Existing Local Areas Application for Initial Local Workforce Development Area Designation

This application will serve as your request for Local Workforce Development Area initial designation for Program Years (PYs) 2015 (July 1, 2015 –June 30, 2016) and 2016 (July 1, 2016 – June 30, 2017) under the Workforce Innovation and Opportunity Act (WIOA).

Name	of LWDA			
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			-	
Data	of Culomaionian			
			-	
Conta	ct Person's Phone	Number		
Chief	Local Elected Offi	tion the Local Workforce Development Board cial certifies that during Program Years (PYs) 2 013 (July 1, 2013 – June 30, 2014):		
1. a.	The LWDA has p	erformed successfully.		
	☐ Yes	□ No		
	for PY 2012 (07/0 not failed any ind years of PY 2012	ssful means met or exceeded negotiated levels 01/12 – 06/30/13) and PY 2013 (07/01/13 – 06/ ividual measure for the same period for the two 2 and PY 2013. For youth measures, must have 3 of seven (7) measures in PY 2012; and two (2 2013.	30/14) and has (2) consecutive e met or	
1. b.		1. a. is No, the LWDA is operating under a performance improvement plan proved by the State.		
	☐ Yes	□ No		
2.	The LWDA has sustained fiscal integrity:			
	☐ Yes	□ No		

"Fiscal Integrity" means it has not been found in violation of one or more of the following:

- a. Formal determination of significant finding(s) from audits, evaluations, or other reviews conducted by State or local governmental agencies or the United States Department of Labor identifying issues of fiscal integrity or misexpended funds due to the willful disregard or failure to comply with WIA requirements.
- Gross negligence defined as a conscious and voluntary disregard of the need to use reasonable care, which is likely to cause foreseeable grave injury or harm to persons, property, or both.
- c. Failure to observe accepted standards of administration defined as adherence to the applicable uniform administrative requirements set forth in Title 29 Code of Federal Regulations (CFR) Parts 95 and 97, appropriate Office of Management and Budget circulars or rules, WIA regulations, and State guidance.

Signature Date Signature Date

Name Title Name Title

Approved Disapproved

Signature Date

Name Title

Comments: