment in student health record.

c. Documenting all laboratory procedures ordered and recording the results in student health record.

d. Following current standards of care when providing health services and treating illnesses and injuries.

**R14. Medication Management (See Appendix 203, Medication Management Guidelines.)**

a. Centers must comply with all state and federal regulations regarding prescribed non-controlled medications, prescribed controlled substances, and over-the-counter medications.

b. Centers must follow medication management guidelines as specified in Appendix 203.

**R15. Waiver of Medical Care**

a. The Center Physician/Nurse Practitioner (NP)/Physician Assistant (PA) may waive any portion of the medical examination and laboratory testing except for the entrance drug testing if in his or her opinion there is sufficient justification or if a student refuses. Such a waiver must be clearly documented by the Center Physician/NP/PA in the student’s health record and include an explanation as to why the decision was made.

b. The Center Physician/NP/PA may grant waivers of immunization requirements for valid medical and/or religious reasons. Such a waiver must be clearly documented by the center physician in the student’s health record and include an explanation as to why the decision was made.

**R16. Health Care Guidelines**

a. All health-care guidelines must be approved and signed annually by the Center Physician, Center Mental Health Consultant, or Center Dentist, as appropriate.

b. Current signed and dated health care guidelines must be kept in the Health and Wellness Center.

c. Annually, each center must submit a memorandum to the Regional Office indicating which health care guidelines have been modified. Copies of any individual health staff authorizations and health care guidelines that have changed must be sent to the Regional Office for approval. (Refer to Exhibit 5-2, Plan and Report Submission Requirements, for reporting deadlines.)
R17. **Communicable Disease and Infection Control**

The center must:

a. Report cases of disease to state and local health departments in accordance with state and local laws.

b. Manage all cases of communicable disease and use protective measures as recommended by the Centers for Disease Control and Prevention (CDC).

c. Biologically monitor the function of autoclaves and maintain a log of spore test results.

d. Follow infection control measures as mandated by state and federal law.

R18. **Inventory Records**

Maintain records on the dispensing, inventory, and disposal of medical and dental supplies and pharmaceuticals.

R19. **Continuous Quality Improvement**

Center health staff must seek feedback from students, employ mechanisms to document quality of care provided, and document quality improvement activities.
2.4 DISABILITIES

REQUIREMENTS

**R1. Disability Coordinators**

a. The Health and Wellness Director (or a health staff designee) and Academic Manager (or an academic staff designee) will function as Disability Coordinators (DC) to oversee the program. Additional DCs may be appointed. Centers may choose to hire a full or part time DC to oversee the program rather than or in addition to appointing an academic and health DC.

b. The roles and responsibilities of each DC will be defined in a standard operating procedure (SOP).

**R2. Disability Accommodations**

a. Accommodations for Applicants and Students With Disabilities

All applicants and students with disabilities must be provided the opportunity to request and receive reasonable accommodation in accordance with Section 188 of the Workforce Innovation and Opportunity Act of 2014 [https://www.congress.gov/113/bills/hr803/BILLS-113hr803enr.pdf](https://www.congress.gov/113/bills/hr803/BILLS-113hr803enr.pdf), Section 504 of the Rehabilitation Act of 1973 [https://www2.ed.gov/policy/speced/laws/rehab/rehabilitation-act-of-1973-amended-by-wioa.pdf](https://www2.ed.gov/policy/speced/laws/rehab/rehabilitation-act-of-1973-amended-by-wioa.pdf), and their implementing regulations. Guidelines for providing reasonable accommodation are outlined in Form 2-03, Definitions and Documentation Requirements Related to Reasonable Accommodations for Applicants and Students with Disabilities, and on the Job Corps Disability website.

b. Definition of Disability

For accommodation purposes, a disability is defined as a physical or mental impairment that substantially limits one or more of a person’s major life activities.\(^9\) Form 2-03 contains information explaining this definition, and related requirements, in detail. Whether a particular person has an impairment that satisfies this definition, and whether a specific accommodation is appropriate for a particular person, must be determined on a case-by-case basis by someone with appropriate expertise in the field.

**R3. Reasonable Accommodation Process**

a. An applicant or student with a disability may request and receive reasonable accommodation to participate in the Job Corps program at any time during the

---

\(^9\) Applicants and students who have a record of a disability, or who are regarded as having a disability, are protected from discrimination by federal disability nondiscrimination laws. However, the laws do not entitle these people to the positive actions, such as reasonable accommodations, that must be provided to applicants and students with current disabilities.
admissions process or enrollment. Each center will have a process for ensuring applicants/students with disabilities who request accommodation, indicate they may need accommodation, and/or provide documentation of a disability are engaged in an interactive process to consider/determine the functional limitations resulting from their disability and the potential accommodations that would allow them to participate in the Job Corps program. An SOP describing this process is required (see Exhibit 5-1) and the center’s reasonable accommodation process will include all the components outlined in Form 2-03.

b. The DCs will coordinate the center’s reasonable accommodation process.

c. During Career Transition Readiness all students will receive information about workers’ rights and responsibilities including reasonable accommodation in the workplace (see Chapter 3, Section 3.4, R23, k).

R4. CIS Disability Data Collection and Accommodation Plans

a. A DC will accurately enter the required data in the disability data collection and accommodation plan icons in CIS as soon as possible after the student enters the program.

b. For students who require TABE testing accommodations, this data will be entered prior to the administration of the first TABE test.

c. Only the DCs will have access to the disability data collection entry screen, disability data report and the accommodation plan report with notes report in CIS.

d. Generally, only the DCs will have access to the accommodation plan entry screen; however, if a designee is appointed to enter accommodation plans, this staff person can have access.

e. All center staff responsible for providing accommodations will have access to the accommodation plan report in CIS.

f. Accommodation plans will not contain any medical or diagnostic information.

R5. Referral Process

a. A written referral/feedback system must be established to document a referral to the DCs when a student discloses a disability and may want reasonable accommodation or staff suspects a student may have a disability that is impacting his/her success in the program and should meet with the DCs to consider reasonable accommodation.

b. All referral forms will be stored in the student’s accommodation file or in the student health record if no accommodation file exists.
2.5 STUDENT CONDUCT

R1. Incentives

Centers must develop processes to recognize students for positive behavior and performance, including rewards and what students must do to earn them.

R2. Rules and Sanctions

Centers must:

a. Develop standards of conduct, including rules and sanctions. Conduct standards must:

1. Parallel workplace expectations to the extent possible.

2. Include, at a minimum, those infractions and corresponding actions in Job Corps’ Zero Tolerance Policy, as detailed in Exhibit 2-1 (Infraction Levels, Definitions, and Appropriate Center Actions).

b. Implement progressive disciplinary measures for behaviors identified as Minor Infractions, as defined in Exhibit 2-3 (Menu of Progressive Discipline Interventions and Sanctions for Minor Infractions).

c. Prohibit the use of the following sanctions:

1. Corporal punishment and measures designed to humiliate or degrade the student

2. Physical force or solitary isolation (Physical restraint may be used only to the minimum extent necessary and only in situations that seriously threaten persons or property.)

3. Dorm cleanup, kitchen duty, or other regular housekeeping chores used as a punishment

4. Suspension of privileges for the dining hall, canteen, voting, religious services, or pay and allowances

5. Restrictions to center in excess of 30 days

6. Fines in excess of $5 per offense or per pay period

7. Restitution in excess of $500 per enrollment

8. Forced resignation from the program
R3. Investigation and Disposition of Incidents

a. Centers must conduct investigations and Fact-Finding Boards (FFB) as follows:

1. Convene Fact-Finding Boards in accordance with the requirements in Exhibit 2-2 (Requirements for the Conduct of Fact-Finding Boards).

2. Provide Fact-Finding Boards with a written investigative report of the incident under consideration. Boards may only consider evidence relevant to the infraction.

3. Recommend appropriate sanctions in keeping with the level of infraction as shown in Exhibit 2-1 (Infraction Levels, Definitions, and Appropriate Center Actions).

4. Report the outcomes of Fact-Finding Boards on the “Summary of Review Board Hearing” form and document the date and disposition of the Fact-Finding Board in Center Information System (CIS) within 48 hours of its completion.

b. The National Director may suspend the timeframes for the Fact-Finding Board to issue its decision, if the student subject to the Fact-Finding Board is also the subject of an active police investigation.

R4. Appeal Process

Centers must develop a process for the appeal of disciplinary decisions, consistent with Exhibit 2-2. The appeal process must, have the following features at a minimum:

a. Students must be allowed to appeal disciplinary decisions from lower organizational levels to higher ones.

b. Students must be notified in writing of their right to appeal a decision of the Center Director, resulting in dismissal from the program, to the Regional Appeals Board (RAB). Student appeals must be made within 30 calendar days of their separation.

R5. Regional Appeals Board

In an effort to ensure due process, each Regional Office will establish a Regional Appeals Board (RAB) to review student appeals of disciplinary discharge from the Job Corps program. The RAB must operate as follows:

a. The Regional Director will determine the composition of the RAB.

b. In reviewing cases, the RAB must utilize only written documentation to include, at a minimum, the student’s appeal letter intended to preserve the student’s due process, and the record of the student’s hearing at the center. The RAB will not hear oral testimony from interested parties.
c. The RAB must rule on student appeals within 30 calendar days of the receipt of the student’s appeal letter.

d. In making a decision, the options open to the RAB are to:
   1. Affirm the Center Director’s decision to discharge the student.
   2. Overturn the Center Director’s decision to discharge the student.
   3. Recode the separation (for zero tolerance offenses).
   4. Remand the case to the center for rehearing.
   5. Request additional information from the center and delay the RAB meeting to a later date. Notify the center and student if the decision will be extended beyond the 30 calendar days for appeal resolution.

e. If the RAB determines that all three of the following conditions are met, the RAB must affirm the disciplinary discharge of the student.
   1. There is substantial evidence to support the alleged facts of the case.
   2. The procedural requirements of the law and Job Corps policies were adequately met.
   3. The facts of the case constitute an offense for which disciplinary discharge is permitted.

f. If the RAB determines from the record that either of the following conditions pertain, the RAB must reverse the disciplinary discharge.
   1. The evidence provided does not support the facts alleged.
   2. The facts are supported by the evidence presented, but these facts do not constitute an offense for which disciplinary discharge is permitted.

g. If the RAB determines that substantial procedural requirements were not met, the RAB may take either of the following actions.
   1. It may reverse the Center Director’s decision to discharge.
   2. It may remand the case to the center for rehearing.

h. If the RAB determines that there is not enough information in the record to make a determination, the RAB may delay the RAB meeting to another date and request additional written information from the center, the student, or any other source. The
RAB must provide all interested parties an opportunity to respond to the additional information before the RAB makes its final decision. The RAB must notify the center and student if the delay will extend beyond the 30 calendar day resolution period.

i. If the RAB overturns the decision of a Center Director to discharge a student from the program, the Regional Office must reestablish the student as follows:

1. If the student is allowed to resume training at the same center, the center must reestablish the student in the Center Information System (CIS) and arrange for the student’s immediate return to the center.

2. If the student is transferred to another center, the sending center must take the following actions:
   
   (a) Re-establish the student in CIS
   
   (b) Initiate the transfer in CIS
   
   (c) Provide the student with transportation and an itinerary to the receiving center
   
   (d) Provide a complete copy of the student’s personnel record (including medical records) to the receiving center

j. Manage an automatic appeal of felonies/misdemeanors (dropped charges/not guilty) as follows:

1. If the student is found not guilty, or if the charges are dropped, the center will forward the case to the RAB for disposition.

2. The RAB will decide if the student should be:
   
   (a) Re-established at the same center
   
   (b) Re-established and transferred to another center
   
   (c) Re-entered into CIS with a different code

3. The center must complete appropriate CIS entries as advised by the RAB.

k. Regional Offices must maintain a log of all cases reviewed by the RAB and the disposition of the cases.

l. RAB decisions must be communicated in writing to the student and the center.

m. RAB decisions are final and represent the official decision of the Secretary of Labor.
R6. Bullying and Sexual Harassment Training

Centers must provide students regular proactive education on bullying, sexual harassment, appropriate behavior, appropriate staff/student boundaries, and consequences.
2.6 EVALUATION OF STUDENT PROGRESS

REQUIREMENTS

R1. Evaluation of Student Progress

Centers must:

a. Inform all new students that they will be formally evaluated at least every 60 days on their knowledge of and ability to demonstrate all eight Career Success Standards.

b. Ensure that each student participates in ongoing evaluations, with appropriate staff, at least every 60 days.

c. Arrange for each student’s interdepartmental Career Management Team (CMT) to conduct a formal evaluation prior to the student’s entry into the Career Development Period (CDP) and the Career Transition Period (CTP), at a minimum.

d. Schedule special evaluations as needed, at any time during a student’s enrollment.

R2. Content of Evaluations

Centers must:

a. Assess each student’s progress in all major career development areas: academics, career technical training, industry certification attainment, work-based learning, career pathway preparation, social development, and recreation using the Evaluation module in CIS, including documentation of student progress in the My Pathway to Achieving Career Excellence (MyPACE) Career Plan and Pathway Achievement Record (PAR) tasks.

b. Evaluate student performance on all eight Career Success Standards as well as any additional expectations the center wishes to evaluate.

c. Provide each student with a schedule of individualized projects and activities to assist him or her in meeting the Career Success Standards in which a “Needs Improvement” rating is received.

d. Collaborate with students in setting, affirming, and/or revising short-term, mid-term, and long-term personal, training, and career goals using the student’s MyPACE Career Plan and Pathway Achievement Record (PAR):

   1. Review the student’s mid-term career (placement) goal, PAR, and supporting documentation of completed tasks.

   2. Confirm the student’s career pathway remains appropriate (Review Exhibit 2-5
Placement Pathway Prerequisites for Entry).

3. If the student requests a change in their mid-term pathway goal, the center must take the following action steps:
   (a) Student must submit a justification statement for mid-term career pathway change.
   (b) Interdepartmental CMT must review and agree with career pathway change; assist student in revising MyPACE Career Plan, and assign new PAR.
   (c) Center Director or designated senior manager must approve the revised MyPACE Career Plan and assignment of new PAR.

4. At a minimum, update the student’s MyPACE Career Plan and PAR as a result of each evaluation, to reflect accomplishments and goal revisions.
   e. Ensure students are evaluated by career development staff who are in and have direct contact with the students, such as counselors, instructors, residential advisors/residential counselors, and work site supervisors. Require evaluators to discuss their evaluations with students privately and in person.
   f. Provide each student with an updated copy of his or her MyPACE Career Plan and PAR following each evaluation or whenever the plan or career pathway is changed, and upload revisions into the Center Information System (CIS) e-Folder.

**R3. Transition to Career Development Period**

Centers must:

a. Ensure that each student receives ongoing evaluations, conducted by an interdepartmental Career Management Team (CMT).

b. Ensure each student’s interdepartmental (CMT) conducts a formal evaluation prior to the student’s entry into Career Development, which assesses the student’s progress, determine readiness to participate, and identifies any needs for support services.

c. Collaborate with the student to review, verify, and finalize his or her initial My Pathway to Achieving Career Excellence (MyPACE) Career Plan, including:
   1. Short-term training goals (career technical training program selection and academic goal)
   2. Mid-term career goal (job placement, apprenticeship, advanced training, military enlistment, or post-secondary education). An assessment to determine if the career pathway is appropriate for the student (Refer to Exhibit 2-5 Placement Pathway Prerequisites for Entry)
3. Long-term career goal (ultimate career that the student will progress toward)

4. Tasks associated with career development and transitional needs as identified in Chapter 2, Section 2.1, R4 My Pathway to Achieving Career Excellence Career Plan

d. Collaborate with each student to identify Career Success Standards that support their MyPACE Career Plan.

e. Schedule support services for each student, as needed, to address barriers to full participation in Career Development.

f. Assign each student to Career Development activities based on their individual progress and readiness to participate.

g. Assign student a Pathway Achievement Record (PAR) based on his/her mid-term placement goal (direct job placement, apprenticeship, advanced training, military enlistment, or postsecondary education). The interdepartmental CMT will assign staff during the Career Development Period (CDP) to:

1. Monitor, assist, and support the student in the completion of PAR tasks and activities, including transitional needs.

2. Identify completion timelines and follow up.

h. Ensure career plans include signatures from representatives for each department identified on the career plan.

i. Submit each student’s initial MyPACE Career Plan to the Center Director or senior management designee for review and approval. (Reference Form 2-06 MyPACE Career Plan Checklist and Exhibit 2-5 Placement Pathway Prerequisites for Entry)

j. Retain a copy of approved MyPACE Career Plan and PAR in each student’s permanent personnel file and upload any updated versions in the student’s e-Folder.
# Exhibit 2-1

## Infraction Levels, Definitions, and Appropriate Center Actions

### Level I – Zero Tolerance Infractions

<table>
<thead>
<tr>
<th>Infraction</th>
<th>Definition</th>
<th>Center Action</th>
<th>Readmit Eligible</th>
<th>Separation Code</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
</table>
| Possession of a weapon on center or under center supervision | Knowingly possessing an instrument whose primary use is to inflict bodily harm, including, but not limited to:  
- Firearms and ammunition  
- Explosives and incendiaries  
- Knives  
- Homemade weapons  

Example: A knife is found in a student’s locker. The Fact-Finding Board determines the knife belonged to the student.  
Example: A knife is found in a student’s locker. The Fact-Finding Board determines the knife was placed there by another student for the purpose of getting the student kicked out of the program, and the student did not know it was there. In that case, the Fact-Finding Board would determine that the student did not knowingly possess the weapon and would not be found responsible for the infraction. |
|                                                            | Fact-Finding Board, automatic discharge if deemed responsible                                          | Not Eligible                                                                  | 5.1a             | Yes             |
| Assault                                                   | Taking a physical action with the intent to cause immediate bodily harm to another person unless taken in immediate response to another person taking such an action with the intent to prevent its continuation.  

Example: A student (aggressor) strikes another student (victim). The victim defends him or herself by tackling the aggressor in an attempt to stop further assault. Upon investigation, the aggressor is charged with assault, but the victim is not. However, if the victim had become a secondary aggressor and proceeded to pummel the initial aggressor, then both would be charged with assault.  
Example: A student (aggressor) attempts to strike another student (victim) and misses. The aggressor is charged with assault because the aggressor intended to cause bodily harm. |
|                                                            | Fact-Finding Board, automatic discharge if deemed responsible                                          | Not Eligible                                                                  | 5.1a             | Yes             |
## LEVEL I – ZERO TOLERANCE INFRACTIONS

<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Threat of assault</td>
<td>Taking any action that intentionally causes another person to fear imminent bodily harm.</td>
<td>Fact-Finding Board, automatic discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td><strong>Example:</strong> One student raises a tray in the cafeteria as if to strike another student to intentionally cause fear.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threat to safety</td>
<td>Taking any action that causes another person to reasonably fear bodily harm, including threats expressed verbally or via email, text, blog or social media.</td>
<td>Fact-Finding Board, automatic discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td><strong>Example:</strong> A student uses social media to invite members of the community to come fight another student on campus.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Example:</strong> A student makes a terroristic threat to bomb a dormitory.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual assault</td>
<td>Causing or engaging in sexual contact, or inappropriate touching of a sexual nature of another, without the voluntary, affirmative consent of all individuals involved.</td>
<td>Fact-Finding Board, automatic discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td><strong>Example:</strong> • Forced sexual intercourse or sodomy • Attempted rape • Child molestation • Fondling/groping</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## LEVEL I – ZERO TOLERANCE INFRACTIONS

<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
</tr>
</thead>
</table>
| Drugs: Possession or distribution of drugs on center or under center supervision | Knowingly possessing, using, or distributing any of the following:  
  • Illegal drugs, as defined by the Controlled Substances Act including seeds and residue, except when the drug is possessed and/or used in accordance with a valid prescription  
  Note: Under Federal law, no valid prescription can be provided for Schedule I drugs, including marijuana  
  • Synthetic drugs  
  • Legalized marijuana  
  • Prescription drugs not prescribed for the individual  
  • Substances used for the purpose of intoxication  
  • Over-the-counter medications for the purpose of intoxication  
  • Drug paraphernalia  
  • Drug sale ledger or distribution list         |

<table>
<thead>
<tr>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fact-Finding Board, automatic discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.2b</td>
<td>Yes</td>
</tr>
</tbody>
</table>
### LEVEL I – ZERO TOLERANCE INFRACTIONS

<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
</table>
| Drugs: Use of drugs as evidenced by a positive drug test | • Testing positive on a follow-up to an initial positive drug test. The follow-up test is administered between the 37th and 40th day after arrival on center.  
• Testing positive on a drug test administered on suspicion at any time.  
NOTE: Job Corps has a policy of Zero Tolerance for drug use once the student is enrolled in the program. However, students with a history of drug use are not automatically disqualified from enrolling in Job Corps. As described in Chapter 2, Section 2.3, R5, students will be tested within 48 hours of initial arrival to the center. An initial positive drug test is considered to reflect drug use prior to the student’s enrollment. Students who test positive are provided intervention services and retested between the 37th and 40th day after arrival on center, at which point a positive test is a Level I infraction.  
NOTE: Students who refuse to provide a specimen or have an unexcused absence from a follow-up drug test shall be presumed guilty of this infraction. | Fact-Finding Board, automatic discharge if deemed responsible | Eligible after one year, but if individual tests positive for drug use upon readmission, they will be separated immediately and not allowed to reapply | 5.2a | Yes |
<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
</table>
| **Alcohol:** Possession, consumption, or distribution while on center or under center supervision | While on center or while off center but on a center-supervised activity, knowingly:  
- Possessing alcohol  
- Consuming alcohol  
- Distributing alcohol to others  

NOTE: Students who are aged 21 or older may drink alcohol when off center and not under center supervision; however, they cannot bring alcohol onto the center.  
In addition, if students of any age return to the center intoxicated, it is categorized as a Level II “intoxication” infraction described below.  
NOTE: Students who refuse to submit to a breathalyzer or provide a sample for alcohol testing shall be presumed guilty of this infraction. | Fact-Finding Board, automatic discharge if deemed responsible | Eligible after one year | 5.3c | Yes |
| **Abuse of Alcohol** | A pattern of alcohol consumption-related incidents demonstrated by receiving more than two Level II “Intoxication on center or under center supervision” infractions where the intoxication is the result of alcohol while enrolled in the program. The 3rd infraction elevates the behavior to Level I Abuse of Alcohol. | Fact-Finding Board, automatic discharge if deemed responsible | Eligible after one year | 5.3c | Yes |
| **Arrest for a felony or violent misdemeanor on or off center** | - Being arrested by law enforcement for a felony.  
- Being arrested by law enforcement for a misdemeanor involving the use, attempted use, or threatened use of physical force against the person or property of another.  

