Northern Area Local WORKFORCE DEVELOPMENT BOARD

WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA)
PROGRAM POLICY NOTICE NO. 30-A. Rev. 2

EFFECTIVE DATE: September 14, 2026
SUBJECT: Electronic File Policy

I.PURPOSE

This policy establishes uniform requirements for creating, maintaining, protecting, retaining, and managing electronic participant files and other official records maintained under the Workforce Innovation and Opportunity Act (WIOA). It establishes standards for documenting participant eligibility, service delivery, expenditures, case management activities, performance outcomes, and program administration to ensure compliance with applicable federal and state laws, regulations, guidance, and Northern Area Local Workforce Development Board (NALWDB) policies.

This policy is intended to promote consistent documentation practices, strengthen internal controls, safeguard personally identifiable information (PII), support effective case management and fiscal accountability, facilitate monitoring and audit activities, and ensure that the official electronic case file provides a complete, accurate, and auditable record of participant services and program operations.

The Northern Area Local Workforce Development Board recognizes the electronic case file as the official record for documenting Workforce Innovation and Opportunity Act (WIOA) program activities. It requires maintaining electronic records to support transparency, accountability, and responsible stewardship of public funds.

II. AUTHORITY

This policy is issued under the authority of, and shall be administered in accordance with, the following federal and state laws, regulations, guidance, and Board policies, as amended:

- Workforce Innovation and Opportunity Act (WIOA), including but not limited to:
  - Section 116 – Performance Accountability
  - Section 185 – Records, Reports, and Investigations
  - Section 188 – Nondiscrimination and Equal Opportunity

that serves as the primary record for monitoring, oversight, auditing, reporting, and compliance purposes.

Personally Identifiable Information (PII) – Information that can be used to distinguish or trace an individual's identity, either alone or when combined with other personal or identifying information, including information protected under applicable federal and state privacy laws.

Protected Health Information (PHI) – Individually identifiable health information that is protected under the Health Insurance Portability and Accountability Act (HIPAA), where applicable.

Source Documentation – Original or official records used to verify participant eligibility, services received, expenditures, performance outcomes, or other program requirements. Source documentation may include, but is not limited to, identification documents, eligibility verification, assessments, financial aid information, invoices, timesheets, case notes, educational records, credentials, and other records supporting compliance with WIOA requirements.

Supporting Documentation – Documentation maintained within the electronic case file that substantiates participant eligibility, services, expenditures, performance outcomes, and compliance with applicable federal and state requirements.

IV. POLICY STATEMENT

The Northern Area Local Workforce Development Board (NALWDB) shall maintain an official electronic case file for each participant receiving Workforce Innovation and Opportunity Act (WIOA) funded services. The official electronic case file shall serve as the primary record for documenting participant eligibility, service delivery, case management activities, expenditures, performance outcomes, and all other records necessary to demonstrate compliance with applicable federal and state laws, regulations, guidance, and Board policies.

The official electronic case file shall contain complete, accurate, legible, and unaltered documentation sufficient to support participant eligibility determinations, program activities, expenditures, performance reporting, monitoring, audit activities, and fiscal oversight. Documentation maintained in the electronic case file shall accurately reflect the participant's services and provide an auditable record to support all programmatic and fiscal decisions.

All required documentation shall be uploaded to the official electronic case file in accordance with applicable federal and state requirements and within timeframes established by the Board. Records maintained outside the official electronic case file shall not replace required documentation maintained within the designated electronic system.

The Northern Area Local Workforce Development Board, its service providers, and subrecipients shall establish and maintain internal controls to ensure electronic case files are complete, accurate, timely, secure, and readily available for monitoring, audit, data validation, and other authorized oversight activities.

Documents uploaded to the official electronic case file shall not be altered, modified, redacted, obscured, or otherwise manipulated in a manner that removes or conceals information necessary to verify participant eligibility, services provided, expenditures, performance outcomes, or compliance with applicable requirements, unless expressly authorized by applicable federal or state law. Where redaction is legally required, the original unredacted document shall be maintained in accordance with applicable record retention and confidentiality requirements and made available to authorized oversight entities upon request.

The Board, service providers, and subrecipients share responsibility for maintaining complete and compliant electronic case files. Failure to maintain required documentation may result in monitoring findings, corrective actions, questioned costs, repayment of disallowed expenditures, contract remedies, or other actions authorized by applicable law, regulation, contract, or Board policy.

