

TELEPHONE VERIFICATION/DOCUMENT INSPECTION

Customer Name: _____

Primary Item to be Verified: _____

Agency Providing Verification: _____

Agency Telephone Number: _____

Name/Title of Person Verifying Item: _____

Date and Time of Verification: _____

Additional Items Verified (list and Record Data for Each):

I attest the information recoded by me on this form was obtained through telephone contact or document inspection on the above date, and:

(Circle A or B below as appropriate)

- A. In telephone verification, the agency contacted confirmed all of the above information was obtained from data recorded in the customer's records at the agency providing eligibility verification; or
- B. The document inspected verified a status required to determine eligibility for the WIA program.

Staff Signature

Printed Staff Name and Title

Date