

Board Name _____

Participants Served by Funding Source

Activity Category	# WIA Adult	# WIA Dislocated Workers	# WIA Youth	# TAA	# Choices	# Child Care	# FSE&T	# Project RIO	# ES	# Total Employers
Total Participants						*				
Training Participants										

Total Annual Unduplicated Count of Job Seekers to be Served _____

*** Contracted Target**

Submitted by _____

Date _____