NOTE: If the student is subsequently found guilty of only a non-violent misdemeanor, as defined below, he/she shall instead be charged with committing the Level II infraction “Arrest for a non-violent misdemeanor on or off center”.  
If the charges are dropped or if the student is found not guilty, he/she will be exonerated. | Fact-Finding Board, automatic discharge if deemed responsible | Not Eligible | 5.1a | Yes |
### LEVEL I – ZERO TOLERANCE INFRACTIONS

<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illegal Activity</td>
<td>Being convicted of a felony or misdemeanor as defined by Federal or state law, where the crime occurred while the student was enrolled in Job Corps.</td>
<td>Fact-Finding Board, automatic discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td>Robbery or extortion</td>
<td>Taking money or possessions of another from his/her person by force or intimidation.</td>
<td>Fact-Finding Board, automatic discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td>Arson</td>
<td>The malicious setting of fire to a structure or personal property belonging to another person or entity.</td>
<td>Fact-Finding Board, Automatic Discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td>Cruelty to animals</td>
<td>The torture, ill-treatment, abandonment, willful infliction of injury or pain, beating, maiming, mutilating, or killing of any animal, whether belonging to the individual or another.</td>
<td>Fact-Finding Board, Automatic Discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
<tr>
<td>Inciting a disturbance or creating disorder</td>
<td>Persuading, encouraging, instigating, taunting, pressuring or threatening persons to disrupt a peaceful situation. Causing disorder or disrupting a peaceful situation.</td>
<td>Fact-Finding Board, Automatic Discharge if deemed responsible</td>
<td>Not Eligible</td>
<td>5.1a</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### LEVEL II INFRACTIONS

<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
</table>
| Possession of a potentially dangerous item | Knowingly possessing, without authorization or legitimate purpose, an instrument or substance that could readily be used to inflict bodily harm.  
Example: Box cutter, scissors, trade tools, drain cleaner.                                                                                      | Fact-Finding Board | Eligible after 1 year | 5.1b            | Yes                                      |
| Theft/stealing                            | Taking the property of another person or entity, with the intent of permanently depriving the owner.                                                                                                                                                                                                                                        | Fact-Finding Board | Eligible after 1 year | 5.1b            | Yes                                      |
## LEVEL II INFRACTIONS

<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
</table>
| Intoxication on center or under center supervision | While on center or while off center but on a center-supervised activity, exhibiting a state in which one’s capacity to act or reason normally has been inhibited by the ingestion of a substance with the intent to cause such a state.  

NOTE: Suspected intoxication from use of alcohol may be confirmed by a breathalyzer test if alcohol is found in the breath or saliva. However, this definition includes intoxication as a result of substances other than alcohol, so a negative breathalyzer does not preclude a student from being charged with an intoxication infraction.  

NOTE: Possessing, consuming, or distributing alcohol while on center or while off center but on a center-supervised activity is categorized as a Level I infraction, as described above.                                                                                                                                                                                                                               | Fact-Finding Board | Eligible after 1 year | 5.3b               | Yes                                      |
| Possession of stolen goods | Possessing items that one knows, or reasonably should know, are stolen.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Fact-Finding Board | Eligible after 1 year | 5.1b               | Yes                                      |
| Bullying or harassment | • Making repeated (2 or more instances) communications with the intent to threaten or hurt another person mentally or emotionally, including statements made orally, in writing or via email, blog, text or other social media.  
• Making discriminatory remarks or ethnic slurs.  
• Performance of curses, hexes, or other rituals or actions intended to harm others.                                                                                                                                                                                                                                                                                                                                                                 | Fact-Finding Board | Eligible after 1 year | 5.1b               | Yes                                      |
<table>
<thead>
<tr>
<th>INFRACTION</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
</table>
| Sexual harassment| Making an unwelcome sexual advancement(s), request(s) for sexual favors, sexually offensive remark(s), a sexual gesture(s) or other communication(s) of a sexual nature that contribute to an intimidating, hostile or offensive environment. Depending on its severity, a single incident may constitute sexual harassment. Harassment does not have to be of a sexual nature, however, and can include offensive remarks about a person's gender including behavior, comments, jokes, slurs, email messages, pictures or other conduct that contributes to an intimidating or offensive environment. Sexual harassment may occur between males and females or between members of the same sex.  

**Example:** A student tells an offensive joke, warranting on-the-spot intervention and counseling that the joke is inappropriate. The student continues to tell offensive jokes, which is then deemed sexual harassment.  

**Example:** An overly explicit unwanted sexual advance. | Fact-Finding Board | Eligible after 1 year | 5.1b                | Yes             |
<p>| False accusation  | Making a false accusation against another individual that could have resulted in a Level I infraction or staff disciplinary action, without any credible supporting evidence. | Fact-Finding Board | Eligible after 1 year | 5.1b | No |
| Unfair money lending | Lending money and either demanding repayment with interest or using intimidating methods to obtain repayment. | Fact-Finding Board | Eligible after 1 year | 5.1b | No |
| Hazing or initiation | Participating in any ritual, ceremony, ordeal or other activity that involves humiliating or verbally or emotionally abusing someone as a way of admitting him/her into a group or of granting him/her status. It shall not constitute a defense to the charge of hazing or initiation that the participant(s) took part voluntarily, that they voluntarily assumed the risks or hardship of the activity, or that no physical or mental injury was suffered. All participants engaged in a hazing or initiation activity are subject to disciplinary action. | Fact-Finding Board | Eligible after 1 year | 5.1b | Yes |</p>
<table>
<thead>
<tr>
<th>INFRINGEMENT</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gang representation or activity</td>
<td>Wearing of gang clothing, colors; using signs or handshakes associated with known gangs identified by law enforcement; using gang names or displaying gang symbols or slogans.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.1b</td>
<td>Yes</td>
</tr>
<tr>
<td>Vandalism</td>
<td>Intentionally damaging or destroying equipment or property belonging to another person or entity, including tagging.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.1b</td>
<td>Yes</td>
</tr>
<tr>
<td>Plagiarism</td>
<td>Passing off the ideas or words of another as one’s own without crediting the source.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.1b</td>
<td>No</td>
</tr>
<tr>
<td>Cheating</td>
<td>Representing someone else’s work as one’s own or helping someone else to do so.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.1b</td>
<td>No</td>
</tr>
<tr>
<td>Arrest for a non-violent misdemeanor on or off center</td>
<td>Being arrested by law enforcement for a misdemeanor that does not involve the use, attempted use, or threatened use of physical force against the person or property of another.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.1b</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Example: Copying a report from the internet and submitting as one’s own work.

Examples:
- Providing questions/answers to another student during a test.
- Receiving questions/answers from another student during a test.
- Using online resources during a test.

NOTE: Violent misdemeanors are categorized as Level I infractions and defined above.

If the charges are dropped or if the student is found not guilty, he/she will be exonerated.
<table>
<thead>
<tr>
<th>INFRINGEMENT</th>
<th>DEFINITION</th>
<th>CENTER ACTION</th>
<th>READMIT ELIGIBLE</th>
<th>SEPARATION CODE</th>
<th>Significant Incident Report (SIR) Required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bringing disrepute to the program</td>
<td>Behaving in a manner that is likely to cause others to have a diminished or lower opinion of the center or the Job Corps program. Example: While off center, creating some kind of disturbance in the community that did not result in an arrest (rowdy behavior which bothered citizens or merchants). Example: Video recording occurrences of Level I, II, or III Infractions (such as videos of fights) and posting the footage on the internet.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.1b</td>
<td>Yes</td>
</tr>
<tr>
<td>Pattern of minor infractions</td>
<td>Receiving more than 4 minor infractions within a 60 calendar day timeframe. The 5th infraction elevates the behavior to Level II, Pattern of Minor Infractions.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.3a</td>
<td>No</td>
</tr>
<tr>
<td>Unauthorized Exit</td>
<td>Leaving the Job Corps center campus or a center-supervised activity without approval from a staff member authorized to approve student leave and passes. Example: A student leaves campus for any reason such as meeting a friend, conducting personal business, etc. without first securing appropriate approval.</td>
<td>Fact-Finding Board</td>
<td>Eligible after 1 year</td>
<td>5.3d</td>
<td>Yes</td>
</tr>
<tr>
<td>MINOR INFRACTIONS</td>
<td>DEFINITION</td>
<td>CENTER ACTION</td>
<td>Significant Incident Report (SIR) Required?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------</td>
<td>------------</td>
<td>---------------</td>
<td>--------------------------------------------</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| **Failure to follow center rules impacting the rights or ability of others to benefit from the program** | Exhibiting a pattern of behavior infractions that impacts the rights of other enrollees or their ability to benefit from the program, including:  
  - Using profanity, or abusive or obscene language  
  - Interfering with the learning of others through disruptive behavior  
  - Smoking in unauthorized areas  
  - Cutting lines  
  - Maintaining or operating a private vehicle on center  
  - Gambling  
  - Failing to follow safety rules  
  
  Example: Failure to use safety equipment and protective gear; horseplay; misuse of tools. | Progressive interventions: More than 4 occurrences during a 60 calendar day period results in automatic Level II infraction and Fact-Finding Board | No |
| **Failure to follow center rules impacting the individual’s participation or progress in the program** | Exhibiting a pattern of behavior infractions that demonstrates the individual’s lack of commitment to program participation or implicates self-endangerment including:  
  - Refusing to perform assignments  
  - Failing to follow instructions  
  - Being absent or excessively tardy without permission from assigned activity including work, classes, and scheduled health appointments  
  - Engaging in overt sexual behavior  
  - Violating center dress code | Progressive interventions: More than 4 occurrences during a 60 calendar day period results in automatic Level II infraction and Fact-Finding Board. | No |
## Exhibit 2-2
### Requirements for the Conduct of Fact-Finding Boards

<table>
<thead>
<tr>
<th>Conduct of Fact-Finding Boards</th>
<th>Level I</th>
<th>Level II</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TIMEFRAME</strong></td>
<td>Decision within 3 training days</td>
<td>Decision within 5 training days</td>
</tr>
<tr>
<td><strong>COMPOSITION</strong> (Does not include Center Director (CD), Center Standards Officer (CSO), Counselor, or Security)</td>
<td>One senior staff member</td>
<td>Two staff, one student</td>
</tr>
<tr>
<td><strong>STUDENT PARTICIPATION</strong></td>
<td>Student removed from center immediately and placed on Fact-Finding Board Leave.</td>
<td>Student removed from center immediately and placed on Fact-Finding Board Leave if determined to be a threat to self or others, in accordance with the PRH</td>
</tr>
<tr>
<td><strong>STUDENT RIGHTS</strong></td>
<td>May provide written input for consideration</td>
<td>• If on center, appear before Board • May make written input to Board</td>
</tr>
<tr>
<td><strong>CONSIDERATIONS</strong></td>
<td>Fact finding only</td>
<td>• Fact finding • Seriousness of infraction • Mitigating circumstances</td>
</tr>
<tr>
<td><strong>BOARD DETERMINATION</strong></td>
<td>Confirm documentation is present (incident report, witness and staff statements and/or other paperwork relevant to the specific charge(s)) If documentation supports charges, confirm responsibility, sign summary and forward packet to CD If documentation is inadequate to support charges, request additional information or reduce charges and forward packet to CD</td>
<td>Consider documentation (incident report, summary, witness and staff statements and or other paperwork relevant to the exact charge) Boards may not use, review, or consider Evaluations of Student Progress, or non-supporting statements at Board unless directly related to charge(s) Vote, without the charged student present, to determine responsibility and make a recommendation to CD for retention or separation Forward packet with recommendation to CD for decision</td>
</tr>
<tr>
<td><strong>DISPOSITION OF RESPONSIBILITY</strong></td>
<td>Automatic discharge/separation Level I Zero Tolerance</td>
<td>Presumption of discharge</td>
</tr>
<tr>
<td><strong>DOCUMENTATION</strong></td>
<td>Form: Summary of Fact-Finding Board Determination signed by Board member CIS: Enter the exact date the Fact-Finding Board was held and its final disposition.</td>
<td>Form: Summary of Fact-Finding Board Hearing signed by Board members CIS: Enter the exact date the Fact-Finding Board was held and its final disposition. Provide rationale if Board recommendation is not upheld.</td>
</tr>
<tr>
<td><strong>CENTER DIRECTOR’S ROLE</strong></td>
<td>If paperwork supports charges, sign summary and initiate separation processing</td>
<td>Review the Board’s recommendation Determine if recommendation is to be upheld, overturned, or if charges are to be reduced; sign decision and provide rationale if Board recommendation is not upheld</td>
</tr>
<tr>
<td><strong>STUDENT NOTIFICATION</strong></td>
<td>In writing</td>
<td>Verbally (if present on center), and in writing</td>
</tr>
<tr>
<td><strong>APPEALS</strong></td>
<td>May appeal to Regional Appeal Board (RAB) within 30 days</td>
<td>May appeal Board decision to CD, and CD’s decision to Regional Appeal Board within 30 days</td>
</tr>
</tbody>
</table>
**EXHIBIT 2-3**

**MENU OF PROGRESSIVE DISCIPLINE INTERVENTIONS AND SANCTIONS FOR MINOR INFRACTIONS**

<table>
<thead>
<tr>
<th>Minor Infractions: Menu of Progressive Discipline Interventions and Sanctions</th>
<th>5th Offense in 60 Calendar Day Period</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st Offense</strong></td>
<td><strong>2nd Offense</strong></td>
</tr>
<tr>
<td><strong>Interventions:</strong></td>
<td><strong>Interventions:</strong></td>
</tr>
<tr>
<td>• Counseling referral</td>
<td>• Counseling referral</td>
</tr>
<tr>
<td>• Verbal apology</td>
<td>• Wellness referral (if applicable)</td>
</tr>
<tr>
<td>• Peer counseling</td>
<td>• Written and verbal apology</td>
</tr>
<tr>
<td></td>
<td>• CSS essay or assignment related to CSS skill deficiency</td>
</tr>
<tr>
<td></td>
<td>• Community service (4 hours)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Sanctions:</strong></td>
<td><strong>Sanctions:</strong></td>
</tr>
<tr>
<td>• $1 fine</td>
<td>• $2 fine</td>
</tr>
<tr>
<td>• Verbal or written reprimand</td>
<td>• Letter of caution</td>
</tr>
<tr>
<td></td>
<td>• Weekend restriction</td>
</tr>
</tbody>
</table>

Notes:
- As reflected in the Center’s Behavior Management Plan, Peer Court may be incorporated into the Progressive Discipline process to recommend the appropriate interventions and sanctions.
- Interventions must be tailored to address specific skill deficiencies identified in the infraction report.
- CSS refers to Career Success Standards.
EXHIBIT 2-4

JOB CORPS BASIC HEALTH CARE RESPONSIBILITIES

A. Medical

1. Assessment and diagnosis of illness and injury, to include:
   • Cursory medical evaluation by a qualified health professional; must be completed within 48 hours after the student’s entry.
   • Entrance physical examination by a qualified health professional within 14 days after entry using Job Corps approved history and physical forms.
   • Required entry laboratory studies
     o Hemoglobin or hematocrit
     o Pregnancy test (all females)
     o Pap smear (all females ≥ 21 years of age)
     o Chlamydia and gonorrhea testing
     o HIV testing
     o Urine drug screen
   • Immunizations, to include boosters for incomplete immunization series, and hepatitis B vaccine for health occupations training students.
   • Tuberculin skin test (Mantoux).
   • Vision and hearing screening.
   • Daily walk-in clinic and appointment system for above and for episodic illness or injury assessment by center physician and/or nurse.
   • Inpatient unit visits for minor conditions, such as respiratory infections, or flu symptoms.

2. Treatment, as highlighted below, will be provided when necessary. Third-party payer information will be given to providers when off-center care is required.
   • Primary emergency care for illness and injury, including first aid and CPR, and secondary care within capabilities, e.g., injection of epinephrine, and immediate transfer to hospital emergency room for specialized diagnosis and treatment, if needed.
   • Treatment of urgent and other conditions not needing specialized care and that are within the capabilities of qualified health professionals on staff.
   • Management of chronic health conditions as directed by qualified health professionals.
   • Referral to off-center physicians for detailed specialized assessment.
   • Access to prescription medications.

If a student sustains an on-the-job injury that requires extensive or specialized treatment, he or she will be medically separated as a Medical Separation with Reinstatement Rights (MSWR) and a referral will be sent to the Office of Workers’ Compensation Programs (OWCP).
B. Oral Health

1. Assessment and diagnosis, to include:
   - Dental readiness inspection within 14 days after entry to identify urgent care need for oral conditions that if not treated are expected to result in dental emergencies in the near future.
   - Elective oral examination upon student request, including x-rays to precede dental treatment.

2. Treatment, to include:
   - Dental procedures to treat oral disease and correct oral health conditions that may represent employability barriers. Specific procedures include:
     o Restorations
     o Extraction of pathological teeth
     o Root canal therapy on anterior and other strategic teeth
     o Replacement of missing upper anterior teeth with a removable prosthesis
     o Dental hygiene treatment that involves nonsurgical periodontal care to treat periodontal disease
   - Referral to off-center facilities as necessary for emergent or urgent conditions treatable beyond the expertise of a general dentist.

3. Oral disease prevention education and management, to include:
   - Oral strategies, such as oral hygiene instruction, risk assessments, and group education.
   - Oral-health promotion activities with an emphasis on overall wellness and employability.

C. Mental Health

1. Assessment and possible diagnosis, to include:
   - Assessments and recommendations for Job Corps applicants.
   - Review of Social Intake Form (SIF) or intake assessment performed by counseling staff of students who indicate mental health history, current mental health problems, or who request to see the center mental health consultant within 1 week of arrival.
   - Mental-health assessments with recommendations for referred students.

2. Mental-health promotion and education, to include:
   - Minimum of a 1-hour presentation on mental health promotion for all new students during the Career Preparation Period with an emphasis on employability.
   - At least one annual center-wide mental-health promotion and education activity.
   - Clinical consultation with Center Director, management staff, and Health and Wellness Director regarding mental health related promotion and education efforts for students and staff.
   - Coordination with other departments/programs on center to develop integrated
promotion and education services.

3. Treatment, to include:
   - Short-term counseling with mental health checks as needed. The focus of these sessions should be on retention and behaviors that represent employability barriers.
   - Collaboration with Trainee Employee Assistance Program (TEAP) Specialists in the short-term counseling of students with co-occurring conditions of mental health and substance use.
   - Collaboration with center physician and Health and Wellness staff on psychotropic medication monitoring of stable students, with the advice of consulting psychiatrist, if appropriate.
   - Collaboration with counseling staff in developing and/or leading psycho-educational skill building groups to promote (e.g., relaxation training, anger management, mood regulation, assertiveness skills, handling relationships, sleep hygiene, etc.).
   - Information exchange through regular case conferences between the Center Mental Health Consultant, counselors, and other appropriate staff members based on individual student needs.
   - Crisis intervention, as needed.
   - Referral to off-center mental-health professionals or agencies.

D. Trainee Employee Assistance Program (TEAP)

1. Substance use prevention and education, to include:
   - Minimum of a 1-hour interactive presentation on substance use prevention for all new students during the Career Preparation Period.
   - Presentation(s) on managing substance misuse, abuse and dependency conditions in the workplace students during the Career Development and Transition Periods.
   - At least three annual center-wide substance use prevention and education activities.
   - Clinical consultation with Center Director, management staff, Center Mental Health Consultant, and Health and Wellness Director regarding substance use related prevention and education efforts for students and staff.
   - Coordination with other departments/programs on center to develop integrated prevention and education services.

2. Assessment for identification of students at risk for substance use problems to include:
   - Review of Social Intake Form (SIF) or intake assessment of all students performed by counseling staff within 1 week of arrival.
   - Formalized assessment measures (e.g., SASSI3 or SASSIA2) and clinical judgment to determine students’ risk levels for substance use.
   - Collaboration with the Center Mental Health Consultant to determine when a MSWR or medical separation is appropriate and should be recommended for a student with substance use conditions.

3. Intervention services for students identified at an elevated risk for substance use, to
include:
- Individual and group intervention services with a focus on behaviors that represent employability barriers.
- Collaboration with the Center Mental Health Consultant for students with co-occurring conditions of mental health and substance use.
- Referral to off-center substance abuse professionals or agencies for ongoing treatment and/or specialized services.