V. ROLES AND RESPONSIBILITIES

The Northern Area Local Workforce Development Board (NALWDB), its service providers, subrecipients, training providers, and staff share responsibility for maintaining complete, accurate, secure, and compliant electronic case files. Each party shall fulfill its responsibilities in accordance with applicable federal and state laws, regulations, guidance, Board policies, and contractual requirements.

A. Northern Area Local Workforce Development Board

The Board shall:

1. Establish and maintain policies governing electronic case file management and documentation standards.
2. Ensure electronic file requirements comply with applicable federal and state laws, regulations, and guidance.
3. Provide oversight, monitoring, technical assistance, and training regarding electronic case file requirements.
4. Maintain internal controls to promote the completeness, accuracy, security, and integrity of official electronic records.
5. Monitor compliance with this policy and require corrective action when deficiencies are identified.

B. Executive Director

The Executive Director, or designee, shall:

1. Ensure implementation and administration of this policy.
2. Establish administrative procedures necessary to support consistent electronic case file management.
3. Ensure staff and service providers receive appropriate guidance and training regarding electronic documentation requirements.
4. Oversee corrective actions resulting from monitoring, audits, or compliance reviews.

C. Service Providers and Subrecipients

Service providers and subrecipients shall:

1. Maintain complete, accurate, and timely electronic case files for all participants receiving WIOA-funded services.
2. Upload all required documentation to the official electronic case file in accordance with Board policies and applicable federal and state requirements.
3. Ensure documentation supports participant eligibility, services provided, expenditures, case management activities, and performance outcomes.
4. Maintain effective internal controls and quality assurance procedures to ensure electronic case files remain complete, accurate, and audit-ready.
5. Promptly correct deficiencies identified through supervisory review, monitoring, audits, or other oversight activities.

D. Case Managers and Program Staff

Case managers and other program staff responsible for participant services shall:

1. Prepare and maintain timely, complete, and accurate documentation supporting all participant activities.
2. Record case notes that accurately document participant contacts, assessments, services, decisions, progress, and outcomes.
3. Upload supporting documentation within Board-established timeframes.
4. Notify appropriate supervisory staff when documentation cannot be obtained or when issues may affect participant eligibility, service delivery, or compliance.
5. Document any delays in obtaining required documentation or completing electronic case file requirements, including the reason for the delay, actions taken to resolve the issue, and the date the issue was resolved, when applicable.

E. Fiscal Agent

Fiscal staff shall:

1. Maintain electronic documentation supporting all WIOA-funded expenditures.

2. Verify that payment requests are supported by required documentation before authorizing reimbursement.
3. Maintain fiscal records necessary to demonstrate compliance with applicable cost principles, financial management requirements, and Board policies.
4. Coordinate with program staff to ensure fiscal documentation is consistent with participant case records.

F. Training Providers

When applicable, training providers shall cooperate with the Board and service providers by providing documentation necessary to support participant enrollment, attendance, academic progress, credential attainment, withdrawals, refunds, and other information required to maintain complete electronic case files and comply with applicable federal, state, and local requirements.

VI. OFFICIAL ELECTRONIC CASE FILE AND DOCUMENTATION REQUIREMENTS

The official electronic case file shall serve as the complete and authoritative record of Workforce Innovation and Opportunity Act (WIOA) program participation. Documentation maintained within the official electronic case file shall accurately reflect participant eligibility, services received, expenditures, case management activities, performance outcomes, and all other information necessary to demonstrate compliance with applicable federal and state laws, regulations, guidance, contractual requirements, and Board policies.

The official electronic case file shall contain sufficient documentation to enable an independent reviewer to determine participant eligibility, verify services provided, validate expenditures, assess participant progress, and confirm compliance with applicable program requirements, without requiring additional explanation or supporting records maintained outside the official electronic case file.
All required documentation shall be uploaded to the official electronic case file promptly and maintained throughout the participant's period of participation and applicable record retention period.
Required documentation shall include, as applicable:

A. Eligibility Documentation

The electronic case file shall include documentation supporting participant eligibility, including, but not limited to:

- Eligibility determinations.
- Age and identity verification.
- Authorization to work documentation, when applicable.
- Selective Service documentation, when applicable.
- Income verification.
- Barrier documentation.

