

WIA PROGRAM CUMULATIVE REGISTRANTS

Workforce Investment Area #: <u>5</u>	Grant Number: <u>08-681005</u>	<input type="checkbox"/> Original Plan
Grant Recipient: <u>KCDEE</u>	Date Submitted: _____	<input type="checkbox"/> Plan Mod. No.
		PY: _____ 09

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
ADULT REGISTRANTS		600		720
1. Prior Year(s) Registrants				425
2. Registered Core Services				720
3. Intensive Services				435
4. Training Services				335
a. Individual Training Accounts				335
5. Supportive Services				35

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
DISLOCATED WORKER REGISTRANTS		425		655
1. Prior Year(s) Registrants				407
2. Registered Core Services				655
3. Intensive Services				555
4. Training Services				415
a. Individual Training Accounts				415
5. Supportive Services				45

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
YOUTH REGISTRANTS		210		375
1. Prior Year(s) Registrants				130
2. Program Services				375