4. Drug and alcohol testing, to include:
   - Drug and alcohol testing procedures
   - Policies related to positive drug or alcohol tests
   - Notification of drug or alcohol test results
PLACEMENT PATHWAY PREREQUISITES FOR ENTRY

Advanced Training pathway prerequisites for entry include:

- Minimum appropriate TABE scores in both Reading & Math (may vary by AT)
- 100% TAR completion
- Minimum age 17 ½ for program entry with parental consent
- Driver’s License
- Good to excellent center behavioral record
- Each AT will have its own requirements for background check (e.g., home state and state the JC center is located, or nation-wide)
- No physical issues that impact performance
- No mental health issues that impact performance
- Ability to have phone interview(s)
- (Varies by AT program) Certifications
- (May be required by AT) Enrollment in Community College as well as AT program
- (May be required by AT) Sending center provides trade related tools and clothing
- (May be required by AT) Must have positive impact on center
- Other criteria as required by specific AT

Military pathway prerequisites for entry include:

- Each military branch has its own minimum ASVAB score (lowest score is 31) and varies based on demand
- Complete national background check
- No prescribed medications, major mental health issue, or legal charges. Some waivers can be applied for but very difficult to obtain
- No debts exceeding more than $500
- Maintain satisfactory behavior on center
- Student can’t be receiving federal payments (e.g., social security payments)
Some restrictions on tattoos (if visible and what content)
If under 18, need parental consent to enlist
Meet physical requirements based on height and weight measurement formula
Minimum completion of 675 hours actual CTT training and attainment of either a Tier 1 HSD or a Hi-Set/GED (the exception is the marine branch which requires a Tier 1 diploma)
CTT Certifications
Other criteria as determined by specific military branch

**Apprenticeship pathway prerequisites for entry include:**

- 100% CTT and e-TAR completion
- HSD or HSE/GED
- (Varies by apprenticeship program) CTT Certifications
- Required hours of pre-apprenticeship varies per CTT (e.g., NTC requires 1000 hours)
- (If required) Meet physical requirements
- (If required) Driver’s License
- Most apprenticeship programs require minimum age of 18 years to be covered by Workmen’s Compensation
- Other specific criteria as required by Apprenticeship program

**Post-secondary education pathway (ACT/College) prerequisites for entry include:**

- HSD or HSE/GED
- (For college) Apply for FAFSA. Requires parental income documentation until the age of 25
- (For college) Requires SAT, ACT or other placement assessment by institution
- (For college) Maintain a 2.5 GPA or lose FAFSA funding
- (Varies with institution) Background check
- Other specific criteria as determined by post-secondary institution
Entry-Level Job pathway prerequisites include:

- 100% CTT and e-TAR completion
- HSD or HSE/GED
- Driver’s license
- Certifications
- (If required) Physical requirements
- (If required) Background check
- Other specific criteria as determined by employer
- Verification of job placement
These requirements are separate from accommodation requirements. Your obligation to communicate effectively with people with disabilities – whether those people are students, staff, applicants for admission or employment, parents, guardians, or members of the public – is separate from your obligation to provide reasonable accommodations for qualified people with disabilities.

The Workforce Innovation and Opportunity Act (WIOA)
https://www.congress.gov/113/bills/hr803/BILLS-113hr803enr.pdf, nondiscrimination regulations, which apply to Job Corps, distinguish between these two obligations, for a very simple reason: without clear, accurate, effective communication, any encounter between a person with a disability and a program from which he or she is seeking services, such as Job Corps, will be meaningless.

Therefore, when a person with a disability that affects his or her ability to communicate approaches Job Corps, the first thing you should do is find out how to communicate as effectively with that person as you do with people without disabilities.

It is important to understand that under the law, the burden is on Job Corps to provide the auxiliary aids and services (communication aids) that are needed for equally effective communication with a particular person with a disability. This means that you cannot and must not require the person with a disability to supply, or pay for his or her own interpreter, communication device, or whatever else is necessary for clear communication between him or her and Job Corps.

Furthermore, in deciding what type of aid or service is appropriate and necessary in order for you to communicate equally effectively with a particular person with a disability, the law requires you to “give primary consideration to” the requests of that person. Why? Because:

- He or she is the best source of information about his or her own needs.
- Not everyone who appears to have “the same” disability, or type of disability, is able to use and understand the same communication method. For example, while some people with hearing impairments understand American Sign Language, others communicate in Signed English, while still others do not understand sign language at all, and need a different communication method such as CART transcription.

Although Job Corps is not necessarily required to provide the precise communication aid requested by a person with a disability when an equally effective, less costly alternative is available, the law places on you the clear obligation to provide some method of communication that is effective for that particular person with a disability. This essentially means that you must engage in an interactive process with the person with a disability, similar to the process required for reasonable accommodations (see Form 2-03), to find out what communication method(s) the person can genuinely understand. This process itself, of course, requires you to communicate effectively with the person with a disability.
Any medical, health, or disability-related information about a particular person – whether that person is an applicant to Job Corps, an enrollee, an employee, an applicant for employment, or anyone else – must be treated with extreme care. Federal law requires that all such information be treated as strictly confidential, and that it be transmitted and stored in a way that ensures confidentiality.

This appendix explains the rules for transmission, storage, and confidentiality of medical and disability-related information in Job Corps.

What information is disability-related?

This category is broader than you might think. It includes any information that indicates (even if it doesn’t explicitly state) that a particular person has a disability. For example, the fact that a particular applicant or student has an Individual Education Plan, or had one at some point during their education, means that he or she has a learning disability. Therefore, that fact is “disability-related information” that must be treated as confidential.

The category “disability-related information” is not limited to hard-copy or electronic records. It also includes discussions about the fact that a particular individual has a disability, or about specific details (such as a person’s physical or behavioral symptoms, use of particular devices or equipment, or types of treatment) that indicate that he or she has a disability. Of course, some of the latter types of details will also fall under the category of medical information, and must be kept confidential as well.

Confidentiality: The General Rule is Do Not Tell

The Federal disability nondiscrimination laws that apply to Job Corps list specific categories of persons who are allowed to obtain medical (including health) or disability-related information about a particular individual. This means that unless you know that a given person falls into one of the specified categories, you must assume that the person is not entitled to medical or disability-related information about someone else; in other words, your default setting must be “don’t tell.”

Who may be informed either about the fact that a particular individual has a disability, or about specific details related to a disability or medical/health condition?

Only people in the following categories, and only when they need to know (“need to know” is interpreted narrowly):
• **Admissions counselors** who:
  o Need to know whether they will need to provide one or more accommodations, or communication aids, for an applicant and/or his or her parent or guardian during the admissions process
  o Need to know whether an applicant is entitled to a waiver of the upper age limit for admission because he or she has a disability
  o Must make a decision about an applicant’s financial eligibility based on his or her status as a family of one

• **Instructors, residential staff, other center staff** – only those who need to know about:
  o An accommodation the person will be provided
  o Necessary restrictions on a person’s duties, activities, diet

• **First aid and safety personnel** – only if:
  o The condition might require emergency treatment
  o The participant might need special assistance in an emergency evacuation

• **Administrative staff** of the center, center operator, Regional or National Office, or DOL (or other operating federal agency) who are doing monitoring or data validation

• **Government officials** investigating compliance with requirements related to nondiscrimination and/or equal opportunity

• **Health and wellness staff** who are examining or treating a particular person

• **Others** – only on a need-to-know basis (interpreted narrowly)

**Knowledge Versus Access**

The categories of persons who are permitted to have access to a particular individual’s underlying medical, health, or disability-related documents are still more limited: even among those who may be informed either about the fact that an individual has a disability, or about specific details related to a disability or medical condition. Very few people will genuinely need to see or use those documents.

**Examples:**

• Access to medical documentation that a participant is entitled to status as a family of one, or waiver of the upper age limit, should be limited to staff members who need to document the basis for such decisions.

• First aid personnel may need access to underlying documentation related to a person’s medical condition in an emergency.

• Administrators or health and wellness staff who are considering whether a request for a reasonable accommodation should be granted may need to review documentation that is submitted in support of the request. In these cases, however, you should think about removing personally identifiable information from the documents. This approach has the advantage not only of protecting confidentiality, but also of helping
ensure that the decision-makers base their determination solely on the facts of a particular case.

• Instructors, residential staff, or other center staff who are working with, or providing accommodations for, a particular person will rarely, if ever, need to see the person’s medical records or other documents that demonstrate that he or she has a disability.

Storage of Records that Contain Medical or Disability-Related Information

Federal disability nondiscrimination laws that apply to the Job Corps program require that any documents or other records that contain medical or disability-related information about a particular individual must be kept in files (either hard-copy or electronic) that are separate from all other information about the individual. Medical and disability-related information should be collected on separate forms and placed in the files reserved for medical and disability-related information. If a center, center operator, or staff member wants a document to be kept in a student’s general file or an employee’s personnel file, and that document happens to contain some medical or disability-related information, the medical or disability-related information must simply be removed from the document before it is put in the general or personnel file.

The files that contain medical and disability-related information must be stored in a way that satisfies the strict confidentiality and access requirements described above. In the majority of cases (particularly where hard copies of records are used), satisfying those requirements will mean that all medical- and disability-related records as a group must be stored separate from all other student, applicant, or employee files—in a separate drawer, file cabinet, or storage room, or on a separate server.

Regardless of whether the medical/health/disability files are maintained in electronic or hard-copy form, access to these files must be limited to the categories of persons listed in the “Knowledge Versus Access” section above. Hard copies of files must be kept locked, and access to the key or combination must be furnished only to authorized persons. Electronic files must be protected via passwords or other similar methods.

The requirement of separate storage makes sense when considered in the light of the laws requiring strict confidentiality of medical and disability-related information. The confidentiality requirements that apply to most information about a particular individual are less strict than the requirements that apply to medical and disability-related information. Therefore, while a number of different categories of outreach and admission/career transition services, center, or operator staffers may be permitted access to general information about a particular individual, a much narrower group is legally authorized to have access to the medical and disability-related records about that same individual. The most logical way to impose stricter limitations on access to the latter records is to store them separately. The alternative would be to drastically limit the categories of people who have access to the individual’s entire file, in order to protect the medical, health, and disability-related information the file contains. Then, only the categories of persons listed in the “Knowledge Versus Access” section above would be able to use, or even look at, the file.

Transmission of Medical, Health, and Disability-Related Information

When student, applicant, or employee records are being transmitted, the requirements described
above still apply. Any and all records that are medical-, health-, or disability-related, or that contain any of those types of information, must be kept separate from other records about the individual. If hard copies are being transmitted, put medical, health, and disability-related information in a separate file, and place that file in a sealed envelope that is clearly marked as containing such information. You may want to consider using numbers, rather than names, on the outside of such envelopes to identify whose records they contain.

Staff members who receive or sort files about individuals – for example, center records department staff who handle applicant and student files – must not open any envelopes containing medical, health, or disability-related information, unless the specific staff member is in one of the categories of authorized persons that are listed in the “Knowledge Versus Access” section above. Instead, those envelopes must be transferred to persons who are legally authorized to have access to such information. In the case of applicant files that arrive on center from an outreach and admissions contractor, for example, the sealed envelopes should be sent to the Health and Wellness Director or other person designated to conduct the initial direct threat review and clinical care review.

**Oral Transmission**

Keep in mind that the confidentiality of medical, health, and disability-related information must be maintained when the information is being transmitted orally – in other words, when it is being discussed aloud. This means that you must be sure that all such discussions take place in private locations where unauthorized persons cannot overhear the conversation, either voluntarily or involuntarily. Cubicles, for example, are inappropriate places to confer about medical or disability-related matters, or even to mention such information, unless the discussion is conducted in such a way that it is impossible for anyone who overhears to identify the person whose information is being discussed.
APPENDIX 203
MEDICATION MANAGEMENT GUIDELINES

Job Corps centers must comply with all state and Federal regulations regarding prescribed non-controlled medications, prescribed controlled substances, and over-the-counter medications, and follow medication management guidelines as specified below.

Over-the-Counter (OTC) Medications: OTC medications are drugs that have been found to be safe and appropriate for use without the supervision of a health care professional, such as a physician or nurse, and can be purchased without a prescription. Centers must comply with all state and Federal regulations regarding OTC medications and shall:

1. Make available OTC medications in the Health and Wellness Center (HWC). Document OTC medication use in the Student Health Record (SHR). If state law permits, stock bottles of OTC medications may be used in HWC.

2. Train and authorize non-health staff members to access OTC medications in first aid lockboxes for student use in compliance with state law. Eligibility, training, and authorizations will vary by state.

3. Outside of the HWC, store OTC medications in first aid lockboxes and make available, similar to a medicine cabinet, in education, trades, security, recreation, cafeteria, and residential areas for students use. OTC medications must be provided in individually packaged single doses in a properly sealed and properly labeled container.

4. Document OTC medication use outside of the HWC on a sign-out sheet kept with the OTC medication box. The sign-out sheet should include: the student’s name, the medication taken, the signature of the student, and signature of the observing staff member. Each OTC lockbox and sign-out sheet must be returned the HWC at least weekly to restock and document. Information from the sign-out sheet must be recorded in the Student Health Record (SHR).

5. Report suspected inappropriate OTC medication use by a student to the HWC staff as soon as possible.

6. Center specific policies that comply with Federal and state laws must be outlined in a Standard Operating Procedure (SOP) for OTC medications (see Chapter 5, Exhibit 5-1).

Prescribed Non-controlled Medications: Prescription medications are drugs that can only be acquired or purchased through a prescription order written by a physician or other prescribing practitioner. Prescribed non-controlled medications are prescriptions that not classified as controlled substances. Centers must comply with all state and Federal regulations regarding prescribed non-controlled medications and shall:
1. Determine which center health practitioners are legally authorized to prescribe, dispense, or administer prescribed non-controlled medications according to state and Federal laws.

2. Confirm the rationale for long-term prescribed non-controlled medications at least monthly with case conference between the Health and Wellness Director (HWD) (or designee who is authorized under his/her state license to administer drugs) and the prescribing health professional. Medication rationale and review includes student adherence, side effects, and whether or not the medication is leading to the desired effect.

3. Document prescription orders and the administration of doses. Monthly Medication Administration Records (MAR) must be filed in the SHR. Prescription orders should be transcribed to a MAR exactly as the order reads.

4. Review and approve prescriptions by the center physician/nurse practitioner/physician assistant generated for students by health practitioners in the community or at the student’s place of residence by the center physician/nurse practitioner.

5. Ensure that all prescribed non-controlled medications are given to the correct student in the right dose and by the proper route. In cases of a medication error, the center medical provider/center dentist/center psychiatrist (if applicable), HWD, and center director must be notified. Document in the SHR. All medication errors will be immediately reported to the Regional Office and the regional nurse specialist.

6. Provide the student with required consumer medicine information in accordance with state pharmacy laws each time a prescription is filled.

7. Handle, package, store, and observe prescribed non-controlled medications when the HWC is closed in compliance with Federal and state pharmacy laws. Center specific policies that comply with state laws must be outlined in a SOP for prescribed non-controlled medicines (see Chapter 5, Exhibit 5-1).

   a. If applicable according to state law where the center is located, the HWD will identify and train/certify unlicensed, non-health staff to be legally authorized to observe self-administration of doses when the HWC is closed. Non-health staff observing medication self-administration must meet state laws, be trained, and have a personal authorization on file for this task.

   b. Any medication dose observed after hours must be documented on a Medication Observation Record (MOR), and a HWC staff member should file the MOR in the SHR at least weekly.
8. Four types of prescribed non-controlled medication should always be classified for self-management. These include: asthma inhalers, insulin (including vials or pens, syringes, and needles), Epi Pens, and oral contraceptives.

9. Dispose of surplus or expired prescribed non-controlled medications in compliance with state and Federal laws.

10. Send prescribed non-controlled medication(s) home with a student when he/she leaves the center. If a student leaves center when the HWC is closed, medications must be promptly sent to the student in compliance with the sending and receiving state laws.

Prescribed Controlled Substances: Controlled substances are highly regulated prescription medications that are classified in five categories by safety and potential for abuse. There are additional requirements for this classification of prescribed medications. Centers must comply with Federal and state regulations regarding prescribed controlled substances (or medications) and shall:

1. Purchase, store, and administer all controlled substances in accordance with the regulation at 21 CFR Part 1300. Each center must maintain a controlled medication log and have a Drug Enforcement Administration (DEA) registration. The center can obtain its own DEA registration or use the center clinician’s DEA registration number when ordering controlled substances.

2. Limit the use of controlled medications and stock only a small supply of those medications that will be prescribed by the center physician, center dentist, or psychiatrist with a DEA registration. Documentation must be maintained showing that controlled medications in stock were prescribed by one of these individuals.

3. Not stock Schedule II medications on center except when prescribed for a specific student. In such a case, the center shall order not more than enough controlled substance for a month’s treatment for the student.

4. Confirm the rationale for long-term controlled substances at least monthly with case conference between the Health and Wellness Director (HWD) (or designee who is authorized under his/her state license to administer controlled substances) and the prescribing health professional. Medication rationale and review includes student adherence, side effects, and whether or not the medication is leading to the desired effect.

5. Review and approve prescriptions for controlled substances by the center physician/nurse practitioner/physician assistant generated for students by health practitioners in the community or at the student’s place of residence by the center physician/nurse practitioner.

6. Store all Schedule II, Schedule III, and Schedule IV medications under a double-
lock system in a secured area of the HWC. Only Health and Wellness staff who are authorized under their state license to dispense or administer controlled medications shall have access to the controlled medications.

7. Ensure that two staff members (one must be staff authorized under their state license to dispense or administer controlled substances) receive and sign for medications received, noting the name(s) of the medications, dosage, amount, and date on a controlled substances log.

8. Maintain a log of all Schedule II, Schedule III, and Schedule IV medications. When dispensing or administering these medications by order of the clinician, the date, time, medication, and dosage must be noted on the log and the nurse dispensing or administering the medication must sign his or her full name or initial in accordance with state prescribing regulations. The log must be maintained in the locked area designated for controlled medications.

9. Document prescription orders and the administration of doses. Monthly Medication Administration Records (MAR) must be filed in the SHR. Prescription orders should be transcribed to a MAR exactly as the order reads.

10. Provide the student with required consumer medicine information in accordance with pharmacy laws each time a prescription is filled.

11. Ensure that all controlled substances are given to the correct student in the right dose and by the proper route. In cases of a medication error, the center medical provider/center dentist/center psychiatrist (if applicable), HWD, and center director must be notified. Document in the SHR. All medication errors will be immediately reported to the Regional Office and the regional nurse specialist.

12. Inventory and reconcile controlled medications at least once a week. Two authorized staff members must note the results on the controlled medications log. Any miscounts or missing medications identified during the inventory must be immediately reported to the Regional Office and regional nurse specialist by the Center Director.

13. Handle, package, store, and observe controlled substances when the HWC is closed in compliance with Federal and state pharmacy laws. Center specific policies that comply with Federal and state laws must be outlined in a SOP for prescribed controlled substances (see Chapter 5, Exhibit 5-1).

a. If applicable according to state law where the center is located, the HWD will identify and train/certify unlicensed, non-health staff to be legally authorized to observe self-administration of doses when the HWC is closed. Unlicensed staff observing medication self-administration must meet state laws, be trained, and have a personal authorization on file for this task.
b. Any medication dose observed after hours must be documented on a Controlled Substance Medication Observation Record (CMOR), and a HWC staff member should file the CMOR in the SHR at least weekly.

14. Send prescribed controlled substances home with a student when he/she leaves the center. If a student leaves center when the HWC is closed, medications must be promptly sent to the student in compliance with the sending and receiving state laws.

15. Properly dispose of controlled substances that need to be destroyed because of expiration dates, contamination, or wastage, and document such actions on the controlled substances log. The log must be signed by two staff members (one must be staff authorized under their state license to dispense or administer controlled substances).
FORM 2-01
NOTICE OF MEDICAL INFORMATION USE, DISCLOSURE, AND ACCESS

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION

Please Review Carefully

This Notice Is Required by the Health Insurance Portability and Accountability Act of 1996

We, the __________________________ Health Center, are required by law to maintain the privacy of your protected health information and to provide you, the Job Corps student, with notice of our legal obligations and privacy practices with respect to your protected health information. We are required to abide by the terms of this Notice (or any Revised Notice currently in effect). We have the right to change the terms of the Notice and to make those changes effective for all protected health information that we maintain. If we make changes to the Notice, we will issue you a Revised Notice at your assigned Job Corps location. This Notice is effective as of April 14, 2003. We may use and disclose medical information about you under certain circumstances listed below. In each case, we will share only the minimum information necessary.

Treatment, Payment, and Health Care Operations

Treatment. We may share the contents of your medical files, including date of visits, symptoms presented, diagnosis, medications prescribed, treatment given or recommended, and referrals to other health providers with other health center staff members so that we may effectively treat you and follow up on your care. In addition to sharing this information with health center nurses, doctors, dentists, mental health professionals, Trainee Employee Assistance Program (TEAP) specialists, or other health providers, we may share this information with health center clerks, receptionists, or other persons responsible for filing and entering data within the health center, and organizing patient flow and/or contacting you to set appointments or inform you of prescription availability or other medical information. We may share your prescription and other medical information with pharmacists or other providers of medicines or devices, and with center drivers who pick up medications at pharmacies or other stores, for the purpose of obtaining prescriptions, other medications, and devices for you. We may share information with medical laboratories necessary in identifying specimens for the purpose of testing. Center health care providers also may share your health information with specialists or other off-center health care providers for purposes of consultation or referral.

Payment and Health Care Operations. We may share the contents of your medical files, including referral and other information about care you received off center, with Medicaid and/or private insurance companies for the purposes of facilitating your access to health services not provided or paid for by Job Corps. We also may share information about illness or injuries you may incur in the performance of your duties with workers’ compensation coordinators, for the purpose of determining your eligibility for benefits, the payment to you of benefits, and the provision of care to you under those benefits.
**Other Uses and Disclosures for Which Consent, Authorization, or Opportunity to Agree or Object Is Not Required**

In addition to the above uses and disclosures of your medical information, federal law permits us to disclose medical information about you under the following circumstances:

- We may use or share any information required by law;
- We may share information about infection, disease, or other conditions with public health department authorized to receive such health information, as well as information about failure to follow prescribed treatments for these cases of infection or disease, to assist them in preventing or controlling health conditions and tracking vital events;
- We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services;
- We may share information for certain public health activities, including for purposes related to the quality, safety, or effectiveness of products regulated by the Food and Drug Administration;
- We may share information with government authorities about individuals we believe may be victims of abuse, neglect, or domestic violence;
- We may share information for health oversight activities, including audits, licensing, and inspections of the health center, and determinations of our compliance with the medical privacy rules by the U.S. Department of Health and Human Services;
- We may share information in certain court proceedings;
- We may share information for law enforcement purposes;
- We may share information with a coroner, medical examiner, or funeral director to enable those people to perform their jobs with respect to people who have died;
- We may share information with organ donor organizations as necessary to allow authorized organ, eye, or tissue donations from people who have died;
- We may share information for certain approved limited research purposes;
- We may share information to avert a serious threat to health or safety;
- We may share information for workers’ compensation purposes;
- We may share information for certain specialized government functions, including certain military or national security uses.