- Residency verification, when required.
- Eligibility review and approval documentation; and
- Any other documentation required to establish eligibility under applicable federal, state, or local requirements.

B. Program Documentation

The electronic case file shall include documentation supporting participant enrollment and service delivery, including, but not limited to:

- Objective assessments.
- Individual Employment Plans (IEPs) or Individual Service Strategies (ISSs), as applicable.
- Career services.
- Activity enrollments.
- Supportive service documentation.
- Individual Training Accounts (ITAs);
- On-the-Job Training (OJT) agreements.
- Transitional Jobs documentation.
- Work Experience documentation.
- Training contracts and agreements.
- Financial aid documentation, when applicable.
- Referrals.
- Participant correspondence; and
- Other documentation supporting services provided.

C. Case Management Documentation

The electronic case file shall include complete case management documentation, including, but not limited to:

- Case notes documenting participant contacts and services.
- Progress reviews.
- Follow-up activities.
- Participant status changes.
- Barriers identified during participation.
- Supportive service needs.
- Interventions provided.
- Delays affecting service delivery or program administration.
- Communications with participants, employers, training providers, or partner agencies; and
- Documentation supporting significant program decisions.

D. Fiscal Documentation

The electronic case file shall include documentation supporting expenditures and financial transactions, including, but not limited to:

- Funding approvals.

- Payment authorizations.
- Invoices.
- Receipts.
- Timesheets.
- Payroll documentation, when applicable.
- Supportive service payment documentation.
- Training payment documentation.
- Refunds, credits, or adjustments; and
- Other fiscal records necessary to support the allowability, allocability, and reasonableness of expenditures.

E. Performance Documentation

The electronic case file shall include documentation supporting participant outcomes and performance accountability, including, but not limited to:

- Measurable Skill Gains (MSGs).
- Credential attainment.
- Employment verification.
- Educational progress.
- Training completion.
- Exit documentation.
- Follow-up documentation; and
- Other records necessary to support federal and state performance reporting.

F. Monitoring and Compliance Documentation

The electronic case file shall include documentation related to monitoring and oversight activities, including, but not limited to:

- Monitoring observations.
- Corrective actions.
- Technical assistance, when applicable.
- Documentation supporting the resolution of findings.
- Quality assurance reviews; and
- Other documentation necessary to demonstrate ongoing compliance with Board policies and applicable federal and state requirements.

Timeliness of Documentation

Documentation shall be uploaded to the official electronic case file as soon as practicable following receipt or creation. Service providers shall establish procedures to ensure documentation is maintained promptly and shall not delay uploading required records until participant exit or file closure.

When required documentation cannot be obtained within established timeframes, staff shall document the reason for the delay, actions taken to obtain the documentation, communications with the participant or other appropriate parties, and, when applicable, the date the issue was resolved.

VII. DOCUMENT QUALITY STANDARDS

All documentation maintained within the official electronic case file shall be complete, accurate, legible, timely, and sufficient to support participant eligibility, services provided, expenditures, performance outcomes, and compliance with applicable federal and state requirements.

Documents uploaded to the official electronic case file shall accurately reflect the original record. They shall not be altered, modified, redacted, obscured, cropped, or otherwise manipulated in a manner that removes or conceals information necessary to verify eligibility, services, expenditures, performance outcomes, or compliance, unless expressly authorized by applicable federal or state law.
To ensure the integrity of the official electronic case file, documentation shall meet the following minimum standards:

A. Completeness
All required pages of a document shall be uploaded to the official electronic case file. Documentation shall include all information necessary to support participant eligibility, services, expenditures, and program requirements. Partial documents, missing pages, or incomplete records shall not be considered sufficient documentation.

B. Accuracy
Documentation shall accurately reflect the participant's circumstances, services received, expenditures incurred, and program activities. Staff shall verify documentation accuracy before uploading it to the official electronic case file.

C. Legibility
Documents shall be scanned or uploaded to ensure all text, signatures, dates, and other relevant information are clear and readable. Documents that are illegible, incomplete, or otherwise unreadable shall be replaced with a legible copy whenever possible.

D. Authenticity
Documentation maintained within the official electronic case file shall accurately represent the source document. Altered, falsified, or otherwise inaccurate documentation is prohibited.

E. Timeliness
Documentation shall be uploaded to the official electronic case file as soon as practicable Following receipt or creation and in accordance with Board procedures. Documentation shall not be withheld until participant exit or program completion.

