

	New Jersey Workforce Innovation Notice		WD-PY22-15
	Issued By:	Workforce Development, Division of Career Services	
	Approved By:	Yolanda Allen, Assistant Commissioner Workforce Development	
	Issued Date:	June 29, 2023	

**SUBJECT: Procedures for Workforce Innovation and Opportunity Act (WIOA) Transfer of Funds and Additional Funding Requests**

**PURPOSE:** This policy provides procedures for the request of additional WIOA funds from New Jersey Department of Labor (NJDOLE) to support Title I Adult, Dislocated Worker, and Youth programs, as well as procedures for requesting the transfer of funds between local WIOA Adult and Dislocated Worker programs based on requirements in the WIOA Final Rules at 683.130(c).

**EFFECTIVE DATE:** This New Jersey Workforce Innovation Notice is *effective immediately*.

**POLICY RESCISSONS:** This policy rescinds and replaces WD-PY21-2 immediately.

**FOR MORE INFORMATION:** Questions about this policy may be directed to [WIOAPolicy@dol.nj.gov](mailto:WIOAPolicy@dol.nj.gov).

**POLICY OVERVIEW**

Local Workforce Development Boards (LWDBs) have the authority to transfer up to 100 percent of the Adult Activities funds to Dislocated Worker Activities, and up to 100 percent of the Dislocated Worker Activities funds to Adult Activities with the approval of NJDOLE. There is no authority to transfer funds to or from the Youth Activities Program.

Additionally, LWDBs may request additional funds beyond the formula amounts granted to each Local Workforce Development Area (LWDA). These funds may be used to provide services allowed under WIOA, including additional Individual Training Accounts (ITAs) and On-the-Job Training (OJT) opportunities, as well as through special projects or initiatives related to service delivery.

This policy lays out specific details regarding transfer and additional requests, including that

1. Requests must be submitted using the forms attached to this policy
2. Requests must be submitted in a timely manner – allowing for review and processing
3. Submissions include specific details regarding the use of funds, justification for funds, and documentation of expenditures and level of service prior to the request

**Transfer of Fund and Additional Funding Requests**

Request for transfer of funds and/or additional funding must be submitted via the two forms included in this policy.

- Request for Transfer of WIOA Funds on page 5 can also be found here as a fillable form: <https://www.nj.gov/labor/wioa/documents/resources/RequestforTransferofWIOAFunds.pdf>
- Request for Additional WIOA Funding on page 6 can also be found here as a fillable form: <https://www.nj.gov/labor/wioa/documents/resources/RequestforAdditionalWIOAFunding.pdf>

Table 1 below provides an overview of the elements that must be submitted for transfer requests, and additional allocation requests.

**Table 1: Overview of Request Submission Requirements**

<b>Submission Requirements</b>	<b>Transfer Requests</b>	<b>Additional Funding Requests</b>
Signature of the LWDB director, LWDB chair, and Chief Elected Official	✓	✓
The nature of the transfer request	Adult to DW OR DW to Adult	Funding source and type of service or initiative additional funding will support
The dollar amount of the transfer request	✓ (Must specify percentage of base allocation)	✓
Expected level of service	✓ (Estimates included in narrative)	✓ (Specific target must be included)
Expected timeframe for use of funds	✓	✓
Justification for request and plans for use of funds	✓ (Must include assurance that transfer will not adversely impact services)	✓
All relevant data, including level of service reports and expenditures for current impacted funding streams	✓	✓

Forms with incomplete information will not be approved and additional information may be required for any transfer requests greater than 50 percent of the base allocation.

In addition to the forms and documentation outlined above:

- Prior to requesting a transfer of funds, the local area must ensure that all WIOA subrecipient agreements in SAGE and in place between NJDOL and the local area have been received, accepted, and approved by all parties.
- NJDOL may also request that any other documents or materials outstanding to NJDOL from the local area be submitted prior to the review and/or approval of the transfer or additional funds request. Please note, these documents may be distinct from this specific budget request. In other words, the local area must be up to date on all required report/information submissions to NJDOL.