Other uses and disclosures will be made only with your written authorization. Job Corps requires you to authorize certain other uses and disclosures of your protected health information as a condition of
enrollment in Job Corps. Those uses and disclosures are outlined in a written authorization form that you have signed already, or that we will ask you to sign. You may revoke your authorization for these uses and disclosures, in writing, at any time, unless we have relied on the Authorization. Please note, however, that federal law permits Job Corps to condition enrollment in its programs on receiving a valid authorization from you of certain uses and disclosures of your protected health information. Although the health center must honor any withdrawal of authorization you make, and cannot condition treatment on your authorization, such a withdrawal may affect your continued enrollment in Job Corps. Also, you may be asked to sign other voluntary authorizations. You may revoke a voluntary authorization, in writing, at any time, unless we have relied on that authorization.

**Your Rights**

**The right to request restrictions.** You have the right to request restrictions on certain uses and disclosures we make of your protected health information for treatment, payment, or health care operations, and may request restrictions on disclosures to family members or friends relevant to your care. However, in most instances the health center is not required to agree to your request. Generally, your health information will not be disclosed to family members or friends if you object to such disclosure, but in an emergency or other circumstance in which we cannot obtain your agreement, we may disclose limited information if it appears necessary for your care, consistent with state law. In addition, in case of a disaster, your health information may be shared with the Red Cross or other public or private entities assisting in disaster relief efforts for the purpose of notifying your family members or other loved ones of your location, general condition, or death. Furthermore, if you are a minor, we may be required to share health information about you with your parent or guardian, although some types of information you may be able to restrict us from sharing with your parent or guardian. (We will follow state laws in those instances.)

**The right to receive your health information confidentially.** You have the right to receive your health information privately. For example, if you are expecting a letter containing information from your doctor to arrive at your mailbox, and you share a mailbox with others and do not wish for others to discover the letter, you may request that the letter be delivered to you in another way or at another location, or you may arrange to pick up the letter.

**The right to inspect and copy your health information.** You have the right to look at and get a copy of your health information for as long as we maintain those records. However, under the law, we may deny you access to certain types of information, including psychotherapy notes kept by mental health professionals, information compiled in anticipation of a civil, criminal, or administrative action, certain information related to clinical or research studies, and classified information. Denials of this nature are final. In addition, we may deny you access to your health information if a health care provider believes that providing the information is likely to endanger the life or physical safety of you or someone else, or, if your information refers to someone else, the access requested is likely to cause substantial harm to that person. Also, if your personal representative requests access to your health information, we may deny that person access if a health care provider believes the access is likely to cause substantial harm to you or another person. You may have denials of this nature reviewed by another health provider who was not involved in the initial denial decision, and we will abide by the decision of that reviewer.

**The right to amend your health information.** You have the right to have us amend (correct or clarify) your health information that we keep in our records, for as long as we maintain those records.
In most circumstances, however, if you ask us to change, add, or delete certain information that we did not create, or that is not a part of your record, or that you are not permitted to access, we do not have to make the amendment. Furthermore, we do not have to make any changes you request that would cause your record to be anything other than accurate and complete.

**The right to be informed of disclosures we make of your health information.** You have the right to know what health information we have given to others about you for the 6 years prior to the date of your request. Certain exceptions apply. For instance, we do not have to tell you of instances in which we have disclosed information for purposes of treatment, payment, or health care operations, or information that we gave directly to you or your representative, or certain directory information and information given to persons involved in your care, or information disclosed for national security purposes, or to law enforcement or corrections officials, or disclosures we made before we were required to comply with these notice standards.

**The right to receive a paper copy of this Notice.** You have the right to request and receive a paper copy of this notice.

**The right to complain about our use of your health information pursuant to the Health Insurance Portability and Accountability Act of 1996.** You may complain to us and to the Secretary for the U.S. Department of Health and Human Services if you believe your privacy rights pursuant to the Health Insurance Portability and Accountability Act of 1996 have been violated. To file a complaint with us or to request further information regarding your rights to privacy in your health information, please contact

(Designated health center privacy official: name, title, phone number)

In addition, you may file a complaint with the Secretary for Health and Human Services within 180 days of the date you learn of our objectionable action or omission. You must put your complaint in writing, you must name us specifically (including the name of your Job Corps center), and you must describe what we have done to which you object.
Where to File Complaints Concerning Health Information Privacy:

If your Job Corps center is located in Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, or Vermont:

Office for Civil Rights
U.S. Department of Health and Human Services
Government Center
J.F. Kennedy Federal Building, Room 1875
Boston, MA 02203
Voice Phone: (617) 565-1340
FAX: (617) 565-3809
TDD: (617) 565-1343

If your Job Corps center is located in New Jersey, New York, Puerto Rico, or Virgin Islands:

Office for Civil Rights
U.S. Department of Health and Human Services
Jacob Javits Federal Building
26 Federal Plaza, Suite 3312
New York, NY 10278
Voice Phone: (212) 264-3313
FAX: (212) 264-3039
TDD: (212) 264-2355

If your Job Corps center is located in Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, or West Virginia:

Office for Civil Rights
U.S. Department of Health and Human Services
Public Ledger Building
150 S. Independence Mall West, Suite 372
Philadelphia, PA 19106-9111
Main Line: (215) 861-4441
Hotline: (800) 368-1019
FAX: (215) 861-4431
TDD: (215) 861-4440
If your Job Corps center is located in Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, or Tennessee:

Office for Civil Rights
U.S. Department of Health and Human Services
Atlanta Federal Center, Suite 3B70
61 Forsyth Street, SW
Atlanta, GA 30303-8909
Voice Phone: (404) 562-7886
FAX: (404) 562-7881
TDD: (404) 331-2867

If your Job Corps center is located in Illinois, Indiana, Michigan, Minnesota, Ohio, or Wisconsin:

Office for Civil Rights
U.S. Department of Health and Human Services
233 N. Michigan Avenue, Suite 240
Chicago, IL 60601
Voice Phone: (312) 886-2359
FAX: (312) 886-1807
TDD: (312) 353-5693

If your Job Corps center is located in Arkansas, Louisiana, New Mexico, Oklahoma, or Texas:

Office for Civil Rights
U.S. Department of Health and Human Services
1301 Young Street, Suite 1169
Dallas, TX 75202
Voice Phone: (214) 767-4056
FAX: (214) 767-0432
TDD: (214) 767-8940

If your Job Corps center is located in Iowa, Kansas, Missouri, or Nebraska:

Office for Civil Rights
U.S. Department of Health and Human Services
601 East 12th Street, Room 248
Kansas City, MO 64106
Voice Phone: (816) 426-7278
FAX: (816) 426-3686
TDD: (816) 426-7065
If your Job Corps center is located in Colorado, Montana, North Dakota, South Dakota, Utah, or Wyoming:

Office for Civil Rights  
U.S. Department of Health and Human Services  
1961 Stout Street, Room 1185 FOB  
Denver, CO  80294-3538  
Voice Phone: (303) 844-2024  
FAX: (303) 844-2025  
TDD: (303) 844-3439

If your Job Corps center is located in American Samoa, Arizona, California, Guam, Hawaii, or Nevada:

Office for Civil Rights  
U.S. Department of Health and Human Services  
50 United Nations Plaza, Room 322  
San Francisco, CA 94102  
Voice Phone: (415) 437-8310  
FAX: (415) 437-8329  
TDD: (415) 437-8311

If your Job Corps center is located in Alaska, Idaho, Oregon, or Washington:

Office for Civil Rights  
U.S. Department of Health and Human Services  
2201 Sixth Avenue, Suite 900  
Seattle, WA  98121-1831  
Voice Phone: (206) 615-2287  
FAX: (206) 615-2297  
TDD: (206) 615-2296

If you would like to file a complaint by e-mail, send it to: OCRComplaint@hhs.gov or go to https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf.

For more information, please contact the Office for Civil Rights, Department of Health and Human Services, Mail Stop Room 506F, Hubert H. Humphrey Building, 200 Independence Avenue, SW, Washington, DC  20201.  Telephone number: (202) 205-8725.

The right to complain about our use of your health information pursuant to the Rehabilitation Act of 1973. You may complain to the Director of the Civil Rights Center, U.S. Department of Labor, if you believe your rights pursuant to the Rehabilitation Act of 1973 have been violated. To file a complaint or to request further information regarding your rights to privacy in your health information, please contact:
Director
Civil Rights Center
U.S. Department of Labor
200 Constitution Avenue, NW, Room N-4123
Washington, DC 20210
Voice Phone: (202) 693-5602
TTY: (202) 693-6515
E-mail Address: CRCexternalcomplaints@dol.gov

We are here to help you succeed and we will not take any negative action against you for making a complaint, whether you complain to us, to the Secretary for Health and Human Services, to the U.S. Department of Labor, or all three.

ACKNOWLEDGMENT OF RECEIPT OF NOTICE

I, ________________________________, have received a copy of this Notice. I have read this Notice and I understand that it explains how my health information may be used and shared with others, and what my rights are with respect to my health information.

____________________________________  ________________________________
Signature                                      Date
Form 2-02
HIV Testing Information Sheet

Human Immunodeficiency Virus (HIV) is the virus that causes Acquired Immunodeficiency Syndrome (AIDS). This virus can only be transmitted to others through sexual contact, the introduction of infected blood into the bloodstream (e.g., by the sharing of syringes or needles), or from an infected mother to her infant, either during the birth process or by breast-feeding. A person who is infected with HIV is likely to come down with AIDS. However, AIDS usually does not develop until many years after a person has been infected, and persons with HIV infection may look and feel completely healthy.

Tests are available to determine the presence of antibodies to HIV. Antibodies are substances made by the body to fight infection. The presence of antibodies (a positive antibody test) indicates that a person is infected with HIV and is capable of infecting others with the virus. However, it takes time for the body to make antibodies after the virus gets into the body. For this reason, the antibody test for a person who has recently been infected with HIV may show that a person is “negative” (does not have antibodies) or “indeterminate” (neither positive nor negative) even though that person actually carries the virus in his/her body. A test taken at a later time, when the body has had more time to make antibodies, would show that the person is positive.

If your HIV antibody test results are known, it helps your doctor decide how best to treat you for certain illnesses. If you are infected with the virus, you can receive treatment to help prevent or delay the illnesses that can occur with AIDS. It may also help you to make personal decisions if you know that you have HIV infection and could infect someone else. If your blood test is positive, Job Corps will conduct medical and psychosocial evaluations in order to provide appropriate medical care and counseling, as well as to determine whether it is appropriate for you to remain in Job Corps.

If your blood test is positive and the test results become known by others, they might think you have AIDS or that you might infect them. This may not be true, but you might be discriminated against by friends, family, employers, landlords, insurance companies, or others. Therefore, you should be extremely careful in disclosing your test results.

HIV test results and other related medical records may only be released to Job Corps staff with a need for that information for purposes of counseling, administration and delivery of health services, and to the local and/or state health department, when required by law.

Acknowledgement of receipt of information:

Student Signature       Date
DEFINITIONS AND DOCUMENTATION REQUIREMENTS RELATED TO REASONABLE ACCOMMODATIONS FOR APPLICANTS AND STUDENTS WITH DISABILITIES

PROCESS FOR AN APPLICANT OR STUDENT WITH A DISABILITY TO REQUEST REASONABLE ACCOMMODATION TO PARTICIPATE IN THE JOB CORPS PROGRAM

BACKGROUND

What is the definition of disability?\(^\text{10}\)

A disability is a physical or mental impairment that substantially limits one or more major life activities; a record (or past history) of such an impairment; or being regarded as having a disability.

What is a physical impairment?

A physical impairment is any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems:

- Cardiovascular
- Circulator
- Digestive
- Endocrine
- Genitourinary
- Hemic and Lymphatic
- Immune
- Musculoskeletal
- Neurological
- Reproductive
- Respiratory (including speech organs)
- Skin
- Special Sense Organs

What is a mental impairment?

A mental impairment is any mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

\(^{10}\) The Americans with Disabilities Act Amendments Act (ADAAA) went into effect January 1, 2009. The ADAAA makes it much easier for an individual to meet the definition of disability, be protected from discrimination, and be entitled to reasonable accommodations. Changes to this act apply to all federal disability nondiscrimination laws including the Workforce Innovation and Opportunity Act and Section 504 of the Rehabilitation Act that apply to Job Corps. While these laws are not identical, they are consistent, and have been modified to conform to the ADAAA. While all regulations that apply to Job Corps have not been updated, the ADAAA changes still apply to these regulations.
Are there conditions, situations, or orientations that are not considered physical or mental impairments?

The following conditions, situations, or orientations are not considered physical or mental impairments:

- Homosexuality and bisexuality
- Normal pregnancy
- Environmental, cultural, and economic disadvantages (e.g., a prison record or a lack of education)
- Limited English proficiency/English as a second language

In addition, federal disability nondiscrimination laws do not protect people with the following conditions, even if the conditions would otherwise satisfy the definition of “disability.”

- Transvestitism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments, or other sexual behavior disorders
- Compulsive gambling, kleptomania, or pyromania
- Psychoactive substance-use disorders resulting from current illegal use of drugs
- Environmental, cultural, or economic disadvantages (e.g., poverty, lack of education, prison record)

What are major life activities?

Major life activities include, but are not limited to: caring for oneself; performing manual tasks; seeing; hearing; eating; sleeping; walking; standing; sitting; reaching; lifting; bending; speaking; breathing; learning; reading; concentrating; thinking; communicating; interacting with others; and working. Other major life activities include the operation of a major bodily function, including functions of the immune system; special sense organs and skin; normal cell growth; and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive functions. The operation of a major bodily function includes the operation of an individual organ within a body system. This list is not exhaustive, but carries examples of some activities that can be considered.

What is a substantial limitation?

When making a determination on whether an individual is substantially limited in performing a major life activity:

- The determination requires an individualized assessment.
• The determination should not require extensive analysis.

• An impairment need not prevent, or severely or significantly limit a major life activity in order to be considered substantially limiting. Nonetheless, every impairment does not constitute a disability.

• The term “substantially limits” should be construed broadly in favor of expansive coverage; “substantially limits” is not meant to be a demanding standard.

• An impairment is a disability if it substantially limits the ability of an individual to perform a major life activity as compared to most people in the general population. An impairment need not prevent, or significantly or severely restrict the individual from performing a major life activity in order to be considered substantially limiting.

• Although determination of whether an impairment substantially limits a major life activity as compared to most people will not usually require scientific, medical, or statistical evidence, such evidence may be used if appropriate.

• An individual need only be substantially limited, or have a record of a substantial limitation, in one major life activity to be covered under the first or second prong of the definition of disability.

• When determining whether a person is substantially limited in a major life activity, the beneficial effects of mitigating measures, except ordinary eyeglasses or contact lens, will be ignored. Mitigating measures are things such as:

  o Medication, medical supplies, equipment, or appliances, low-vision devices (defined as devices that magnify, enhance, or otherwise augment a visual image, but not including ordinary eyeglasses or contact lenses), prosthetics including limbs and devices, hearing aid(s) and cochlear implant(s) or other implantable hearing devices, mobility devices, and oxygen therapy equipment and supplies;
  
  o Use of assistive technology;
  
  o Reasonable accommodations or auxiliary aids or services;
  
  o Learned behavioral or adaptive neurological modifications; or
  
  o Psychotherapy, behavioral therapy, or physical therapy.

Evidence showing that impairment would be substantially limiting without mitigating measures could include evidence of limitations that a person experienced prior to using a mitigating measure, evidence concerning the expected course of a particular disorder absent mitigating
measures, or readily available and reliable information of other types.

While the beneficial effects of mitigating measures are ignored; if the mitigating measure itself causes any limitations, they will be considered. The use of a mitigating measure cannot be required.

An impairment that is episodic or in remission meets the definition of disability if it would be substantially limiting when it is active. This means that chronic impairments with symptoms or effects that are episodic rather than present all the time can be a disability even if the symptoms or effects would only substantially limit a major life activity when the impairment is active. Examples of impairments that may be episodic include epilepsy, hypertension, asthma, diabetes, major depressive disorder, bipolar disorder, and schizophrenia.

The effects of an impairment lasting fewer than 6 months can be substantially limiting. At the same time, the duration of an impairment is one factor that is relevant in determining whether the impairment substantially limits a major life activity. Impairments that last only a short period of time are typically not covered, although they may be covered if sufficiently severe.

**Are there certain impairments that will always result in substantial limitation in performing certain major life activities?**

The following impairments are examples from the Americans with Disabilities Act Amendments Act (ADAAA) regulations of impairments that should be easily found to substantially limit a major life activity:

- Deafness substantially limits hearing
- Blindness substantially limits seeing
- An intellectual disability substantially limits brain function
- Partially or completely missing limbs or mobility impairments requiring the use of a wheelchair substantially limit musculoskeletal function
- Autism substantially limits brain function
- Cancer substantially limits normal cell growth
- Cerebral palsy substantially limits brain function
- Diabetes substantially limits endocrine function
- Epilepsy substantially limits neurological function
- Human Immunodeficiency Virus (HIV) infection substantially limits immune function
• Multiple sclerosis substantially limits neurological function
• Muscular dystrophy substantially limits neurological function
• Major depressive disorder, bipolar disorder, post-traumatic stress disorder, obsessive compulsive disorder, and schizophrenia substantially limit brain function

May the condition, manner, or duration under which a major life activity can be performed be considered in determining whether an impairment is a disability?

For conditions that are not so obviously disabilities, the regulations state that in determining whether an individual is substantially limited in a major life activity, it may be useful in appropriate cases to consider, as compared to most people in the general population:

- The condition under which the individual performs the major life activity;
- The manner in which the individual performs the major life activity; and/or
- The duration of time it takes to perform a major life activity or the amount of time the activity can be performed.

What are reasonable accommodations?

Reasonable accommodations are any changes to the environment or in the way things are customarily done, that give a person with a disability an opportunity to participate in the application process, job, program, or activity that is equal to the opportunity given to similarly situated people without disabilities. Although many people with disabilities can (and do) apply for and participate in the Job Corps program without any reasonable accommodations, barriers do exist that keep other potential applicants or students with disabilities from applying or participating, and that could be overcome with some form of accommodation. Reasonable accommodation may involve providing an appropriate service or product; modifying or adjusting a job, work/academic environment, policy, program, or procedure; or any other action that removes those barriers for the person with a disability.

Who is entitled to reasonable accommodations?

Under federal law, only a person who meets one or both of the first two prongs of the disability definition (i.e., actual disability or record of a disability) is entitled to reasonable accommodation.11

---

11 People who are regarded as having a disability are protected from discrimination by federal disability nondiscrimination laws. However, these people are not entitled to the positive actions, such as reasonable accommodations, that must be provided to people with actual, current disabilities or those with a record (past history) of a disability.
How do federal disability nondiscrimination laws relating to drug addiction and alcoholism interact with Job Corps’ Zero Tolerance Policy and alcohol-related policies?

**Drug Addiction**

The definition of “individual with a disability” under federal law explicitly excludes persons who are currently engaging in the illegal use of drugs. This exclusion means that even though a particular person’s drug addiction constitutes a disability, it is not against the law to take adverse action against that person – to separate him or her from Job Corps, or otherwise give him or her less favorable treatment than others – because of that drug addiction.

Only people who are currently using drugs illegally are excluded from protection under the relevant federal laws. The following categories of persons are considered individuals with disabilities under those laws, and are therefore protected from discrimination on the basis of the drug addiction itself:

- Persons with a drug addiction diagnosis who have successfully completed a supervised drug rehabilitation program (an in-patient, out-patient, or employee assistance program), and who are no longer using drugs illegally.

- Persons with a drug addiction diagnosis who have been rehabilitated successfully in some other way (e.g., recognized self-help programs such as Narcotics Anonymous) and who are no longer using drugs illegally.

- Persons who have a drug addiction diagnosis, are currently participating in a supervised rehabilitation program, and who are no longer using drugs illegally.

A center may request documentation that an applicant/student:

- Has a drug addiction diagnosis

- Has completed/is participating in a rehabilitation program or been rehabilitated successfully in some other way

- Is not currently using, only if an applicant/student is requesting to be considered a person with a drug addiction disability (most likely so he/she can request reasonable accommodation)

An applicant who has a diagnosis of drug addiction but is not requesting accommodation cannot be required to provide documentation that he/she is not currently using drugs. A person who casually used drugs illegally in the past but did not become addicted is not an individual with a disability, and therefore is not protected from discrimination.
Alcoholism

Even those who are currently using alcohol are protected by Federal disability nondiscrimination laws from adverse actions taken because of the alcoholism itself. However, students are subject to the center’s disciplinary policies and measures regarding the use and abuse of alcohol, as well as to Job Corps’ Zero Tolerance policy regarding the use of drugs.

It is important to understand the difference between taking adverse action against someone because of his or her alcoholism itself, and taking adverse action against him or her because of the behavior that the alcoholism causes. Taking adverse action because of someone’s behavior (rather than because of his or her status as an alcoholic) is not considered discrimination.

For example, suppose a student who is an alcoholic is discovered drinking alcohol on-center – an action that is prohibited under the center’s disciplinary policy. In this case, it is not discriminatory for the center to take action to discipline the student: the center is taking this action not because the center staff knows the student is an alcoholic, but because the student has violated the standards of conduct – in other words, because of the student’s behavior. The policy is not intended to punish students for being alcoholics; it prohibits and punishes the actual use of alcohol – in other words, the behavior. For these reasons, the policy does not violate federal disability nondiscrimination law.

POLICY

An applicant or student with a disability is entitled to request and receive reasonable accommodation to participate in the Job Corps program at any time during the admissions process or enrollment. Each center is required to have a reasonable accommodation Standard Operating Procedure (SOP). The SOP should describe the center’s process for ensuring applicants/students with disabilities who may need accommodation are engaged in an interactive process to consider/determine the functional limitations resulting from their disability and the potential accommodations that would allow them to participate in the Job Corps program. The center’s Disability Coordinators (DCs) should ensure that a reasonable accommodation process SOP is in place, and should coordinate the center’s reasonable accommodation process.

