Workforce Solutions	North Carolina Department of Commerce Division of Workforce Solutions
	DWS Policy Statement Number: PS 06-2016
	Date: April 8, 2016
	Subject: Dislocated Worker Contingency Funds Available from North Carolina's Workforce Innovation and Opportunity Act Statewide Rapid Response Allotment
	From: William H. Collins, Jr. Assistant Secretary for Workforce

Purpose: To transmit policy and requirements for requesting Dislocated Worker Contingency Funds

Background: North Carolina continues to have layoffs and business closings that exceed some Local Workforce Development Areas' available Dislocated Worker formula funding. Based upon availability, the Division of Workforce Solutions will reserve funds from North Carolina's allotment of Statewide Rapid Response funds as a contingency fund that may be drawn upon by Local Areas to address critical needs that exceed local capacity to respond as allowed under the Workforce Innovation and Opportunity Action Section 134.

Action: A Local Area may apply for assistance for Dislocated Worker Contingency Funds by submitting an Administrative Adjustment request via Workforce Information System Enterprise (WISE), using Attachment A, detailing additional funding needs. The request must certify that Local Area funds are committed and that the Dislocated Worker Contingency Funds will address critical short-term needs.

- The Local Area must have committed all local WIOA Dislocated Worker funds available.
- The Local Area must note that it has exhausted other possibilities for addressing the shortfall in Dislocated Worker Funds, including transferring funds to the Dislocated Worker Program and using other available resources.
- The Local Area must note coordination with Trade Adjustment Assistance program services.
- The Local Area must document the amount of additional funds and reason(s) needed. Request may not exceed $200,000.
- The Local Area must include the number of new Dislocated Worker enrollments planned.

Dislocated Worker Contingency Funds include no Administrative funds. Financial reporting will be under Division fund number 4031. Participants will be tracked as with other Dislocated Worker enrollments and are included in performance calculations.

Dislocated Worker Contingency Funds must be spent during the Program Year in which they are awarded.

Should a Local Area submit more than one request for Dislocated Worker Contingency Funds, the Division of Workforce Solutions will examine the expenditure rate of previous Dislocated Worker Contingency Funds granted and formula Dislocated Worker funds as a factor in the award decision.

Note: Funds shall only be awarded based upon availability.

Effective Date: April 1, 2016

Expiration: Indefinite

Contact: Division Planners

Attachment A: Dislocated Worker Contingency Fund Request

Dislocated Worker Contingency Fund Request – Attachment A

Local Workforce Development Board Name:	
Narrative Description of Need	
Detail and certify that:	
1. Available Dislocated Worker Funds are committed:	
2. The Local Area has exhausted possibilities for addressing the Dislocated Worker shortfall:	
3. Coordination with the Trade Adjustment Assistance program services is in place:	
Detail the need for Dislocated Worker Contingency Funds, including:	
1. The number of current/additional Dislocated Workers to be served with requested funds:	
2. A substantial increase in the requests for services from Notice of Closures in the area to include company names and number of persons laid off:	
3. Current local unemployment rate:	
4. The services planned for additional Dislocated Worker participants:	
5. The estimated cost of serving current/additional Dislocated Workers:	
Financial Information	
A. Fund availability as of July 1 (*Prior Program Year funds*):	
1. Dislocated Worker funds:	
2. Transferred Adult funds:	
3. Other funds (specify):	
4. **Total Prior Program Year Fund Availability**	
B. Fund availability as of July 1 (*Current Program Year funds*)	
1. Dislocated Worker funds:	
2. Transferred Adult funds:	
3. Other funds (specify):	
4. **Total Current Program Year Fund Availability**	
Total Fund Availability (A.4. plus B.4.)	
Signature:	
Contingency Funds received will be expended by June 30th of the Program Year in which received.	
Local Area Director (sign above)	***Date (above)***

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