**Criteria for Approving Requests**

The following criteria will be used in evaluating the request for the transfer of funds:

<p>Dislocated Worker transfer to Adult</p>	<ol style="list-style-type: none"> <li>1. The LWDB must certify that it lacks sufficient funds from other sources to adequately serve the WIOA Adult priority populations: <ul style="list-style-type: none"> <li>• Public Assistance Recipients</li> <li>• Other Low-Income Individuals</li> <li>• Basic Skills Deficient Individuals</li> </ul> </li> <li>2. The LWDB must certify that it has determined that there are no pending layoffs within their local area that will impact the Dislocated Worker program.</li> <li>3. The State will consider any impact on potential eligibility for National Dislocated Worker Grants.</li> </ol>
<p>Adult transfer to Dislocated Worker</p>	<p>The LWDB must certify that they have sufficient adult funds (i.e. TANF, GA, WIOA Adult) to serve the WIOA Adult priority population (public assistance recipients, other low- income individuals and basic skills deficient individuals) in the local area.</p>

For transfer and additional fund requests, NJDOL will examine relevant fiscal and program data upon receipt of the request. Please note that the submitting LWDB must have an obligation and expenditure rate of 80% or higher on any funding streams for which funds are being requested and submit specific contract information regarding obligated funds. In other word, the LWDB must demonstrate that the local area will not have sufficient funding for services without approval of the pending request.

Additionally, for additional fund requests NJDOL will also consider the following:

- Whether details regarding planned levels of service and expected begin and end dates for additional funding expenditures are consistent with justifications and plans submitted
- That additional fund requests will support direct participant costs – e.g., ITAs, OJTs, or other direct services; no additional funds will be approved for administrative costs, personnel costs, or non-personnel costs

**NJDOL Approvals**

Requests should be submitted to the WIOA Program Oversight and Development (POD) Team at [WIOAPOD@dol.nj.gov](mailto:WIOAPOD@dol.nj.gov) and will be reviewed by NJDOL’s Workforce Development Division. NJDOL will respond to requests within ten (10) business days of form submission.

If the request is approved, the LWDB will receive a copy of their form signed by the Director of Career Services and Assistant Commissioner of Workforce Development approving the request and this will begin the process for allocating these funds through the SAGE system.

**Required LWDB Follow-up**

If conditions change after a transfer or additional fund request form is filed and/or approved, the LWDB must submit notice of any modifications to the WIOA POD team at [WIOAPOD@dol.nj.gov](mailto:WIOAPOD@dol.nj.gov).

In addition, any LWDB receiving additional funds will be required to submit a report documenting the specific expenditures, services, and outcomes resulting from the additional funding.

**Reference and Links**

WIOA Se. 133(b) (4); 20 CFR 683.130(b)

**Attachments:**

- Transfer Request Form
- Additional Fund Request Form



## Request for Transfer of WIOA Funds

Date of request: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Amount of transfer request: \_\_\_\_\_

Program Year of funds: \_\_\_\_\_

Nature of transfer request:  Transfer of WIOA Title I Adult funds to Title I Dislocated Worker funds  
 Transfer of WIOA Title I Dislocated Worker funds to Title I Adult funds

% of Total Allocation Transferred: \_\_\_\_\_

Expected begin and end date for expenditure of requested funds: Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Please certify that the following attachments are included in this request:**

- Submission of current budget expenditures and level of service for both Adult and Dislocated Worker funds for all current program year funding as of request date
- Justification for transferring funds, must include data and narrative detailing/referencing current service delivery and performance, reasons for requesting transfer, and assurance that transfer of funds will have no negative impact on Adult or Dislocated Worker populations in the LWDA
- Plans for use of transferred funds, must include data and narrative detailing/referencing expected service delivery

\_\_\_\_\_  
LWDB Director Date

\_\_\_\_\_  
Chief Local Elected Official Date

\_\_\_\_\_  
LWDB Chair Date

Fillable version of this form available here:  
<https://www.nj.gov/labor/wioa/documents/resources/RequestforTransferofWIOAFunds.pdf>



## Request for Additional WIOA Funding

Date of request: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Amount of funding request: \_\_\_\_\_

Nature of funding request:

- Individual Training Accounts (ITAs)
- On-the-Job Training (OJT)
- Other special projects/initiatives
- Other request

Funding requested for:

- WIOA Title I Adult
- WIOA Title I Dislocated Worker
- WIOA Title I Youth

Number of participants to be served: \_\_\_\_\_

Expected begin and end date for expenditure of requested funds:      Start Date: \_\_\_\_\_      End Date: \_\_\_\_\_

**Please certify that the following attachments are included in this request:**

- Submission of current budget expenditures and level of service for Adult, Dislocated Worker, and/or Youth funds associated with funding request, for all current program year funding as of request date
- Justification for request of funds, must include data and narrative detailing/referencing current service delivery and performance and reasons for requesting additional funds
- Plans for use of requested funds, must include data and narrative detailing/referencing expected service delivery

\_\_\_\_\_  
LWDB Director    Date

\_\_\_\_\_  
Chief Local Elected Official                          Date

\_\_\_\_\_  
LWDB Chair    Date

Fillable version of this form available here:  
<https://www.nj.gov/labor/wioa/documents/resources/RequestforAdditionalWIOAFunding.pdf>