The reasonable accommodation process will have some variations depending on when the accommodation process begins, either during admissions or after enrollment. The center’s reasonable accommodation SOP, and process should include both of these situations and the following components:

- Requesting accommodation
- Determining the need for accommodation

12 As with illegal use of drugs, a person’s use of alcohol does not constitute a disability unless it is an addiction that substantially limits one or more of the person’s major life activities.
• Ensuring appropriate documentation
• Reviewing a request
• Determining reasonableness
• Entering the accommodation plan
• Notifying staff/viewing the accommodation plan
• Determining accommodation effectiveness
• Documenting the accommodation process
• Maintaining the accommodation file
• Storing accommodation and disability documentation
• Confidentiality

PROCESS

Requesting Accommodation

A reasonable accommodation request can be communicated in any form (e.g., oral, written, sign language). However, the request must be documented on the Job Corps Reasonable Accommodation Request Form – Program (included in this document). This form cannot be changed, and must be used to document the request.

The Admissions Counselor (AC) will inform each applicant of his or her right to request reasonable accommodation, and then review the request form with the applicant. If the applicant wants to request accommodation or discuss the need for accommodations with a DC, the request form should be completed. The AC may assist with completion of the request form, as necessary.

If the applicant does not want to request accommodation, the AC should inform the applicant about his or her right to request reasonable accommodation at any point during the admissions process or during enrollment in the program. If a reasonable accommodation request is made after enrollment, a DC will go through the form with the student, and may assist with its completion, as necessary. All requests for reasonable accommodation to participate in the program will be reviewed at the center level (center of assignment).
Determining the Need for Accommodation

There must be an interactive process between the center and applicant/student (and parent/guardian, when appropriate) to determine accommodation needs.

- **Applicant to Participate in Program** – If an applicant:
  - Makes an accommodation request by completing the Job Corps Reasonable Accommodation Request Form – Program;
  - Indicates on the Job Corps Reasonable Accommodation Request Form – Program s/he would like to discuss the need for accommodation with a DC; or
  - Provides documentation that indicates s/he may be an individual with a disability who may need reasonable accommodation to participate in Job Corps.

  The DC must engage the applicant in an interactive process (even if the applicant did not request accommodation) to review request and/or determine possible accommodation needs.

- **Student to Participate in Program** – Applicants are not required to request accommodation during the admissions process and once enrolled in the program may request accommodation at any time. A student may complete the request form and/or make an accommodation request to any staff person. All requests should be referred to a DC.

If an applicant/student with a disability determines s/he does not want accommodations, a DC should ensure the decline is documented by ensuring completion of either the Job Corps Reasonable Accommodation Request Form – Program or the Reasonable Accommodation Review Due To Documentation of Disability Form as appropriate.

**Ensuring Appropriate Documentation**

If an applicant makes a reasonable accommodation request, the AC should ask the applicant for reasonable documentation about his or her disability and functional limitations. A DC will gather this information if the request is made after enrollment. Only the documentation that is needed to establish that (1) a person has a disability, and (2) the disability necessitates a reasonable accommodation, may be requested. It is important to obtain this type of information since the accommodation needs of an individual with a disability will depend on his or her functional capacities and limitations rather than his or her diagnosis. The applicant/student may be provided assistance to obtain the appropriate documentation to support the request. If an applicant/student provides insufficient documentation of a disability in response to the center’s initial request, the center should explain why the documentation is insufficient and allow the person an opportunity to provide the missing information in a timely manner. A center cannot ask for documentation
when (1) both the disability and the need for reasonable accommodation are obvious, or (2) the person has already provided the center with sufficient information to substantiate that she or he has a disability and needs the reasonable accommodation requested.

DCs should not spend a lot of time analyzing whether an applicant/student meets the definition of disability or requesting extensive documentation. Instead, the focus should be on the accommodation, whether it is reasonable, whether it can be provided without an undue hardship, and whether there are other accommodations that can be considered.

The documentation about the disability and the functional limitations should come from an appropriate health-care or rehabilitation professional (e.g., physicians, psychiatrists, psychologists, nurses, physical therapists, occupational therapists, speech therapists, vocational rehabilitation specialists). In addition, if the applicant has received a past accommodation, the associated documentation should be obtained (e.g., Individualized Education Program (IEP) or 504 Plan from the school system, along with supporting educational and psychological assessments when available).

All documentation should be reviewed to ensure the accommodation requested is supported by the documentation provided. Accommodations afforded to an applicant or student must be relevant to that individual’s manifestations and functional limitations resulting from the impairment. For example, a student who has diabetes and who has been granted accommodations that includes schedule adjustments and frequent breaks related to the manifestations of his diabetes would not be entitled to the use of a calculator on the non-allowable portions of the Test of Adult Basic Education (TABE) unless there was also a corresponding disability in the area of math calculations. For examples of possible types of documentation for specific disabilities, see the Reasonable Accommodation Guidelines section of the Job Corps Disability website.

Reasonable accommodation is not provided to struggling students without disabilities. Keep in mind that reasonable accommodation has a legal foundation and is intended to provide barrier removal for some limitation imposed by a person’s disability.

If a student’s or applicant’s disability or need for reasonable accommodation is not obvious, and she or he refuses to provide the reasonable documentation requested by the center, then she or he is not entitled to reasonable accommodation. If an applicant/student suspects that he or she may have a disability that has not been diagnosed and is unable to pay for an evaluation, the AC or a DC should provide the applicant/student with referral information.

Documentation to Support Accommodations for Standardized Testing

Types of accommodations that are allowable in a standardized testing situation such as the TABE usually are more limited than in other environments such as the academic and career technical training classrooms because certain accommodations may significantly alter what the test is intended to measure. Currently, centers should be using McGraw-Hill’s guidelines on appropriate accommodations as a general guide for the types of accommodations that are allowed for use with students with disabilities during TABE testing (see Appendix 301).
Appropriate documentation must support accommodations. An accommodation cannot be provided simply because the student requests one or because staff members believe it would be helpful to a student. For example, a student with a documented reading disability would not likely be entitled to the use of a calculator. Certain accommodations are never appropriate in the standardized testing environment such as rephrasing the TABE test questions by simplifying, rewording, or otherwise changing the structure of the test and therefore impacting the standardization beyond what Job Corps allows.

**Reviewing a Request**

The Reasonable Accommodation Committee (RAC) is led by the center’s DCs and always includes the applicant or the student. The RAC’s primary functions are to:

- Review an applicant’s request or need for accommodation (if documentation of disability is present) to participate in the Job Corps program when a center has recommended denial of an application or when the center intends to enroll the individual;

- Review a student’s request or need for accommodation (if documentation of disability is present) to participate in the Job Corps program;

- Assist applicant or student in determining needed accommodations by identifying the functional limitations resulting from the disability (i.e., student cannot read print material because text appears as a series of jumbled letters and needs access to a text-reader, audio tapes, or other oral communication supports, student has mobility impairment, and needs first floor dorm room);

- Ensure accommodation review considers accessibility needs and barrier removal for all areas of the center (residential/classroom/common areas/transportation, etc.) in which it is needed;

- Meet with students when issues with implementation or effectiveness of accommodation plans are identified during the effectiveness review process and when referrals are made to the DC that indicate an accommodation plan review may be needed;

- Assist with accommodation review during the work-based learning and transition periods; or

- Review TABE waiver requests to evaluate accommodation supports and effectiveness, make recommendations about additional accommodation needs, if appropriate, and provide feedback for the regional paperwork.
Reviewing a Simple Accommodation Request

If the accommodation request is straightforward and does not involve significant expense, the review can be an informal meeting (phone or face-to-face) between a DC and the applicant/student (and parents, service providers, if applicable). Agreed upon accommodations can be determined at this meeting and approved by a DC.

Reviewing a Complex Accommodation Request with RAC

If the request involves complex accommodation issues and/or significant expense, a RAC meeting may be required. Participants will vary depending on the nature of the request, but must always include a DC (chairperson) and applicant/student and his or her parents (if the applicant/student is a minor or requests his or her parents attend the meeting). Other possible members may include:

- Academic Manager and the Health and Wellness Director, if the center has a dedicated position for a DC; otherwise, it is presumed that the Academic Manager and the Health and Wellness Director are DCs, see Chapter 2, Section 2.4, R1.
- Center Mental Health Consultant, physician, dentist, or TEAP Specialist
- Career Technical Training Manager
- Student’s counselor
- Representatives of center departments directly impacted by the accommodation request
- Community social service agency if the applicant/student is receiving benefits in the community

A DC will provide information on the applicant’s/student’s accommodation request, functional limitations, and manifestations of the disability, as appropriate. The RAC will then determine:

- Whether Job Corps can provide the requested accommodation or an alternate accommodation that is equally effective. If no specific accommodations have been requested, the RAC will assist in identifying accommodations.
- The center staff responsible for ensuring the accommodation is made and the date by which the accommodation will be in place. Accommodations for applicants should be in place by the scheduled arrival date of the applicant.
- The amount and type of contribution to be obtained from other sources toward the purchase or acquisition of the requested accommodation.
• If appropriate accommodations can be developed/agreed to at this meeting, an accommodation plan can be developed. If additional information is needed or research into specific accommodations is necessary, a DC or appropriate staff should stay in contact with the applicant/student until a plan can be developed.

A summary of any informal or formal meetings with the applicant/student should be included as a note in the Center Information System (CIS) Notes tab. RAC meeting documentation (i.e., copy of agenda/list of attendees) should be maintained for all RAC meetings. For more information on reviewing a request and the RAC meeting process see the Reasonable Accommodation Guidelines section of the Job Corps Disability website.

**Accommodation Request or Documentation of Disability within Applicant File Review**

If the center’s File Review Team has decided to recommend denial of an applicant who has a disability because it is believed that the applicant either poses a direct threat or that the applicant’s health care needs exceed those of basic care as provided within Job Corps, the center’s RAC will need to engage the applicant in the interactive process to determine whether or not accommodations would sufficiently reduce the barriers to enrollment such that the applicant can enroll in the program. Accommodation considerations within the assessment process will only include those related to the symptoms and behaviors that are presenting barriers to enrollment. For more information, see Forms 1-07, 2-04, and 2-05.

**Determining Reasonableness**

There are many gray areas in the interpretation of what constitutes a reasonable accommodation, therefore, Job Corps has no specific list of accommodations that will or will not be provided. Each request for accommodation should be evaluated individually, and a determination made regarding whether it is reasonable.

If granting a requested accommodation would pose an undue hardship or fundamental alteration to the program, Job Corps is not obligated to provide it. Undue hardship means that providing the accommodation would be unduly costly or extensive. Fundamental alteration means that providing the accommodation would alter the nature or operation of the program.

When considering if a request is an undue hardship or fundamental alteration, consider:

• What is the net cost of the accommodation, taking into consideration the availability of tax credits, deductions, or outside funding?

• What are the overall financial resources of the center, center operator, contractor, outreach and admissions agency, or placement agency; any parent companies of any of these entities; and Job Corps as a whole? Does the center have the funds to provide the accommodation? Can the National Office provide funding?

• Can other agencies/organizations provide or contribute to the cost of providing the accommodation?
• Will the accommodation allow the individual applicant to participate in and benefit from the Job Corps program?

• Could the requested accommodation benefit other persons with disabilities?

• Will the requested accommodation affect the daily operation of the center, prevent or reduce the benefit other students receive from the program, or affect the ability of staff to do their job?

In cases where the center determines that providing the accommodation would be an undue hardship or fundamental alteration, the center must take any other action that would not result in such a hardship or alteration, but would allow the applicant to participate in the program. Job Corps is required to make every effort to accommodate an applicant with a disability at the appropriate center in accordance with the assignment procedures in Chapter 1. However, if this assignment is not sensible, the applicant should be assigned to a center that offers comparable training, and is able to accommodate the applicant’s particular needs.

Funding High Cost Accommodations

Generally, centers are responsible for any costs associated with providing reasonable accommodation to students with disabilities. In rare cases, a high cost accommodation (e.g., sign language interpreter) may be needed. In these cases, if the center is unable to fund the accommodation or locate a funding source in the community, a request can be made through the appropriate Regional Office for National Office funding assistance. The Job Corps Reasonable Accommodation Funding Request Form must be used to request National Office funding. If supplemental funding is necessary after an initial request has been approved, it must be requested using the Job Corps Reasonable Accommodation Supplemental Funding Request Form. Both forms are available in this appendix, and additional guidance for completing these forms is available from the Regional Disability Coordinators.

Recommending Denial of an Accommodation

Recommending denial of an accommodation should be a rare occurrence. No accommodation can be denied at the center level. If the center feels providing the accommodation would be an undue hardship or a fundamental alteration to the nature or operation of the program and no alternate accommodation can be agreed upon, the decision must be forwarded to the Regional Director for a final decision.

Before sending a recommendation for denial to the region, center staff should contact its Regional Disability Coordinator for guidance and review the following statements to determine if the reasonable accommodation process was completed.

• The center held an interactive RAC meeting that included the applicant/student;

• The interactive process is well documented;
The RAC considered specific accommodations;

If appropriate, the center contacted the Job Accommodation Network (JAN) and documented the date, name of the JAN staff person who assisted, and JAN’s accommodation recommendations;

The reason for the recommendation for denial of the accommodation is clearly documented, and is because providing the accommodation would be an undue hardship or a fundamental alteration to program;

The center offered another solution that would permit the applicant/student to participate in the program to the greatest extent possible. The applicant’s/student’s decision to decline this offer is documented.

If the recommendation for denial is based on undue hardship due to cost, funding from the National Office was requested.

If all steps were taken, the center should complete the Accommodation Recommendation for Denial form (included in this appendix) and submit along with all other documentation/notes/forms related to the request to the Regional Office for a final decision. The Regional Director will make a determination after consultation with Regional Disability Coordinators, other appropriate staff, and the National Office (i.e., National Health Staff) as to whether there is an obligation to grant the accommodation request.

If the Regional Director determines that the accommodation should be granted, the accommodation will be provided. If the Regional Director determines that there is no obligation to grant the accommodation, the applicant/student will be provided a written statement from the Regional Office that includes the reason for the denial and why no other accommodation is possible.

The center will make every effort to respond to the request in a timely manner and will inform the applicant/student if the request is being sent to the region for review or delayed for any other reason. Centers should complete the review of an accommodation request within 30 days of the arrival of the applicant’s file on center. When this is not possible, a DC should document the reason.

**Entering the Accommodation Plan**

After accommodation determinations have been made and as soon as possible after the student enters the program, the accommodation plan will be entered in CIS using the accommodation plan icon. For students who require TABE testing accommodations, the plan will be entered prior to the administration of the first TABE test. Accommodation plans should not include information about an individual student’s diagnosis, medication needs, or other health-related history or information. The DC and student will sign the plan. A copy of the plan must be provided to the student, and the original should be maintained in the student’s accommodation
file.

**Notifying Staff/Viewing the Accommodation Plan**

As necessary (i.e., when accommodation plans are added or updated in CIS), but at least biweekly, a DC should e-mail all staff members who interact with students a list of students with accommodation plans available in the CIS, the list should specifically indicate any plans that are new or updated. Copies of these e-mails should be maintained by a DC. Managers are responsible for ensuring that approved accommodations are implemented in their areas of supervision.

Staff should access plans in CIS using the accommodation plan icon. Access to the plan’s content must be determined on a “need to know” basis. Since in most cases accommodations need to be provided throughout all departmental areas of the center, access to the plans may need to be center-wide.

**Determining Accommodation Effectiveness**

As the student participates in the program, new needs may be identified or accommodation adjustments may be required. The effectiveness of a student’s accommodation will be evaluated as part of student performance panels on a regular basis throughout his or her enrollment in Job Corps (at least every 60 days). Student and staff feedback is required as part of this process and this feedback should be documented in the accommodation file. Forms and additional guidance for supporting this process are available on the Job Corps Disability website.

*Note: Staff should not wait for a performance panel review to request a modification of an existing plan if a need for a change has been identified.*

**Documenting the Accommodation Process**

Documentation of actions and decisions can be very important if an applicant/student alleges discrimination. Therefore all interactions with the applicant/student and activities related to the provision of reasonable accommodation should be documented. The Notes tab in CIS will be used to document the process. For examples of notes, see the Reasonable Accommodation Guidelines section of the Job Corps Disability website.

**Maintaining the Accommodation File**

A separate accommodation file (similar to the student’s health record) should be maintained for each student receiving accommodation. Appropriate staff should have access to the information and medical records should be stored separately (in student’s health record).

All accommodation files will contain documents and information to support the provision of accommodation and notes/updates documenting the accommodation process. For suggested content and layout for an accommodation file, see the Reasonable Accommodation Guidelines section of the Job Corps Disability website. All suggested contents may not be required for each
accommodation file. If a different layout is preferred, it should be consistent for all accommodation files.

**Storing Accommodation and Disability Documentation**

*Storage of Accommodation Files*

Each student should have only one accommodation file, and all accommodation files must be stored as a group in a separate drawer, file cabinet, or storage room that is locked. When the student separates, the accommodation file should be sealed and sent to records to be combined with other files into a single record and stored in a central location on center. See Appendix 202 for more information on storage of disability-related information.

*Storage of Non-Health Disability Documentation, No Accommodation Plan*

If a student with a disability does not wish to receive accommodations, either Reasonable Accommodation Review/Documentation of Disability Form or a Job Corps Reasonable Accommodation Request Form – Program will be completed for the student. A “disability, no accommodations” file will be created for each student that has a disability, but no accommodation plan. This file will contain the appropriate form and any non-health disability-related documentation such as an IEP. These files should be stored in the same location as the accommodation files, but should be differentiated (e.g., stored as a group in a separate area of the cabinet or color coded).

When the student separates, these files should be sealed and sent to records to be combined with other files into a single record and stored in a central location on center. See Appendix 202 for more information on storage of disability-related information.

**Confidentiality**

Information regarding disability and prior accommodation will be discussed during the process. To maintain confidentiality, documentation is made available on a need-to-know basis only, and participants in the process should not discuss information about the request outside of the process. Those responsible for implementing the accommodation will be informed of the accommodation and the reasons for it only to the extent necessary to ensure effective implementation of the accommodation. See Appendix 202 for more information on confidentiality of disability-related information.

For more detailed information, tools, forms, tips, and resources to support the center reasonable accommodation process, see the Reasonable Accommodation Guidelines section of the Job Corps Disability website.
JOB CORPS REASONABLE ACCOMMODATION REQUEST FORM – PROGRAM

If you are a person with a disability, you may request accommodations (changes in the way things are done, or other types of help) to assist you in successfully participating in the Job Corps program. You may be qualified to receive reasonable accommodation if you ever:

- Had an IEP or 504 Plan in school
- Had special education support
- Had extra supports or pullout classes in school
- Were given extra time to complete assignments or tests in school
- Got help in a resource room in high school
- Were allowed extra time to get to and from class
- Received any adjustments to the scheduled school day for appointments or because of side effects of medication
- Were/are a client of Vocational Rehabilitation or a related program
- Receive Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)

If you are worried about talking about your disability, it is important to understand that Job Corps upholds strict policies on confidentiality, which means this information will only be shared with those who need to know. The main reason for you telling us about your disability is so you can get the support you need to participate effectively/successfully while enrolled in the Job Corps program.

In high school, you may have gone to a separate resource room for instruction if you received special education services. In Job Corps, students with disabilities attend all the same classes and participate in all of the same programs as students without disabilities.

Depending on your disability and the type of accommodation you are asking for, we may ask you to provide documentation about your disability and how it affects you so we can determine your need for reasonable accommodation. Each center has staff that can assist you with the accommodation process.

If you indicate that you would like accommodations, would like to discuss accommodations with a Center Disability Coordinator, or provide information indicating that accommodations may be necessary, a Center Disability Coordinator will contact you to talk about the need for accommodation.

You are not required to have an accommodation plan. Should you choose to have an accommodation plan, you will work jointly with a Center Disability Coordinator to develop one. If an accommodation you have requested cannot be provided because it is unreasonable, every effort will be made to offer you an equally effective alternate accommodation that is reasonable.

Your Admission’s Counselor or a Center Disability Coordinator (if you are requesting accommodation after arrival on center) will guide you through completion of this form.
SECTION A – APPLICANT/STUDENT

<table>
<thead>
<tr>
<th>Name:</th>
<th>ID#:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

☐ I would like to request accommodations to participate in the Job Corps program. *(Please list the accommodations requested.)*
  - 
  - 
  - 

☐ I think I may need an accommodation, but I am not sure what I will need. I would like to talk directly with a Center Disability Coordinator about my accommodation needs.

Applicant/Student Signature: ____________________________ Date: ____________

Parent/Guardian Signature: ____________________________ Date: ____________

*The Admission’s Counselor should forward the center this form and related documentation in the sealed envelope containing health/disability information.*

SECTION B – DISABILITY COORDINATOR

I have met with the applicant/student ☐ by telephone ☐ in person to discuss his or her accommodation needs. The applicant/student:

☐ Has a ☐ drafted agreed upon accommodation plan pending enrollment* or has an ☐ agreed upon accommodation plan.

☐ Does not wish to receive accommodations. The applicant/student has been informed that s/he may request reasonable accommodation at any time.

☐ The center cannot agree to an accommodation plan. The Accommodation Recommendation for Denial form and related documentation are being sent to the Regional Office for review.

Applicant/Student Signature: ____________________________ Date: ____________

Parent/Guardian Signature: ____________________________ Date: ____________

Disability Coordinator Signature: ____________________________ Date: ____________

*Upon enrollment, the student’s plan is entered into CIS, printed out and the student asked to review and sign the printed copy if in agreement. The student is given a copy of the signed plan.*
REASONABLE ACCOMMODATION REVIEW/ DOCUMENTATION OF DISABILITY FORM

Job Corps policy requires that the Center Disability Coordinators engage an individual in the interactive reasonable accommodation process if the applicant or student either requests an accommodation (see the Job Corps Reasonable Accommodation Request Form–Program) or provides documentation of a disability. Center Disability Coordinators must use this form to document the interactive process for an applicant or student who has not requested accommodations, but who has provided documentation of the disability.