F. Consistency

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Documentation maintained in the official electronic case file shall be consistent with participant case notes, activity records, fiscal documentation, performance reporting, and other supporting records. Any discrepancies shall be investigated, resolved, and documented in the electronic case file.

G. File Integrity

Documents shall be uploaded in a commonly accepted electronic format that preserves the integrity of the original document and enables retrieval, review, monitoring, and auditing. Duplicate, unnecessary, or superseded documents should be avoided unless required to preserve a complete record or document revisions.

H. Prohibition on Alteration or Redaction

Except where expressly authorized by applicable federal or state law, documents maintained within the official electronic case file shall not be altered, modified, redacted, obscured, cropped, or otherwise manipulated in a manner that removes or conceals information required to verify participant eligibility, services, expenditures, performance outcomes, or compliance.

When applicable law requires protecting confidential information, the Board and its service providers shall maintain records in a manner that protects participant privacy while preserving complete documentation for authorized monitoring, audit, investigation, or oversight activities. The Board shall maintain original documentation and make it available to authorized federal, state, or local oversight entities upon request.

VIII. PROTECTION OF PERSONALLY IDENTIFIABLE INFORMATION (PII), CONFIDENTIALITY, AND INFORMATION SECURITY

The Northern Area Local Workforce Development Board (NALWDB), its service providers, Subrecipients, training providers, and staff shall protect the confidentiality, integrity, and security of participant information maintained within the official electronic case file in accordance with applicable federal and state laws, regulations, guidance, and Board policies.

Access to participant records shall be limited to authorized individuals whose official duties require access to the information for program administration, service delivery, monitoring, fiscal oversight, reporting, or other authorized purposes.

Personally Identifiable Information (PII), Protected Health Information (PHI), educational records, disability-related documentation, financial information, and other confidential records shall be handled in a manner that safeguards participant privacy while ensuring that authorized oversight entities have access to complete documentation necessary to conduct monitoring, audits, investigations, and compliance reviews.

A. Protection of Confidential Information

The Board, service providers, and subrecipients shall implement administrative, physical, and Technical safeguards to protect confidential information from unauthorized access, disclosure, alteration, destruction, or misuse.

Confidential information shall be collected, used, disclosed, transmitted, and retained only as necessary to administer Workforce Innovation and Opportunity Act (WIOA) programs and in accordance with applicable legal requirements.

B. Access Controls

Access to the official electronic case file shall be restricted to authorized personnel based upon assigned job responsibilities.

Authorized users shall:

1. Access participant information only as necessary to perform official duties.
2. Protect system credentials and passwords.
3. Prevent unauthorized viewing or disclosure of participant information.
4. Comply with all Board confidentiality and information security requirements.

C. Transmission of Confidential Information

When confidential information is transmitted electronically, appropriate safeguards shall be implemented to protect its confidentiality and integrity. Personally Identifiable Information shall not be transmitted through unsecured methods unless specifically authorized by applicable law or Board procedures.

D. Breach Reporting

Any suspected or confirmed unauthorized access, disclosure, loss, theft, or compromise of confidential Participant information shall be reported immediately in accordance with Board procedures and Applicable federal and state reporting requirements.

The Board shall investigate reported incidents, implement appropriate corrective actions, and comply With any required notification obligations.

E. Privacy and Monitoring

The protection of confidential information shall not prevent authorized federal, state, local, or independent oversight entities from accessing complete participant records when conducting monitoring, audits, investigations, or other official reviews.

Authorized oversight entities shall be provided with access to complete, unaltered documentation necessary to verify compliance with applicable program requirements while maintaining appropriate confidentiality protections.

IX. RECORD RETENTION, CORRECTIONS, AND DOCUMENT MANAGEMENT

The Northern Area Local Workforce Development Board (NALWDB), its service providers, and subrecipients shall maintain electronic records in a manner that preserves the completeness, accuracy, authenticity, accessibility, and integrity of the official electronic case file throughout the applicable record retention period.

Electronic records shall remain available for monitoring, audit, investigation, litigation, data validation, fiscal review, and other authorized oversight activities for the period required by applicable federal and state laws, regulations, guidance, grant requirements, contractual obligations, and Board policies.

