TRADE ADJUSTMENT ASSISTANCE
AND
NAFTA TRANSITIONAL ADJUSTMENT ASSISTANCE

Reporting Elements and Definitions

General Instructions:

The Governor of each State will collect and maintain a core set of socio-economic, program participation, and participant outcome information on each applicant/participant in Trade Adjustment Assistance (TAA) and NAFTA Transitional Adjustment Assistance (NAFTA-TAA) under the Trade Act of 1974, as amended. Also, the Governor will transmit to the Office of Trade Adjustment Assistance (OTAA) of the Department of Labor this information for participants who have terminated from these programs during each calendar quarter.

The following instructions provide the format and definitions that will be used to collect and transmit the terminee information each quarter. All transmittals must be made within 45 days after the end of the reporting quarter. The data items in this system and their associated definitions are designed to provide information about program performance and outcomes for participants. The data items and their definitions are very similar, and in many cases identical, to those used by the Job Training Partnership Act (JTPA) programs for the same purposes.

For purposes of this reporting system, a participant shall be deemed to have terminated if that participant has completed all of his/her reemployment program, or withdrawn from such program prior to completion, and has received no other program benefits during the 90 days following completion/withdrawal.

Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondents’ obligation to reply to these reporting requirements is mandatory. The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of Trade Adjustment Assistance, Room C4318, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0392).
Instructions for Reporting Elements for TAA and NAFTA-TAA

Section I: Identification/Characteristics of Applicant

1. **State name:** Record the name of the State reporting the data.

2. **Social Security Number:** Record the individual’s Social Security Number (000000000). A pseudo-SSN may be assigned during intake if the applicant has no SSN or refuses to provide it, but a valid SSN for each individual must be obtained and recorded prior to termination and record transmittal.

3. **Date of Birth:** Record the date (MMDDYYYY) of birth of the individual.

4. **Gender:** Record 1 for male or 2 for female.

5. **Race/ethnicity:** Record the code (1, 2, 3, 4, 5, or 6) indicating the individual’s race/ethnic origin group from among the following categories:

   1. **American Indian or Alaska Native:** a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

   2. **Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

   3. **Black or African American:** a person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

   4. **Hispanic or Latino:** a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term “Spanish origin” can be used in addition to “Hispanic or Latino.”

   5. **Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

   6. **White:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

6. **Individual with a disability:** Any individual who has a physical (motion, vision, hearing) or mental (learning or developmental) impairment which substantially limits one or more of such person’s major life activities and has a record of such impairment, or is regarded as having such an impairment. Record the code (1, 2, or 3) as follows:
1. Yes, the individual has such an impairment that **does** result in a substantial barrier to employment;
2. Yes, the individual has such an impairment that **does not** result in a substantial barrier to employment; or
3. No, the individual has no disability.

7. **Veteran status:** Record 1 for Yes or 2 for No to indicate whether or not the participant is a person who (A) served on active duty in the U.S. military for a period of more than 180 days and who was discharged or released with other than a dishonorable discharge, or (B) was discharged or released from active duty because of a service-connected disability, or (C) was discharged as a member of a reserve component under an order to active duty.

8. **Highest school grade completed:** Enter the highest school grade completed (00) by the individual, using the following codes:
   - 00 no school grade completed
   - 01-11 number of elementary/secondary grades completed (participants who completed 12th grade but did not receive a diploma or equivalent are to be coded “11”)
   - 12 high school graduate or equivalent
   - 13-15 if a high school graduate or equivalent, the number of school years completed during college or **full-time** technical or vocational school
   - 16 Bachelor’s degree or equivalent
   - 17 fifth year of full-time college, Master’s degree (1-year program) or equivalent
   - 18 sixth year or more of full-time college, Master’s degree (2-year program, Ph.D., or equivalent

9. **Limited English language proficiency:** Record 1 for Yes or 2 for No to indicate whether an individual, whose native language is not English, is unable to communicate in English, resulting in a barrier to employment.

10. **Qualifying separation date:** The date of separation from trade-impacted employment that qualifies the individual to apply for adjustment assistance.

11. **Wage at qualifying separation:** Record the hourly wage (000.00) paid to the participant at the time of the participant’s qualifying separation.