<table>
<thead>
<tr>
<th>Name:</th>
<th>ID#:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Phone:</th>
<th>Email:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

☐ Documentation source(s) (e.g., IEP, Chronic Care Management Plan, health documentation, etc.)
  •
  •

I have met with the applicant/student ☐ by telephone ☐ in person to discuss his or her accommodation needs. The applicant/student:

☐ Has a ☐ drafted agreed upon accommodation plan pending enrollment* or has an ☐ agreed upon signed accommodation plan.

☐ Does not wish to receive accommodations. The applicant/student has been informed that s/he may request reasonable accommodation at any time.

☐ The center cannot agree to an accommodation plan. The Accommodation Recommendation for Denial Form and related documentation are being sent to the Regional Office for review.

Applicant/Student Signature

Date

Parent/Guardian Signature

Date

Disability Coordinator Signature

Date

*Upon enrollment, the student’s plan is entered into CIS, printed out and the student asked to review and sign the printed copy if in agreement. The student is given a copy of the signed plan and the original is stored in the accommodation file.
JOB CORPS REASONABLE ACCOMMODATION FUNDING REQUEST FORM

Centers are responsible for any costs associated with providing reasonable accommodation to an applicant or student with a disability. If a center cannot fund an accommodation or locate a funding source in the community, a request can be made through the appropriate Regional Office for National Office funding assistance for high-cost accommodations (those greater than $5,000).

All requests for funding assistance should be made as part of the accommodation process. Funding requests for accommodations already provided will not be considered. National Office funding for medications and personal use items is not available. This form can only be used to request funding assistance for an individual applicant or student. No requests that contain multiple students on the same form will be considered.

Please complete the appropriate section of the following form. All requests should be expedited so as not to unreasonably delay entry or provision of accommodation to the applicant/student.

<table>
<thead>
<tr>
<th>A. CENTER DISABILITY COORDINATOR REQUEST</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Complete this section of the form and send it to your Regional Disability Coordinator within 7 days of the applicant’s or student’s reasonable accommodation committee meeting. You should include the applicant’s IEP or other documentation that indicates the applicant’s functional limitations and any past accommodations. You must contact your Regional Disability Coordinator for guidance on completing this form and providing supporting documentation.</em></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Center:</th>
<th>Center Disability Coordinator:</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Applicant/Student Name:</td>
<td>Date File Received on Center:</td>
</tr>
<tr>
<td>Accommodation Request Date:</td>
<td>RAC Meeting Date(s) and Attendees:</td>
</tr>
</tbody>
</table>

Describe the nature of the applicants/student’s disability and resulting functional limitation(s).

In the space below, list each accommodation with a one-time fixed cost (e.g., software, equipment, etc.) that is being requested and provide the vendor estimates for these items with supporting documentation that was used to determine these costs. For accommodations requiring on-going costs (e.g., sign language interpreters), these costs should be estimated for a one-year period utilizing the Cost Analysis Form that will be provided to you by your Regional Disability Coordinator. This form must be completed and submitted with this funding request.

<p>| Accommodation: | One-time Fixed Cost: |
| Accommodation: | One-time Fixed Cost: |
| Accommodation: | One-time Fixed Cost: |
| Accommodation: | One-time Fixed Cost: |
| Accommodation: | On-going Cost: |
| Accommodation: | On-going Cost: |</p>
<table>
<thead>
<tr>
<th>Total Estimated Fixed Costs:</th>
<th>Total Estimated On-going Costs:</th>
<th>Total Estimated Costs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>List other possible funding sources consulted along with their contact information. If any funding is being provided by these sources, please list amount.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| How will this/these accommodations remove or minimize the barriers presented by the applicant’s/students’ functional limitation(s)? | | |

| Were any alternate accommodations considered? If yes, list and describe why not chosen. | | |

| Could the requested accommodation(s) benefit other students with disabilities enrolled in the program? If yes, describe the benefit. | | |

If you are requesting funding for a sign language interpreter, you must review the Deaf/Hard of Hearing Guidance available on the Job Corps Disability website, including the guidance on interpreting services. A DC must have the applicant/student complete the interview form available on the overview page of the guidance. This form should be included with your request.

Date Guidance reviewed:
List any other accommodations that will/are being provided.

Disability Coordinator Signature:  
Center Director Signature:

Date Forwarded to Regional Disability Coordinator:

### B. REGIONAL DISABILITY COORDINATOR REVIEW

Please review the center’s request. If the center section of the form is not complete or inadequate documentation/information has been provided, please contact the Center Disability Coordinator to resolve these concerns. If the center section of the form is complete and adequate documentation/information has been provided, complete this section of the form and send it with a summary of your review to the Regional Office Program/Project Manager and cc National Health Staff within 7 days of receipt from the center.

Regional Disability Coordinator:  
E-mail:

Phone:  
Date Request Received:

Date Request Reviewed:  
Date Forwarded to Regional Office:
### C. REGIONAL PROGRAM/PROJECT MANAGER REVIEW

Please review the center’s request. If the sections A or B of the form are not complete or inadequate information has been provided, please contact the Regional Disability Coordinator to resolve these concerns. If sections A and B of the form are complete and adequate documentation/information has been provided, **complete this section of the form and send to National Health Staff at the address below within 5 days of receipt from the Regional Disability Coordinator.**

<table>
<thead>
<tr>
<th>National Health Staff</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Department of Labor</td>
<td></td>
</tr>
<tr>
<td>Office of Job Corps</td>
<td></td>
</tr>
<tr>
<td>200 Constitution Avenue, NW, Room N-4507</td>
<td></td>
</tr>
<tr>
<td>Washington, DC 20210</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program/Project Manager:</th>
<th>Phone:</th>
<th>Date Request Received:</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail:</td>
<td>Date Request Reviewed:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date Request Received:</th>
<th>Date Forwarded to National Office:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Director Signature:</td>
<td>Program/Project Manager Signature:</td>
</tr>
</tbody>
</table>

### D. NATIONAL HEALTH STAFF REVIEW

Please review the center’s request and supporting documentation. If the required signatures are missing, or additional information is needed, please return the form to the Regional Disability Coordinator to resolve these concerns. If the previous sections of the form are complete and adequate information has been provided, draft an approval letter and begin the National Office signature process **within 3 days of receipt of form from the Regional Program/Project Manager.**

<table>
<thead>
<tr>
<th>National Office Health Staff Person:</th>
<th>Position:</th>
<th>Date Request Received:</th>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Request Reviewed:</td>
<td>Date Approval Letter Drafted:</td>
<td>Amount Approved (if different from original request, please explain):</td>
<td></td>
</tr>
</tbody>
</table>

### E. NATIONAL OFFICE SIGNATURE APPROVAL PROCESS

National Health staff will coordinate the signature approval process in the following order: the National Health and Wellness Director, Division Chief, Budget Chief, Deputy Director, and National Director. **Complete this section of the form within 7 days of beginning the signature approval process.**

<table>
<thead>
<tr>
<th>Health and Wellness Director Signature:</th>
<th>Date:</th>
<th>Division Chief Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget Chief Signature:</td>
<td>Date:</td>
<td>Deputy Director Signature:</td>
<td>Date:</td>
</tr>
<tr>
<td>National Director Signature:</td>
<td>Date:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### F. NATIONAL OFFICE FINAL DISPOSITION

If funding is approved, National Health staff will provide signed documentation to the Budget Chief, Regional Office Program/Project Manager, Center Disability Coordinator, and Regional Disability Coordinator. If the request is denied, National Health staff will notify the Regional Office Program/Project Manager, Center Disability Coordinator, and Regional Disability Coordinator.

<table>
<thead>
<tr>
<th>National Health Staff Making Notification:</th>
<th>Position:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>E-mail:</td>
</tr>
<tr>
<td>Date Notification Provided:</td>
<td>National Health Staff Signature:</td>
</tr>
</tbody>
</table>
**JOB CORPS REASONABLE ACCOMMODATION SUPPLEMENTAL FUNDING REQUEST FORM**

Please complete this form to request supplemental funding for an accommodation funding request that has been approved using the Job Corps Reasonable Accommodation Funding Request Form. If this is a new accommodation funding request or all funds have been used from your initial request, complete the Job Corps Reasonable Accommodation Funding Request Form.

<table>
<thead>
<tr>
<th>A. CENTER DISABILITY COORDINATOR REQUEST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete this section of the form and send it to your Regional Disability Coordinator and cc the Regional Office Program/Project Manager. Attach the most recent follow up you provided to your Regional Disability Coordinator and the student’s accommodation plan.</td>
</tr>
<tr>
<td>Center Disability Coordinator:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>Describe the accommodation that supplemental funding is being requested for and why additional funding is being requested (attach supporting documentation).</td>
</tr>
<tr>
<td>Amount of Additional Funding Being Requested:</td>
</tr>
<tr>
<td>Center Director Signature:</td>
</tr>
<tr>
<td>Disability Coordinator Signature:</td>
</tr>
<tr>
<td>Date forwarded to Regional Disability Coordinator:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. REGIONAL DISABILITY COORDINATOR REVIEW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please review the center’s request. If the center section of the form is not complete or inadequate information has been provided, please contact the Center Disability Coordinator to resolve these concerns. If the center section of the form is complete and adequate information has been provided, complete this section of the form and send it to the National Health Staff and cc the Regional Program/Project Manager within 7 days of receipt from the center.</td>
</tr>
<tr>
<td>Regional Disability Coordinator:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>Date Request Reviewed:</td>
</tr>
<tr>
<td>Regional Disability Coordinator Signature:</td>
</tr>
</tbody>
</table>
ACCOMMODATION RECOMMENDATION FOR DENIAL FORM

<table>
<thead>
<tr>
<th>Center:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant/Student:</td>
<td>ID#:</td>
</tr>
<tr>
<td>Regional Office:</td>
<td>Date Submitted to Regional Office:</td>
</tr>
</tbody>
</table>

If this request is for an applicant and you have already completed the Applicant File Review Center Recommendation for Denial Form, please attach this form to it and skip to Section B. If this request is for a student, please complete Sections A through C.

Section A

**Reasonable Accommodation Committee Participants**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Position:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Position:</td>
</tr>
<tr>
<td>Name:</td>
<td>Position:</td>
</tr>
<tr>
<td>Name:</td>
<td>Position:</td>
</tr>
</tbody>
</table>

**Summarize the Applicant’s Input:**

Section B

Please list any accommodations that the center has identified as being unreasonable and then identify any alternative options that are deemed reasonable that the applicant rejected. If none can be identified, please state none and explain why in the Summary section of the document.

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>Applicant Requested?</th>
<th>Alternative Options</th>
<th>Basis for Unreasonableness</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Yes ☐ No</td>
<td></td>
<td>☐ Unduly costly</td>
</tr>
<tr>
<td></td>
<td>☐ Yes ☐ No</td>
<td></td>
<td>☐ Fundamental Alteration</td>
</tr>
<tr>
<td></td>
<td>☐ Yes ☐ No</td>
<td></td>
<td>☐ Unduly costly</td>
</tr>
<tr>
<td></td>
<td>☐ Yes ☐ No</td>
<td></td>
<td>☐ Fundamental Alteration</td>
</tr>
</tbody>
</table>

Section C

Please show calculated costs for each accommodation being recommended for denial that has been identified as unduly costly and/or document why the accommodation requires a fundamental alteration to the program.

**Cost Analysis or Fundamental Alteration**
Center Director’s Signature:

Signature  Date

<table>
<thead>
<tr>
<th>Accommodation</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Concur with Recommendation</td>
</tr>
<tr>
<td></td>
<td>Concur with Recommendation</td>
</tr>
<tr>
<td></td>
<td>Concur with Recommendation</td>
</tr>
</tbody>
</table>

*If the region does not support the recommendation for denial of the accommodation(s), then the center must be notified that it is responsible for providing the requested/agreed upon accommodation.
FORM 2-04
INDIVIDUALIZED ASSESSMENT OF POSSIBLE DIRECT THREAT

Purpose

To provide additional information and guidance on the direct-threat assessment process currently outlined in Chapter 1, Section 1.5, R4. This supersedes information in PRH Change Notice 11-03.

Background

Job Corps requires, as a qualification standard, that an applicant not pose a direct threat to the health or safety of himself/herself or others, including students and staff. Like any qualification standard, this requirement must apply to all applicants, not just to those with disabilities. If, however, an individual poses a direct threat as a result of a disability, Job Corps must determine whether a reasonable accommodation would either eliminate the risk or reduce it to an acceptable level.

This document provides Job Corps Health and Wellness staff, including Trainee Employee and Assistance Program (TEAP) specialists, with guidance designed to help them properly and lawfully assess an individual applicant’s ability to safely participate in the Job Corps program.

If the assessor determines that the individual poses a direct threat and the threat results from a disability, the assessor must consider whether any accommodations or modifications would reduce the risk, and list any suggested accommodations or modifications. Please note that the assessor must not consider whether, in his/her view, a particular accommodation or modification is “reasonable;” that determination must be made by the Center Director or his/her designee, on the basis of a number of specific factors that are required by law.

Instructions

The attached form may be used to conduct an individualized assessment of an applicant’s possible direct threat to self or others.

Federal disability nondiscrimination laws define a “direct threat” as a significant risk of substantial harm to the health and safety of the individual or others that cannot be eliminated or reduced by reasonable accommodation or modification. A “significant risk” means a high, not a slight, probability; a speculative or remote risk is insufficient.

Determining whether an individual poses a significant risk of substantial harm to himself/herself or others must be made on a case-by-case basis. Job Corps should identify the specific risk posed by the disability. For individuals with psychiatric disabilities, Job Corps must identify the specific behavior of the individual that would pose the direct threat. Federal disability nondiscrimination laws make clear that an individual does not pose a direct threat simply because he or she has a history of psychiatric disability, or is currently receiving treatment for a psychiatric disability.

When evaluating whether an individual with a disability or medical condition poses a direct
threat, please keep in mind that there are special rules governing when disability-related inquiries, i.e., questions which are likely to elicit information about a disability can be made.

- In the context of evaluating an applicant for Job Corps, a direct-threat assessment may be done whenever Job Corps believes that a known or apparent disability or medical condition poses a direct threat to the health or safety of the individual or others. This typically will occur: (1) after the applicant has received conditional assignment to a Job Corps center and has completed the questions on the “Job Corps Health Questionnaire (ETA 6-53);” and (2) after specific, objective, factual information about that particular conditionally enrolled applicant is gathered that is medically related to any “yes” responses given to the questions in sections 8 or 9 of the questionnaire; if (3) the initial review of this specific, objective, factual information supports a reasonable belief that the conditionally enrolled applicant may have a medical condition or disability that poses a significant risk of substantial harm to the health or safety of the individual or others, i.e., direct threat. If all of these criteria are satisfied, the Health and Wellness Director will forward the applicant’s information to the appropriate licensed health provider employed by the center for a detailed direct-threat assessment.

Who May Conduct the Assessment?

The clinical assessment of risk and degree of potential harm that may be caused by the individual’s medical condition or disability is generally a medical matter properly determined by licensed health providers. Such providers employed by Job Corps include nurses, physicians, Center Mental Health Consultants, dentists, and TEAP specialists. This group, therefore, has a significant role to play in determining whether, in a given Job Corps setting, a particular individual’s medical condition or disability poses a significant risk of substantial harm to the health or safety of himself/herself or others. Medical health conditions that may pose a direct threat should be assessed by nurses and/or physicians; mental health conditions should be assessed by mental health consultants; oral health conditions should be assessed by dentists; and conditions related to substance use should be assessed by TEAP specialists. In some cases, it may be necessary to consult an outside specialist with expertise in the particular medical condition or disability and its effects.

Basis for the Assessment

The determination that an individual has a medical condition or disability that poses a “direct threat” must be based on an individualized assessment of the individual’s present ability to safely participate in the Job Corps program. This assessment must be made by a licensed health provider, based on a reasonable medical judgment that relies on the most current medical knowledge and the best available objective evidence. Before conducting a direct-threat assessment, the assessor may need to educate himself/herself about the current state of medical knowledge, and about the specific facts of the particular individual’s medical history and/or the circumstances in which he or she has been or will be placed in the Job Corps program.

As noted above, the assessment must focus on the current medical condition or disability of the
specific individual named on the form. The determination cannot be based on generalizations about the medical condition or disability; the assessor must identify the specific risk that is posed by the medical condition or disability of the named individual in the applicable Job Corps context. Additionally, the harm must be serious and likely to occur, not remote and speculative. Subjective perceptions, irrational fears, patronizing attitudes, and stereotypes have no place in the assessment process.

Factors to Be Considered

In determining whether an individual has a medical condition or disability that poses a direct threat, the assessor must consider four specific factors: duration of the risk, nature and severity of the potential harm; likelihood that the potential harm will occur; and imminence of the potential harm.

If the assessor considers these four factors and determines that a direct threat is posed by the medical condition or disability, he/she must consider whether the risk can be eliminated or reduced to an acceptable level by reasonable accommodation or modification.

Relevant factors in making the direct threat assessment (including the consideration of whether the risk may be lessened or eliminated) may include:

- Input from the individual with the medical condition or disability
- The medical history of the individual, including his or her experience in previous situations similar to those he or she would encounter in the program
- Opinions of medical doctors, rehabilitation counselors, or therapists who have expertise in the condition involved and/or direct knowledge of the individual

Under federal disability nondiscrimination laws, the burden is on Job Corps to prove that a particular individual has a medical condition or disability that poses a direct threat. This means that if the objective, factual evidence is equivocal, or is insufficient to prove that the participation of that specific individual would pose a direct threat, the assessor must assume that no direct threat exists.

The four factors for determining direct threat are described below.

1. **Nature and severity of the risk.** In the professional judgment of the assessor:

   a. What kind of harm is potentially posed by this individual’s medical condition or disability? List the specific symptoms or behaviors and the information on which the judgment is based.

   b. What is the seriousness of the potential harm in this particular case (e.g., death, incapacitation, serious injury, minor injury/emotional distress)? List the specific information on which the judgment is based.
2. **Duration of the risk.** In the professional judgment of the assessor, how long will the risk last? List the specific information on which the judgment is based.

3. **Likelihood that the potential harm will occur.** In the professional judgment of the assessor, is the likelihood that potential harm will occur high, moderate, or low? List the specific information on which the judgment is based.

4. **Imminence of the potential harm.** In the professional judgment of the assessor, how soon is the harm likely to occur? List the specific information on which the judgment is based.

Taking all four of these factors into consideration, the assessor should determine whether the applicant’s condition poses a significant risk of substantial harm.

**Accommodations or Modifications**

If the individual is a person with a disability, the center’s reasonable accommodation team must convene and consider accommodations and/or modifications that the individual may need. See Form 2-03 for definition of a disability. Once the accommodations and/or modifications have been identified, the qualified licensed professional who conducted the original assessment must review the previous findings to each of the factors giving consideration to the identified accommodations to determine whether or not the accommodations and/or modifications eliminate the threat or reduce it to below the level of threat.

If it is determined that the accommodations and/or modifications will remove the barriers to enrollment and are considered unreasonable, then the team must forward the list of identified accommodations and/or modifications to the Center Director for a “reasonableness” and/or undue hardship determination (see below). If the accommodations and/or modifications identified would not eliminate the threat or sufficiently reduce it to below the level of threat, then the reasonable accommodation team (inclusive of the licensed professional) must indicate which accommodations and/or modifications would be insufficient and explain why.

**Examples of Accommodation/Modification Consideration for Direct Threat**

- Schedule adjustments to allow the applicant to attend necessary off-center appointments

- Shortened training day or later start to the training day to adjust for medication side-effects

- Passes during the training day to allow applicant to leave class and meet with counselor to de-escalate behaviors as needed

Every effort should be made to identify appropriate accommodations and/or modifications, and reasonable accommodation teams are encouraged to use identified resources (e.g., Job
Accommodation Network) to assist them, as appropriate.

**Center Director Reasonableness Determination**

If there is a recommendation for an applicant to be enrolled with accommodations or modifications which you believe are not reasonable and/or pose an undue hardship, the **Center Director is responsible for making that determination** using the “Accommodation Recommendation of Denial Form” found on the Job Corps Disability website and including that form along with the applicant file that is being submitted to the Regional Office with a recommendation for denial. The final determination is made by the Regional Office.

Guidance on how to make this determination is available in the “Evaluating a Request and Denying a Request” sections of Form 2-03. Please attach the completed “Accommodation Recommendation of Denial Form” found on the Job Corps Disability website.

FORM FOR INDIVIDUALIZED ASSESSMENT OF POSSIBLE DIRECT THREAT

Applicant’s Name: ___________________________ Date of Review: _______________________

Center Name: _____________________________ ID #: ___________________________

Interview Conducted By: ☐ Telephone ☐ In Person ☐ Videoconference

In determining whether, in your professional judgment, the individual named above has a medical condition or disability that poses a direct threat, consider the following and respond accordingly.

Factors to be considered in determining whether a “significant risk of substantial harm” exists include: (1) duration of the risk, (2) nature and severity of the potential harm, (3) likelihood that the potential harm will occur, and (4) imminence of the potential harm.

Under the law, the burden is on Job Corps to prove that a specific individual poses a direct threat. Therefore, if the objective, factual information about the specific individual named above is equivocal, or is insufficient to prove that a direct threat exists, you must assume that the individual’s disability or medical condition does not pose a direct threat.

If you determine that a “significant risk of substantial harm” exists, consider whether any accommodations or modifications would reduce the risk, and list any suggested accommodations or modifications. Do not consider whether, in your view, a particular accommodation or modification is “reasonable.” That determination must be made by the center director or his/her designees.