A. Record Retention

Electronic records shall be retained for the period required by applicable federal and state record retention requirements. Records shall not be destroyed, deleted, or otherwise disposed of while they remain subject to an active retention requirement.

When multiple record retention requirements apply, the longest applicable retention period shall govern.

B. Litigation Holds, Audits, and Investigations

Records subject to an audit, monitoring review, investigation, litigation, claim, questioned cost, records request, or other official action shall be retained until all issues have been fully resolved and authorization for disposition has been provided in accordance with applicable requirements, regardless of whether the standard record retention period has expired.

C. Corrections and Amendments

When documentation requires correction after it has been uploaded to the official electronic case file, the correction shall preserve the integrity of the original record whenever practicable.

Corrections shall:

1. Clearly identify the corrected information.
2. Document the reason for the correction, when appropriate;
3. Be supported by appropriate source documentation.
4. Be completed in accordance with Board procedures; and
5. Not conceal or remove information necessary to demonstrate the history of the participant record.

D. Replacement or Superseded Documents

When revised documentation replaces an earlier version, the electronic case file shall clearly identify

the current document and, when appropriate, maintain sufficient documentation to explain the revision.
Replacement documentation shall not obscure or eliminate documentation necessary to Demonstrate compliance with applicable program requirements.

E. Deletion of Records

Documents that are required to support participant eligibility, services, expenditures, and Performance outcomes, or compliance, shall not be deleted from the official electronic case file unless authorized by applicable law, regulation, or Board procedure.
When the removal of a document is authorized, documentation supporting the reason for the Deletion shall be maintained when applicable.

F. Accessibility of Records

Electronic records shall remain organized and accessible throughout the retention period to facilitate case management, fiscal oversight, monitoring, audits, data validation, public records requests, and other authorized reviews.
Records shall be maintained in a manner that allows authorized users to locate and retrieve efficiently, and review documentation supporting participant eligibility, services, expenditures, and program outcomes.

X. INTERNAL CONTROLS AND QUALITY ASSURANCE

The Northern Area Local Workforce Development Board (NALWDB), its service providers, and subrecipients shall establish and maintain effective internal controls and quality assurance processes to ensure the completeness, accuracy, integrity, security, and timeliness of electronic case files. Internal controls shall be designed to promote compliance with applicable federal and state laws, regulations, guidance, contractual requirements, and Board policies while safeguarding public funds and supporting accurate program administration.

A. Internal Control Standards

The Board, service providers, and subrecipients shall maintain internal control systems that promote:

1. Accurate and complete documentation.
2. Timely maintenance of electronic case files.
3. Compliance with eligibility and program requirements.
4. Proper authorization of expenditures.
5. Protection of confidential information.
6. Accurate reporting of participant activities and performance outcomes; and
7. Compliance with applicable fiscal and recordkeeping requirements.

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B. Supervisory Review

Service providers shall implement supervisory review processes designed to ensure electronic case files are complete, accurate, and compliant before participant exit, expenditure approval, performance reporting, or other significant program actions.

Supervisory reviews should identify documentation deficiencies, inconsistencies, or compliance issues early enough to allow corrective action whenever practicable.

C. Quality Assurance

The Board encourages ongoing quality assurance activities that support continuous improvement and strengthen program integrity. Such activities may include periodic file reviews, internal monitoring, peer reviews, data validation, staff coaching, and other quality improvement efforts designed to identify and address documentation deficiencies before they result in monitoring findings or questioned costs.

Quality assurance activities should promote consistency in documentation practices, improve compliance, and support the delivery of high-quality participant services.

D. Corrective Action

When deficiencies are identified through supervisory review, quality assurance activities, and monitoring, audits, or other oversight processes, the party responsible take timely and appropriate corrective action.

Corrective actions should address the underlying cause of the deficiency and include appropriate documentation of the resolution, and incorporate process improvements or staff training when necessary to reduce the likelihood of recurrence.

E. Staff Training

The Board, service providers, and subrecipients shall ensure that personnel are responsible for maintaining electronic case files, receiving appropriate training regarding documentation standards, confidentiality requirements, electronic records management, applicable Board policies, and changes to federal or state requirements.
Training should be provided as necessary to promote consistent implementation of this policy and support continuous quality improvement.

