

LOCAL SERVICE PLAN MODIFICATION TRANSMITTAL FORM

To Be Completed by Region: Region Number: 15 Date Submitted April 18, 2017 Effective Date: April 18, 2017	For State Use Only: Date Received: Date Approved: Effective Date:
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Provide a brief description of the CSP changes below:

Work Experience Wage Rate:

Utilize Prevailing Wage of the Employer instead of minimum wage rates for hourly wages for Work Experience Participants.

They would still need to be limited to 24 hours per week (counting hours Sunday through Saturday) in order to stay in compliance with Affordable Care Act rules. We would also need to make sure they don't earn more than \$1,000 in two consecutive quarters of work so that they don't qualify for retirement monies.

Regional Customer Service Plan Certification

I certify that the attached has been reviewed and approved by the Regional Workforce Investment Board and the Chief Elected Officials Board, and that I am authorized to sign on behalf of the group I represent.

David Kruffelott 4/18/2017
RWIB Chair Signature / Date
VICE CHAIRMAN

Matt Green 4-25-17
CEO Chair Signature / Date