1. What is the nature and severity of the potential harm?

   a. What kind of harm is potentially posed by this individual’s medical condition or disability?
      (Check the specific symptom(s) or behavior(s) or list under "Other")

      ☐ Abusive Behavior Towards Authority and/or Peers
      ☐ Drug and Alcohol Use/Dependence
      ☐ Homicidal Behavior
      ☐ Paranoid Thinking
      ☐ Self-Injury
      ☐ Serious or Life Threatening Medical Condition
      ☐ Severe Sensory Impairment
      ☐ Severely Impaired Concentration
      ☐ Severely Impaired Impulse Control
      ☐ Severely Impaired Judgment
      ☐ Suicidal Behavior
      ☐ Threat of Sexually Inappropriate Behavior
      ☐ Threat of Violence – Assaultive Behavior
      ☐ Unpredictable Changes in Behavior
      ☐ Other (specify): ___________________________
b. What is the seriousness of the potential harm in this particular case (e.g., death, incapacitation, serious injury, minor injury/emotional distress)?

________________________________
________________________________
________________________________
________________________________
________________________________
________________________________

2. What is the duration of the risk (i.e., how long will the risk last)?

________________________________
________________________________
________________________________
________________________________
________________________________
________________________________

3. What is the likelihood that the potential harm will occur (i.e., high, moderate, or low)?

________________________________
________________________________
________________________________
________________________________
________________________________
________________________________

4. What is the imminence of the potential harm (i.e., how soon is the harm likely to occur)?

________________________________
________________________________
________________________________
________________________________
________________________________
________________________________

5. Reasonable Accommodation Consideration

Is this applicant a person with a disability? □ Yes □ No
(i.e., documentation of a mental health, medical, substance-abuse, cognitive, or other type of disability is present in the applicant file or the disability is obvious (i.e., blind, deaf).

If no, please skip to #6. If yes, convene the reasonable accommodation committee (RAC) along with the applicant and list below any accommodations and/or modifications discussed with the applicant that could either remove or reduce the direct threat.

Note: Accommodations or modifications are not things that treat the impairment; they are things that will help the individual participate in the program. See Program Instruction 08-26 “Reasonable Accommodation and Case Management” for guidance.

☐ The RAC has been unable to identify any accommodations appropriate to support this applicant.
☐ The following accommodations/modifications listed below have been discussed with the applicant and considered as a part of this assessment:

* Please avoid suggesting extreme accommodations already known to likely be unreasonable unless the applicant has requested a specific support (i.e., 24 hour supervision). If unsure if a support or modification is really an accommodation or is actually a case management support, please contact your regional health and disability consultants for assistance.

Based on the specific symptoms and/or behaviors checked in Section 1a, please check the appropriate accommodations below discussed with the applicant. Please note: This list is not all inclusive. These are suggestions for your use and you may need to consider functional limitations and accommodations beyond this list which can be entered in the “Other” section.

**Are there any changes we can make to our center policies, procedures, or practices to eliminate or reduce the level of threat?**

- Schedule adjustments to allow the student to attend necessary off-center appointments □ Yes □ No
- Shortened training day or later start to the training day to adjust for medication side effects □ Yes □ No
- Modified first 30 days on center with a reduction in tasks to minimize stress □ Yes □ No
• Provide applicant with pass to leave class if he/she begins to feel anxious, angry or upset and go to designated “calm down” area □ Yes □ No
• Allow frequent breaks during the day □ Yes □ No
• Allow telephone calls during work hours to doctors and others for needed support □ Yes □ No
• Reduce mandatory participation in large group activities □ Yes □ No
• Provide additional orientation on conduct and behavioral expectations □ Yes □ No
Other:

<table>
<thead>
<tr>
<th>Are there any physical changes or placement considerations in the dorm we can make to eliminate or reduce the level of threat?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide single dorm room □ Yes □ No</td>
</tr>
<tr>
<td>• Modified door/window locks for safety □ Yes □ No</td>
</tr>
<tr>
<td>• Placement in residential dorm with fewer students and/or more experienced Residential Advisors (RAs)/Residential Counselors (RCs) □ Yes □ No</td>
</tr>
<tr>
<td>• Provide dorm room closer to RA’s/RC’s office □ Yes □ No</td>
</tr>
<tr>
<td>• Allow mobility coach □ Yes □ No</td>
</tr>
<tr>
<td>• Allow refrigerator in room □ Yes □ No</td>
</tr>
<tr>
<td>Other:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Can we adjust our level of supervision or structure at the center to eliminate or reduce the level of threat?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide staff mentor as needed (like a job coach) □ Yes □ No</td>
</tr>
<tr>
<td>• Provide student mentor as needed □ Yes □ No</td>
</tr>
<tr>
<td>Other:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Can our instructors and/or RA/RC staff adjust their communication methods in a way to eliminate or reduce the level of threat?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide detailed guidance □ Yes □ No</td>
</tr>
<tr>
<td>• Provide frequent feedback □ Yes □ No</td>
</tr>
<tr>
<td>• Provide praise and positive reinforcement □ Yes □ No</td>
</tr>
<tr>
<td>Other:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Is there any special equipment or device to consider that can eliminate or reduce the level of threat?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide visual barriers to reduce startle responses □ Yes □ No</td>
</tr>
<tr>
<td>• Use of headphones to minimize distractions □ Yes □ No</td>
</tr>
<tr>
<td>Other:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Allow special medical equipment in room and in trade.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Permission to use a service animal □ Yes □ No</td>
</tr>
<tr>
<td>Other:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Summarize any special considerations and findings of the RAC as well as the applicant’s input:</th>
</tr>
</thead>
</table>

*Please Note: Job Corps cannot impose accommodations upon an individual. If the applicant does not accept*
or agree to a specific accommodation, there is no need to consider that specific accommodation in your
determination of whether the accommodations listed will reduce the barriers to enrollment sufficiently or not
nor is there a need to complete a reasonableness review related to that specific accommodation.

<table>
<thead>
<tr>
<th>Reasonable Accommodation Considerations:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the applicant participate in the RAC meeting?</td>
</tr>
<tr>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>
| *(Note: The applicant must be a part of the discussion for reasonable accommodation).*

<table>
<thead>
<tr>
<th>RAC Participants:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Position:</td>
</tr>
<tr>
<td>Name: Position:</td>
</tr>
<tr>
<td>Name: Position:</td>
</tr>
</tbody>
</table>

If there is a recommendation for an applicant to be enrolled with the accommodations or modifications listed
in #5 above which you believe are not reasonable and/or pose an undue hardship, the **Center Director** is
responsible for making that determination using the “Accommodation Recommendation of Denial Form”
found on the Job Corps Disability website and including that form along with the applicant file that is being
submitted to the regional office with a recommendation for denial. The final determination is made by the
regional office.

Guidance on how to make this determination is available in the “Evaluating a Request and Denying a
Request” sections of Form 2-03. Please attach the completed “Accommodation Recommendation of Denial
Form.”

If there are agreed upon accommodations between the RAC and applicant listed above, then consider whether
those accommodations reduce or eliminate the direct threat to allow for the applicant to be enrolled.

- If the accommodations would sufficiently reduce or eliminate the direct threat, then you do not need to
  complete the remainder of this assessment and the center can assign the applicant a start date. Retain all the
  paperwork included in completing this assessment within the applicant’s Student Health Record.
- If the accommodations would NOT sufficiently reduce or eliminate the direct threat, please proceed to #6.

6. **Based on the factors above, does the named individual have a medical condition or disability that poses a
   significant risk of substantial harm to the safety of himself/herself or of others if he or she participates in
   Job Corps?**

  ☐ In my professional judgement, the individual’s participation poses a direct threat.
  ☐ In my professional judgement, the individual’s participation does not pose a direct threat.

---

**Printed or Typed Name and Title of Licensed Health Provider Completing Form**

**Signature of Licensed Health Provider Completing Form**

**Date**
FORM 2-05
HEALTH CARE NEEDS ASSESSMENT

Purpose

To provide additional information and guidance on the health care needs assessment process currently outlined in Chapter 1, Section 1.5, R4.

Background

Based on a review of previous applications, Job Corps has learned that the majority of applicants’ treatment and/or monitoring needs can be met, but there may be situations in which a particular applicant’s needs are beyond what the Job Corps’ health and wellness program can provide as defined as basic health care in Exhibit 2-4: Job Corps Basic Health Care Responsibilities. Current disability data indicate that the majority of our applicants with medical, mental health, oral health, and substance abuse conditions have stable health and require only routine and episodic health care interventions with accommodations. However, a small percentage of applicants may have complex, newly diagnosed, persistent or recurring medical, mental health, oral health, and/or substance abuse health care issues that require services and/or care management beyond Job Corps’ basic health care as determined Job Corps health and wellness staff.

This document provides guidance to Job Corps health and wellness staff on how to determine whether Job Corps can meet the medical, mental health, oral health, and/or substance abuse treatment/monitoring needs of a particular applicant.

This determination is derived in part by a review of the “Job Corps Health Questionnaire (ETA 6-53).”

The “Job Corps Health Questionnaire (ETA 6-53)” serves three main purposes:

1. Determine the health care needs of the applicant and assist in the assessment of whether Job Corps can meet those needs

2. Alert center staff to the potential need for evaluation of direct threat to self or others

3. Obtain consent for required routine medical assessments and/or consent to receive basic health care services

If the individual is a person with a disability, the center’s reasonable accommodation committee (RAC) must convene and consider accommodations and/or modifications that the individual may need. Before making a recommendation about the applicant’s enrollment, the qualified licensed professional who conducted the original assessment must review the previous findings giving consideration to the identified accommodations to determine whether or not the accommodations and/or modifications can remove the barriers to enrollment due to health care needs.
Instructions

The attached form may be used to conduct an individualized assessment of an applicant’s health care needs.

Who May Conduct the Assessment?

The clinical assessment of health care needs caused by the individual’s medical condition or disability fall under the health and wellness department on each center. As such, these clinical assessments are to be carried out by qualified licensed/certified health providers only. Those providers employed or subcontracted by Job Corps include nurses, physicians, center mental health consultants (CMHCs), dentists, and Trainee Employee Assistance Program (TEAP) specialists. This group, therefore, has a significant role to play in determining whether, in a given Job Corps setting, a particular individual’s health care needs can be managed within the scope of Job Corps basic health services. Medical health conditions should be assessed by nurses and/or physicians; mental health conditions should be assessed by mental health consultants; oral health conditions should be assessed by dentists; and conditions related to substance use should be assessed by TEAP specialists. In some cases, it may be necessary to consult an outside specialist with expertise in the particular medical condition or disability and its effects.

Indicators that a review is needed

1. Within the past six months, two or more emergency room visits or one or more hospitalizations for medical, mental health, oral health, and/or substance abuse reasons.

2. New diagnosis or recurrence of medical, mental health, extensive untreated oral health, and/or substance abuse condition that would require frequent medication adjustments, significant health resources and/or substantial change to the training day (e.g., daily dialysis, only able to attend Job Corps three hours per day, hourly medication or behavioral monitoring, daily assistance with activities of daily living, long-term weekly on-center therapy provided by the CMHC, complex full-mouth reconstruction/rehabilitation).

3. Failure to follow previous treatment recommendations by licensed health providers that have adversely affected the applicant’s health, behavior, and/or adaptive functioning, and now requires significant health care management. (Note: Some students are non-adherent and experience adverse consequences, but may still benefit from enrollment. Examples might include substance abuse relapse, poor diabetic control, poor asthma control, etc.)

4. Applicant has followed treatment recommendations by licensed health providers with no improvement in applicant’s health, behavior, and/or adaptive functioning which continue to place applicant in need of significant health care management.

5. Applicant’s condition or behavior has not been successfully managed in a similar academic, work, or group environment in the past year.
6. Applicant is in treatment for a condition that is not in the scope of Job Corps Basic Health Care Responsibilities (e.g., orthodontic braces for malocclusion).

Elements of the Review Process

The review should, at a minimum, be comprised of the following elements:

1. A review of specific condition(s) identified on “Job Corps Health Questionnaire (ETA 6-53),” or self-disclosed by applicant.

2. Review of health documentation in the file.

3. Request additional recent health information, to determine applicant needs, if appropriate and medically necessary. Collaborate with OA counselor.

   • If the “Job Corps Health Questionnaire (ETA 6-53)” indicates a health condition and there is no supporting information included and no note from the OA counselor indicating their attempt to secure information, contact the OA counselor to gather information.

   • If the “Job Corps Health Questionnaire (ETA 6-53)” indicates a health condition and there is supporting information or a note from the OA counselor indicating they could not secure the information and the center wants additional information, the center will need to request that information from the applicant, provider, or facility.

   • If a center wants additional tests or evaluations from the applicant and this information is necessary to make an enrollment decision, the center may request the applicant obtain these if they have insurance and/or access to a facility that can provide the testing or evaluations at a rate the applicant can afford. The center will need to work with the applicant and OA counselor to identify specific resources. If applicant cannot afford to obtain additional tests or evaluations, or has not provided the additional health information requested within a reasonable amount of time, the center must make their best recommendation based on the information available.

   • In cases where a minor is involved, the center should collaborate with the OA counselor to get parent/guardian permission for health information.

4. Documented communication with treating provider, if possible and required if there are conflicting recommendations between the center health consultant and the treating provider. If unable to contact treating provider, all attempts need to be clearly documented. This should be included on Form 2-05.
5. Interview with the applicant, either face to face, videoconferencing, or via telephone. Documentation of the interview process should be included on Form 2-05. If unable to contact applicant, all attempts need to be clearly documented including collaboration with OA counselor.

6. Identification of the functional limitations (specific symptoms/behaviors) and health care needs of the applicant that are barriers to enrollment.

7. If condition rises to a level of a disability, then refer to the RAC for consideration of accommodations and/or modifications for discussion with applicant. See Form 2-03 for definition of a disability.

8. Consider if accommodations and/or modifications would remove the barriers to enrollment and make condition manageable at Job Corps as defined by basic health services in Exhibit 2-4.

**Decision Tree** (based on file review, treating provider information, if available, interview with applicant, and reasonable accommodations, if appropriate)

1. **Health care needs manageable at Job Corps as defined by basic health care services in Exhibit 2-4**, but require community support services which are not available near center. Documentation of efforts to arrange for less frequent treatment in home state and/or to secure community support near center included on the health care needs assessment in section 7. (i.e., name of organizations/facilities and specific individual contacted). Applicant should be considered for center closer to home where health support and insurance coverage is available. **File is forwarded to Regional Office for final determination.**

   • If community support is not available near requested center, the center must do the following:

     o Contact the treating provider and discuss applicant’s needs to see if less frequent treatment or monitoring can be arranged. For example, instead of monthly sessions with the psychiatrist, can it be every three months and allow applicant to go home and receive follow-up.

     o If center is unable to make arrangements, applicant may be considered for center closer to home where health support and insurance coverage is available. Documentation of efforts to arrange for less frequent treatment in home state and to secure community support near requested center should be included in Section 7 of the health care needs assessment. (i.e., name of organizations/facilities and specific individual contacted). **File is forwarded to Regional Office for final determination.**
• For applicants being considered for any center who wear orthodontic braces, applicant furnishes proof of suitable period of compliance with current treatment plan; a treatment plan is in place for continued care; a signed agreement that the cost of continued treatment and transportation related to treatment will be borne by the student, parent, or legal guardian; and a signed agreement that he/she will remain compliant with the care plan and schedule appointments such that he/she will not exceed authorized leave limits for elective treatment.

2. **Health care needs exceed basic health care as defined in Exhibit 2-4.**

• Applicant has health condition with current symptoms at a level that will interfere with successful participation in the program at this time. Deny entry and refer to other appropriate program/provider. File forwarded to Regional Office for final decision.

**Accommodations or Modifications**

If the individual is a person with a disability, the center’s RAC must convene and consider accommodations and/or modifications that the individual may need. In considering accommodations related to the symptoms and behaviors that are presenting the barriers to enrollment, the RAC may only need to be comprised of the center clinician and a Disability Coordinator and the accommodations could be discussed during the same phone call as the one in which the clinical assessment is being performed.

Once the accommodations and/or modifications have been identified, the qualified licensed professional who conducted the original assessment must review the previous findings giving consideration to the identified accommodations to determine whether or not the accommodations and/or modifications can remove the barriers to enrollment due to health care needs.

**Center Director Reasonableness Determination**

If there is a recommendation for an applicant to be enrolled with accommodations or modifications which you believe are not reasonable and/or pose an undue hardship, the Center Director is responsible for making that determination using the “Accommodation Recommendation of Denial Form” found on the Job Corps Disability website and including that form along with the applicant file that is being submitted to the Regional Office with a recommendation for denial. The final determination is made by the Regional Office.

Guidance on how to make this determination is available in the “Evaluating a Request and Denying a Request” sections of the Form 2-03. Please attach the completed “Accommodation Recommendation of Denial Form.”
FORM FOR INDIVIDUALIZED HEALTH CARE NEEDS ASSESSMENT

Applicant’s Name: __________________________________ Date of Review: ____________________________

Center Name: __________________________________ ID #: _______________________________________

Interview Conducted By:  □ Telephone  □ In Person  □ Videoconference

In determining whether, in your professional judgment, the above named individual’s health care needs are beyond what the Job Corps’ health and wellness program can provide as defined as basic health care in Exhibit 2-4: Job Corps Basic Health Care Responsibilities consider the following and respond accordingly.

If you determine that the individual’s health care needs are beyond Job Corps basic health care responsibilities and their condition rises to a level of a disability, consider whether any accommodations or modifications would remove the barrier to enrollment and list any suggested accommodations or modifications. Do not consider whether, in your view, a particular accommodation or modification is “reasonable.” That determination must be made by the center director or his/her designees.

1. What factors triggered review of the individual’s file for a health care needs assessment?  
   [Please mark all that apply]

   □ Within the past six months, two or more emergency room visits or one or more hospitalizations for medical, mental health, oral health, and/or substance abuse reasons.

   □ New diagnosis or recurrence of medical, mental health, extensive untreated oral health, and/or substance abuse condition that would require frequent medication adjustments, significant health resources and/or substantial change to the training day (e.g., dialysis; daily medication adjustments; only able to attend Job Corps 3 hours per day; daily monitoring; daily assistance with daily living; long term weekly on-center therapy provided by the CMHC; complex full-mouth reconstruction/rehabilitation).

   □ Failure to follow previous treatment recommendations by licensed health providers that have adversely affected the applicant’s health, behavior, and/or adaptive functioning, and now requires significant health care management. (Note: Some students are non-adherent and experience adverse consequences but may still benefit from enrollment. Examples might include substance abuse relapse, poor diabetic control, poor asthma control, etc.).

   □ Applicant has followed treatment recommendations by licensed health providers with no improvement in applicant’s health, behavior, and/or adaptive functioning, which continue to place applicant in need of significant health care management.

   □ Applicant’s condition or behavior has not been successfully managed in a similar academic, work, or group environment in the past year.

   □ Applicant is in treatment for a condition that is not in the scope of Job Corps Basic Health Care Responsibilities (e.g., orthodontic braces for malocclusion).

2. What is the applicant’s history and present functioning to support statement of health care needs?  
   [Include information from ETA 6-53, file review, Chronic Care Management Plan (CCMP) Provider Form, and interview with applicant.]

ETA 6-53: ____________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________
Applicant File Review Summary: ________________________________________________________________

________________________________ ________________________________________________________________

CCMP Provider Form: Does provider recommend applicant to enter Job Corps?  □ Yes  □ No
If conflicting recommendation with treating provider, please indicate effort to contact treating provider for
discussion in addition to summary of information on the CCMP.

________________________________ ________________________________________________________________

Applicant Interview Summary: ________________________________________________________________

________________________________ ________________________________________________________________

3. What are the functional limitations (specific symptoms/behaviors) of the applicant that are barriers to
   enrollment at this time?

☐ Avoidance of group situations and settings
☐ Impaired decision making/problem solving
☐ Difficulty coping with panic attacks
☐ Difficulty managing stress
☐ Difficulty regulating emotions
☐ Difficulty with communication
☐ Difficulty with concentration
☐ Difficulty handling change
☐ Difficulty with memory
☐ Difficulty with self-care
☐ Difficulty with sleep patterns

☐ Difficulty with social behavior, including impairment in social cues and judgment
☐ Difficulty with stamina
☐ Interpersonal difficulties with authority figures and/or peers
☐ Organizational difficulties
☐ Sensory impairments
☐ Uncontrolled symptoms/behaviors that interfere with functioning
☐ Other (specify): _______________________

Please note: This list is not all inclusive. These are suggestions for your use and you may need to consider
functional limitations and accommodations beyond this list.

4. What are the health-care management needs of the applicant that are barriers to enrollment at this time?

☐ Complex behavior management system
   beyond Job Corps current system
☐ Complex full mouth
   reconstruction/rehabilitation
☐ Daily assistance with activities of daily
   living
☐ Frequency and length of treatment
☐ Hourly monitoring required
☐ Medical needs requiring specialized
   treatment
☐ Out of state insurance impacting access to
   required and necessary health care
☐ Severe medication side effects
☐ Therapeutic milieu required
☐ Other (specify): _______________________

5. Reasonable Accommodation Consideration

Is this applicant a person with a disability?  □ Yes  □ No
(i.e., documentation of a mental health, medical, substance-abuse, cognitive, or other type of disability is present in the applicant file or the disability is obvious (i.e., blind, deaf). If no, please skip to Question #6.

If yes, convene the reasonable accommodation committee (RAC) along with the applicant and list below any accommodations and/or modifications discussed with the applicant that could either remove or reduce the barriers to enrollment as documented in Question #4 above.

Note: Accommodations or modifications are not things that treat the impairment; they are things that will help the individual participate in the program. See Program Instruction 08-26 “Reasonable Accommodation and Case Management” for guidance.

Check one of the two options below.

□ The RAC has been unable to identify any accommodations appropriate to support this applicant.

□ The following accommodations/modifications listed below have been discussed with the applicant and considered as a part of this assessment:

Please avoid suggesting extreme accommodations already known to likely be unreasonable unless the applicant has requested a specific support (i.e., 24 hour supervision). If unsure if a support or modification is really an accommodation or is actually a case management support, please contact your regional health and disability consultants for assistance.