F. Continuous Improvement

The Board is committed to continuous improvement in the administration of Workforce Innovation and Opportunity Act (WIOA) programs. Information obtained through monitoring, audits, and technical assistance, quality assurance activities, performance reviews, and other oversight

processes should be used to strengthen internal controls, improve documentation practices, enhance staff training and support consistent compliance with applicable requirements.

XI. MONITORING AND COMPLIANCE

The Northern Area Local Workforce Development Board (NALWDB) shall monitor compliance with this policy as part of its oversight responsibilities under the Workforce Innovation and Opportunity Act (WIOA). Monitoring activities evaluate compliance with applicable federal and state laws, regulations, guidance, contractual requirements, and Board policies while promoting accountability, fiscal integrity, continuous improvement, and high-quality participant services.

The Board may conduct monitoring through on-site reviews, desk reviews, electronic file reviews, fiscal reviews, data validation, technical assistance, follow-up reviews, or other oversight activities deemed appropriate to assess compliance with this policy.

A. Scope of Monitoring

Monitoring activities may include, but are not limited to, review of:

1. Participant eligibility documentation.
2. Electronic case file completeness and quality.
3. Case management documentation.
4. Service delivery and program activities.
5. Fiscal documentation and expenditures.
6. Performance documentation.
7. Record retention and confidentiality practices.
8. Internal controls and quality assurance processes; and
9. Compliance with applicable federal, state, local, and contractual requirements.

B. Monitoring Results

Monitoring results may include findings, questioned costs, observations, recommendations, technical assistance, commendations, or other conclusions based upon the nature and significance of the issues identified.

The absence of a finding during a monitoring review shall not relieve a service provider or subrecipient of its continuing responsibility to comply with applicable requirements.

C. Corrective Action

When monitoring identifies deficiencies or noncompliance, the Board may require corrective action appropriate to the issue's nature and severity.

Corrective actions may include:

1. Submission of additional documentation.
2. Revision of policies or procedures.
3. Staff training or technical assistance.
4. Repayment of disallowed or questioned costs, when required.
5. Development and implementation of corrective action plans.
6. Increased monitoring or follow-up reviews; or
7. Other actions authorized by applicable law, regulation, contract, or Board policy.

Service providers and subrecipients shall cooperate with monitoring activities and respond to corrective action requirements within time frames established by the Board.

D. Technical Assistance and Continuous Improvement

The Board recognizes monitoring as both an accountability function and an opportunity to strengthen program administration. Monitoring activities may include technical assistance, collaborative problem-solving, and recommendations intended to improve documentation practices, internal controls, program performance, and overall compliance.

Information obtained through monitoring shall be used, when appropriate, to improve policies, procedures, training, and operational practices in support of continuous improvement.

XII. POLICY INTERPRETATION, ADMINISTRATION, EFFECTIVE DATE, AND REVIEW

A. Policy Administration

The Executive Director, or designee, is responsible for the administration and implementation of this policy and may develop administrative procedures, forms, guidance, or other operational documents necessary to support its consistent application, provided such documents do not conflict with applicable federal or state laws, regulations, guidance, or Board policy.

B. Policy Interpretation

The Executive Director, or designee, may interpret this policy and resolve questions about its implementation, consistent with applicable federal and state laws, regulations, guidance, grant requirements, and Board policies.

Nothing in this policy shall be interpreted to permit actions that conflict with federal or state law, regulation, grant requirements, or directives issued by the New Mexico Department of Workforce Solutions (NMDWS) or the U.S. Department of Labor (USDOL).

C. Conflicts with Federal or State Requirements

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If any provision of this policy conflicts with applicable federal or state laws, regulations, guidance, or grant requirements, the applicable federal or state authority shall govern. The remaining provisions of this policy shall remain in full force and effect.

D. Policy Review and Revision

The Board shall review this policy periodically to ensure continued compliance with applicable federal and state laws, regulations, guidance, grant requirements, and operational needs.

The Board may amend this policy at any time as necessary to reflect changes in legal requirements, funding conditions, administrative guidance, or Board priorities.

E. Supersession

This policy supersedes all previous Northern Area Local Workforce Development Board policies, procedures, or guidance relating to the management and maintenance of official electronic participant case files to the extent they are inconsistent with this policy.

F. Effective Date

This policy shall become effective upon approval by the Northern Area Local Workforce Development Board and shall remain in effect until modified or rescinded by Board action.

Jm RR

BOARD CHAIR

9-17-2026

DATE