Based on functional limitation(s) checked in Section 3, please check the appropriate accommodations below discussed with the applicant. Please note: This list is not all inclusive. These are suggestions for your use and you may need to consider functional limitations and accommodations beyond this list which can be entered in the "Other" section.

<table>
<thead>
<tr>
<th>Avoidance of group situations and settings</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow student to arrive five minutes late for classes and leave five minutes early</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Excuse student from student assemblies and group activities</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Identify quiet area for student to eat meals in or near cafeteria</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Difficulty coping with panic attacks</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow student to designate a place to go when anxiety increases in order to practice relaxation techniques or contact supportive person</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Provide flexible schedule to attend counseling and/or anxiety reduction group</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Allow student to select most comfortable area for them to work within the classroom trade site</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Provide peer mentor to shore up support</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Difficulty handling change</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide regular meeting with counselor to discuss upcoming changes and coping</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Maintain open communication between student and new and old counselors and teachers</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Recognize change in environment/staff may be difficult and provide additional support</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Difficulty managing stress</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow breaks as needed to practice stress reduction techniques</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Modify education/work schedule as needed</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
<tr>
<td>Identify support person on center and allow student to reach out to person as needed</td>
<td>□ Yes</td>
<td>□ No</td>
</tr>
</tbody>
</table>
### Difficulty regulating emotions
- Allow breaks as needed to cool down
- Allow flexible schedule to attend counseling and/or emotion regulation support group
- Teach staff to support student in using emotion regulation strategies
- Provide peer mentor/support staff

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow breaks as needed to cool down</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow flexible schedule to attend counseling and/or emotion regulation support group</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Teach staff to support student in using emotion regulation strategies</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide peer mentor/support staff</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with communication
- Allow student alternative form of communication (e.g. written in lieu of verbal)
- Provide advance notice if student must present to group and opportunity to practice or alternative option (e.g. present to teacher only)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow student alternative form of communication (e.g. written in lieu of verbal)</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide advance notice if student must present to group and opportunity to practice or alternative option (e.g. present to teacher only)</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with concentration
- Allow use of noise canceling headset
- Reduce distractions in learning/work environment
- Provide student with space enclosure (cubicle walls)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow use of noise canceling headset</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Reduce distractions in learning/work environment</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide student with space enclosure (cubicle walls)</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with memory
- Provide written instructions
- Allow additional training time for new tasks and hands-on learning opportunities
- Offer training refreshers
- Use flow-charts to indicate steps to complete task
- Provide verbal or pictorial cues

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide written instructions</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow additional training time for new tasks and hands-on learning opportunities</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Offer training refreshers</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Use flow-charts to indicate steps to complete task</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide verbal or pictorial cues</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with organization
- Use staff/peer coach to teach/reinforce organizational skills
- Use weekly chart to identify and prioritize daily tasks

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use staff/peer coach to teach/reinforce organizational skills</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Use weekly chart to identify and prioritize daily tasks</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with self-care
- Provide environmental cues to prompt self-care
- Assign staff/peer mentor to provide support
- Allow flexible scheduling to attend counseling/supportive appointments

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide environmental cues to prompt self-care</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Assign staff/peer mentor to provide support</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow flexible scheduling to attend counseling/supportive appointments</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with sleep patterns
- Allow for a flexible start time
- Provide more frequent breaks
- Provide peer/dorm coach to assist with sleep routine/hygiene
- Increase natural lighting/full spectrum light

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow for a flexible start time</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide more frequent breaks</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide peer/dorm coach to assist with sleep routine/hygiene</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Increase natural lighting/full spectrum light</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with social behavior, including impairment in social cues and judgment
- Assign mentor to reinforce appropriate social skills
- Allow daily pass to identified area to cool down
- Provide concrete examples of accepted behaviors and teach staff to intervene early to shape positive behaviors
- Adjust communication methods to meet students’ needs

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assign mentor to reinforce appropriate social skills</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow daily pass to identified area to cool down</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide concrete examples of accepted behaviors and teach staff to intervene early to shape positive behaviors</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Adjust communication methods to meet students’ needs</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Difficulty with stamina
- Allow more frequent or longer breaks
- Allow flexible scheduling
- Provide additional time to learn new skills

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow more frequent or longer breaks</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow flexible scheduling</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide additional time to learn new skills</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Impaired decision making/problem solving
- Utilize peer staff mentor to assist with problem solving/decision making
- Provide picture diagrams of problem solving techniques (e.g., flow charts, social stories)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilize peer staff mentor to assist with problem solving/decision making</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide picture diagrams of problem solving techniques (e.g., flow charts, social stories)</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Interpersonal difficulties with authority figures and/or peers
- Encourage student to take a break when angry
- Provide flexible schedule to attend counseling and/or therapy group
- Provide peer mentor for support and role modeling
- Develop strategies to cope with problems before they arise
- Provide clear, concrete descriptions of expectations and consequences
- Allow student to designate staff member to check in with for support when overwhelmed

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encourage student to take a break when angry</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide flexible schedule to attend counseling and/or therapy group</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide peer mentor for support and role modeling</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Develop strategies to cope with problems before they arise</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Provide clear, concrete descriptions of expectations and consequences</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow student to designate staff member to check in with for support when overwhelmed</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>

### Sensory impairments
- Modify learning/work environment to assist with sensitivities to sound, sight, and smells
- Allow student breaks as needed

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modify learning/work environment to assist with sensitivities to sound, sight, and smells</td>
<td>☐</td>
<td>☛</td>
</tr>
<tr>
<td>Allow student breaks as needed</td>
<td>☐</td>
<td>☛</td>
</tr>
</tbody>
</table>
### Uncontrolled symptoms/behaviors that interfere with functioning

<table>
<thead>
<tr>
<th>Uncontrolled Symptoms/Behaviors</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alter training day to allow for treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allow passes for health and wellness center outside of open hours</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduce tasks and activities during CPP to not aggravate symptoms/behaviors</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Other

- [ ]
- [ ]

### Summarize any special considerations and findings of the RAC as well as the applicant’s input:

**Please Note:** Job Corps cannot impose accommodations upon an individual. If the applicant does not accept or agree to a specific accommodation, there is no need to consider that specific accommodation in your determination of whether the accommodations listed will reduce the barriers to enrollment sufficiently or not nor is there a need to complete a reasonableness review related to that specific accommodation.

### Reasonable Accommodation Considerations:

Did the applicant participate in the RAC meeting? [ ] Yes [ ] No

*(Note: The applicant must be a part of the discussion for reasonable accommodation).*

### RAC Participants:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If there is a recommendation for an applicant to be enrolled with the accommodations or modifications listed in Question #5 above which you believe are not reasonable and/or pose an undue hardship, the **Center Director is responsible for making that determination** using the “Accommodation Recommendation of Denial Form” found on the Job Corps Disability website and including that form along with the applicant file that is being submitted to the regional office with a recommendation for denial. The final determination is made by the regional office.

Guidance on how to make this determination is available in the “Evaluating a Request and Denying a Request” sections of the Form 2-03. Please attach the completed “Accommodation Recommendation of Denial Form.”

If there are agreed upon accommodations between the RAC and applicant listed in Question #5 then consider whether those accommodations reduce the barriers to enrollment sufficiently to allow for the applicant to be enrolled.

- If the accommodations would sufficiently reduce the barriers to enrollment, then you do not need to complete the remainder of this assessment and the center can assign the applicant a start date. Retain all the paperwork included in completing this assessment within the applicant’s Student Health Record.
- If the accommodations would NOT sufficiently reduce the barriers to enrollment for your center, please proceed to Question #6.
6. Based on your review of the applicant’s health care needs above, does the named individual have health care needs beyond what the Job Corps’ health and wellness program can provide as defined as basic health care in Exhibit 2-4: Job Corps Basic Health Care Responsibilities? [Please mark one below.]

☐ In my professional judgment, health care needs are manageable at Job Corps as defined by basic health care services in Exhibit 2-4, but require community support services which are not available near center. Documentation of efforts to arrange for less frequent treatment in home state and/or to secure community support near center can be found in Question #7 below. Applicant should be considered for center closer to home where health support and insurance coverage is available. **File is forwarded to Regional Office for final determination.**

☐ In my professional judgment, health care needs are not manageable at Job Corps as defined by basic health care services in Exhibit 2-4. Applicant has health condition with current symptoms at a level that will interfere with successful participation in the program at this time. Deny entry and refer to other appropriate program/provider. **File is forwarded to Regional Office for final determination.**

7. If recommending a different center, document efforts to arrange less frequent treatment in home state and/or secure community support near center in the space below. (Include name of organizations/facilities and specific individuals contacted and why access is not available.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Printed or Typed Name and Title of Licensed Health Provider Completing Form

________________________________________________________________________

Signature of Licensed Health Provider Completing Form

Date
# Form 2-06
**MyPace Career Plan Review Checklist**

## Career Preparation Period

<table>
<thead>
<tr>
<th>Center Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name:</td>
<td>Student ID:</td>
</tr>
<tr>
<td>Date of Birth:</td>
<td>Counselor:</td>
</tr>
</tbody>
</table>

## Section 1 - Career Pathway Plan Summary

- Student’s summary connects the dots along his/her pathway, ties together all short-term, mid-term, and long-term SMART career goals, and defines in chronological order the steps from his/her current position to his/her ultimate long-term career goal.
<table>
<thead>
<tr>
<th>SECTION 2 - STUDENT PROFILE AND TRAITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desired Location Upon Exit: Student’s desired location upon exit aligns with student’s mid-term career goal (pathway placement goal). Student has a plan to address transitional concerns such as Housing, Transportation, etc.</td>
</tr>
<tr>
<td>☐ Age: Does the chosen pathway have a minimum age limitation for entry? If student is a minor, has the center received parental/guardian consent for the career plan?</td>
</tr>
<tr>
<td>☐ Date of Enrollment: The Career Management Team monitors the date of entry to ensure student has adequate time for completion prior to the two-year program limitation. If more than two years is anticipated to be needed due to special circumstances (e.g. low learning level), the center should apply for an extension at least 3 months prior to the two year period. If student is granted an extension, the pathway &amp; transition plan will need to be adjusted. Some pathways (i.e. Advanced Training &amp; post-secondary) have fixed enrollment dates.</td>
</tr>
<tr>
<td>☐ Education Background: How will a student’s level of education impact the CTT trade the student selected on their plan? How will a student’s level of education impact their mid-term career goal (Post-Job Corps)? Ex. If a student’s mid-term goal is to go to college, but the student’s current reading level is 5th Grade”, the Career Management Team should ensure that the student is aware of what it will take to be ready for college upon exit and/or discuss other possible mid-term goals that may be more appropriate.</td>
</tr>
<tr>
<td>☐ Favorite and Least Favorite Subjects: This is to help the Career Management Team get an idea of what a student perceives as their academic strengths and weaknesses. The academic manager could use this information along with other baseline assessments to help the student develop a viable academic plan.</td>
</tr>
<tr>
<td>☐ Self-Identified Traits: Do the “Self-Identified Traits” reasonably align with the traits assigned under the MyPACE Career Interest Profiler?</td>
</tr>
</tbody>
</table>
Prior Employment History: Student has provided information related to their work experience prior to entering Job Corps. This information should be used by center staff to ensure a student’s previous work experience and wages are given consideration when staff are assisting a student with developing a career pathway that both aligns with the student’s individual career goals and interests; and increases the student’s earning potential and/or vocational skills.

### SECTION 3 – CHOSEN OCCUPATION (LONG-TERM CAREER GOAL)

- Student’s self-assigned traits (work style, work values, career priorities and interests), and skills reasonably match his/her chosen occupational profile.
- Student understands the relationship between their self-assigned traits and the education, training, and demands of their chosen occupation.
- Student is aware of the commitment it will take to achieve the level of education and related work experience required to achieve their long-term occupation.
- Student has chosen an in-demand occupation that provides a “living wage”; leads to a successful career; and is suited to the student’s interest, capabilities, and career goals.
- Student has provided a sound reason for how he/she identified their long-term goal (chosen occupation).
- Long-term goal is SMART (specific, measurable, attainable, recorded and time-based).
- Chosen Occupation “Occupation Traits” reasonably match student’s “My Assigned Traits”
## SECTION 4 – CHOSEN PLACEMENT PATHWAY ACHIEVEMENT RECORD (MID-TERM CAREER GOAL)

Please refer to appropriate pathway sub-section below: (4a) Advanced Training, (4b) Military, (4c) Apprenticeship, (4d) Post-secondary Education (ACT/College), and (4e) Entry-Level Job.

### Sub-section 4a – Advanced Training Pathway

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>The Career Management Team and student have reviewed the “Prerequisites for Entry to the Advanced Training Pathway”. The student understands these requirements and can likely meet these requirements upon completion of the Job Corps program (see Exhibit 2-5).</td>
</tr>
<tr>
<td>☐</td>
<td>Student has provided a sound reason for how he/she identified an Advanced Training Program that appropriately aligns with his/her ultimate long-term career goal.</td>
</tr>
<tr>
<td>☐</td>
<td>The e-TAR code, Advanced Training program and location are accurately recorded on the student’s MyPACE Career Plan.</td>
</tr>
<tr>
<td>☐</td>
<td>The mid-term Career SMART goal supports career progression and is specific, measurable, attainable, recorded and time-based.</td>
</tr>
<tr>
<td>☐</td>
<td>Career Management Team has assigned appropriate staff to support and monitor completion of the Advanced Training PAR and transitional tasks, and will inform Career Management Team of student progress throughout program.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Timelines for pathway task completion and follow-up have been drafted.</td>
</tr>
<tr>
<td></td>
<td>• Short-term career planning goals have been developed for next 60 day ESP period (e.g. acquiring birth certificate for driver’s license if not already attained, developing a plan to pay fines if needed).</td>
</tr>
</tbody>
</table>
## Sub-section 4b – Military PAR

| ☐ | The Career Management Team and student have reviewed the “Prerequisites for Entry to the Military Pathway“, student understands the Placement Pathway entry requirements and can likely meet the entry requirements after completion of the Job Corps program (see Exhibit 2-5). |
| ☐ | Career Management Team has discussed with student the requirements for delayed enlistment and has reviewed the Center Enlistment Contract” |
| ☐ | Student has provided a sound reason for how he/she identified a Military branch and military related occupation that appropriately aligns with his/her long-term career goal. |
| ☐ | The mid-term Career SMART goal supports career progression and is specific, measurable, attainable, recorded and time-based. |
| ☐ | Student has provided the correct contact information for the nearest recruitment office to their location |
| ☐ | Career Management Team has assigned appropriate staff to support and monitor completion of the Military PAR and transitional tasks, and will inform Career Management Team of student progress throughout program. |
| ☐ | • Timelines for pathway task completion and follow-up have been drafted. |
| ☐ | • Short-term pathway goals have been developed for next 60 day ESP period. |

## Sub-section 4c - Apprenticeship PAR

| ☐ | The Career Management Team and student have reviewed the “Prerequisites for Entry to the Apprenticeship Pathway“, student understands the Placement Pathway entry requirements and can likely meet the entry requirements after completion of the Job Corps program (see Exhibit 2-5). |
| ☐ | Student has provided a sound reason for how he/she identified an Apprenticeship Program that appropriately aligns with his/her long-term career goal. |
| ☐ | • If student is unable to locate an apprenticeship program that aligns with their long-term or short-term career goal, Career Management Team may recommend the student choose another career pathway. |
| ☐ | • Career Management Team understands requirement differences between state-approved and federally approved apprenticeships. |
| ☐ | The e-TAR code and chosen Apprenticeship program are accurately recorded on MyPACE Career Plan. |
| ☐ | Student has identified a potential apprenticeship program that aligns with the student’s long-term career goal. |
| ☐ | The mid-term Career SMART goal supports career progression and is specific, measurable, attainable, recorded and time-based. |
| ☐ | Career Management Team has assigned appropriate staff to support and monitor completion of the Apprenticeship PAR and transitional tasks, and will inform Career Management Team of student progress throughout program.  
  - Timelines for pathway task completion and follow-up have been drafted.  
  - Short-term pathway goals have been developed for next 60 day ESP period. |

**Sub-section 4d - Post-Secondary Education (ACT/College) PAR**

| ☐ | The Career Management Team and student have reviewed the “Prerequisites for Entry to the Post-Secondary (ACT/College) Pathway”, student understands the Placement Pathway entry requirements and Career Management Team has determined the student can likely meet the entry requirements after completion of the Job Corps program (see Exhibit 2-5). |
| ☐ | Student has explored financial aid and scholarship options, and developed a tentative plan to secure adequate funding. |
| ☐ | Student has provided a sound reason for how he/she identified a college that appropriately aligns with his/her long-term career goal. The chosen post-secondary institution is recorded on MyPACE Career Plan. |
| ☐ | The mid-term Career SMART goal supports career progression and is specific, measurable, attainable, recorded and time-based. |
| ☐ | Career Management Team has assigned appropriate staff to support and monitor completion of the Post-secondary PAR and transitional tasks, and will inform Career Management Team of student progress throughout program.  
  - Timelines for pathway task completion and follow-up have been drafted.  
  - Short-term pathway goals have been developed for next 60 day ESP period. |
| ☐ | If applicable, student intends to enroll in Advanced Career Training if student’s selected college is an Advanced Career Training partner? |
| ☐ | **Sub-section 4e – Entry-Level Job PAR** |
| ☐ | The Career Management Team and student have reviewed the “Prerequisites to Entry Level Job Pathway “, student understands the Placement Pathway entry requirements and can likely meet the entry requirements after completion of the Job Corps program (see Exhibit 2-5). |
| ☐ | Student has provided a sound reason for how he/she identified an Entry-Level Job that appropriately aligns with his/her long-term career goal, in demand, and will make a living wage. |
| ☐ | Student has identified three potential employers in area student is willing to relocate to and has identified a JTM entry-level which pays a living wage, and aligns with student’s long-term career goal. |
| ☐ | The mid-term Career SMART goal supports career progression and is specific, measurable, attainable, recorded and time-based. |
| ☐ | Career Management Team has assigned appropriate staff to support and monitor completion of the Entry-Level Job PAR and transitional tasks, and will inform Career Management Team of student progress throughout program. Timelines for pathway task completion and follow-up have been drafted. Short-term pathway goals have been developed for next 60 day ESP period. |

| ☐ | **SECTION 5 – CHOSEN JOB CORPS CAREER DEVELOPMENT EDUCATION AND TRAINING PROGRAM (SHORT-TERM CAREER GOALS)** |
| ☐ | Student is able to explain why his/her choice of CTT program area is the best choice for his/her career path, and can describe the similarity of knowledge and skills between the CTT and his/her mid- and long-term goals. |
| ☐ | The e-TAR code and CTT program chosen by the student are accurately recorded on the student’s MyPACE Career Plan. |
| ☐ | Student understands the projected length of time to complete the CTT training program and is willing to commit to the required timeframe. |
| ☐ | The CTT selection is reasonably based on work style, work values, skills, career priorities, academic scores and career interests expressed by the student. |
| ☐ | There’s slot availability in the chosen CTT selection.  
  - If first choice is not available, assignment to a second choice CTT Program is compatible with the student’s long-term career goals. |
| ☐ | Short-term SMART career goals in academics and CTT have been identified, and are specific, measurable, attainable, recorded and time-based. |
| ☐ | Student has accurately recorded the Primary Credential and Credential Sponsor associated with their chosen CTT program. |
| ☐ | Career Management Team has collaborated with student to identify his/her schedule, individualized mix of classes and activities, including any additional needed support that will move the student toward meeting the Career Success Standards and his/her career goals.  
  - Accommodations to achieve career goals are identified. (e.g., Staff will engage in conversations with Voc. Rehab. early on.)  
  - Tutors, if needed, have been assigned.  
  - Peer or staff mentors, if needed, have been assigned. Other on- or off-center resources, as needed, have been assigned. |
### SECTION 6 - TRANSITIONAL CONSIDERATIONS

| ☐ | Student has completed a Transitional Needs Assessment that identifies action items that will aid the student in successfully transitioning to his/her chosen Placement Pathway. The CTS Provider and student have worked closely to develop an initial transition plan based on chosen pathway. Considerations include (at a minimum):
| | - Housing
| | - Transportation
| | - Childcare
| | - Health care
| | - Work clothes/tools
| | - Food and nutrition
| | - Budgeting and money management
| | - Counseling/mentoring
| | - Job retention skills
| | - Legal services
| | - Other needs? |

### SECTION 7 – INITIAL APPROVAL OF MyPACE CAREER PLAN (Transition from CPP to CDP)

| ☐ | Risk factors and barriers for a successful transition (e.g., drug & alcohol issues, low learning levels) have been identified from baseline assessments and the Career Management Team, as needed, has initiated multiple levels of intervention. Other on-center and off-center resources have also been identified to provide additional support to the student on an as-needed basis (e.g., Recreation Specialist, other dorm staff, Student Conduct Coordinator, Mental Health Consultant, AA/NA Groups, etc.). Career Management Team has developed an intervention support plan and will closely monitor student response to intervention. This support plan begins to shape the student’s individual career plan. |
During initial (first 60 day) ESP meeting, the Career Management Team has determined student:

- Has a clear understanding of and commitment to completing the Job Corps program;
- Is adjusting to center life
- Is a positive influence on center culture
- Is progressing satisfactorily in all areas
- Completed all CPP requirements (including MyPACE career planning requirements for CPP) and is ready to transition from CPP to CDP.

The Career Management Team and student have reviewed the appropriate requirements on the “Pathway Prerequisites for Entry” documents (reference Exhibit 2-5). The student understands these requirements, and can likely meet these requirements upon completion of the Job Corps program.

(If student is under 18) The counselor has received parental/guardian consent for student’s MyPACE Career Plan and has notified parent/guardian of any major behavior or performance issues.

<table>
<thead>
<tr>
<th>Lead Career Management Team:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Center Director or Senior Management Designee:</td>
<td>Date:</td>
</tr>
</tbody>
</table>