12. **Tenure with employer at qualifying separation:** Record the number of months that the applicant was employed with the employer of record as of the applicant’s qualifying separation.
13. **Date of application**: Record the date (MMDDYYYY) on which the individual applied for entry into the TAA or NAFTA-TAA program.

14. **Petition number**: Record the number of the certification which applies to the applicant’s worker group. If there is more than one petition number (for example, one each of TAA and NAFTA-TAA petition numbers), record the petition number of the program from which benefits are paid.

15. **Program of participation**: Enter the program under which the participant received benefits, using the following codes:
   1. TAA
   2. NAFTA-TAA
   3. Both

16. **Date of participation**: Record the date (MMDDYYYY) on which the individual began to receive TAA- or NAFTA-TAA-funded program services after initial screening for eligibility and after eligibility determination. An applicant becomes a participant upon first receipt of basic reemployment service (even if not funded by TAA or NAFTA-TAA), retraining (including travel and/or subsistence), Trade Readjustment Allowance, job search allowance, or relocation allowance.

17. **Unemployment compensation status**: Record the code (1, 2, or 3) indicating which of the following classifications best describes the individual’s UC status at the time of application:
   1. **Claimant**: an individual who has filed a claim and has been determined monetarily eligible for benefit payments under one or more State or Federal unemployment compensation programs, and who has not exhausted benefit rights or whose benefit period has not ended.
   2. **Exhaustee**: an individual who has exhausted all UC benefit rights for which the applicant has been determined monetarily eligible, including extended supplemental benefit rights.
   3. **None**.

**Section II: Activity and Service Record**

This section provides a record of the program benefits received by the participant.

1. **Training**: Record the following items for the occupational training received by the participant:
1a. Date entered: Record the date (MMDDYYYY) the participant’s training began.

1b. Date completed or withdrew: Record the date (MMDDYYYY) the participant completed his/her occupational training or withdrew permanently from such training.

1c. Training completed: Record 1 if the participant completed his/her occupational training course or 2 if he/she withdrew.

1d. Travel while in training: Record 1 if the participant received compensation for travel while in training or 2 if the participant did not.

1e. Subsistence while in training: Record 1 if the participant received an allowance for subsistence while in training or 2 if the participant did not.

1f. Occupational code: If the participant received any non-classroom training for a specific occupation, record the 9-digit DOT code or the 5-digit OES code that best describes the occupation. If the participant received classroom occupational skills training, either of these (DOT or OES) or the 6-digit CIP code that best describes the training should be recorded. If the participant received no specific occupational training, record 000000000. Record the appropriate code for the type of system used: 1 for 9-digit DOT code, 2 for 5-digit OES code, 3 for 6-digit CIP code, or 6 for no code.

1g. Type of training: Record 1 if the participant received remedial training, 2 if the participant received occupational (classroom) training, or 3 if the participant received on-the-job training (OJT).

2. Trade Readjustment Allowance (TRA): Record 1 if the participant received basic TRA, 2 if the participant received additional TRA, 3 if the participant received both basic and additional TRA, or 4 if the participant did not receive TRA.

3. Waiver from training: Record 1 if the participant received a waiver from the training requirement in order to receive TRA, or 2 if the participant did not receive such a waiver.

4. Job search allowance: Record 1 if the participant received a job search allowance or 2 if the participant did not.

5. Relocation allowance: Record 1 if the participant received a relocation allowance or 2 if the participant did not.

6. Basic reemployment service (BRS): Record 1 if the participant received any basic reemployment services, even if not funded by TAA or NAFTA-TAA, or a 2 if the participant did not receive such services.
7. **Other Federal program coenrollment**: Record a 1 if the participant also received services under the JTPA Title III adult dislocated worker program, a 2 if the participant received a Pell educational grant, 3 if the participant received Title III services and a Pell grant, or a 4 if the participant received another Federal job training benefit but not a JTPA Title III nor a Pell grant benefit.

**Section III: Program Terminations and Other Outcomes**

1. **Date of termination**: Record the date (MMDDYYYY) at which the participant is determined to have terminated from the TAA or NAFTA-TAA programs. A participant shall be deemed to have terminated if that participant has completed all of his/her reemployment program, or withdrawn from such program prior to completion, and has received no other program benefits during the 90 days following completion/withdrawal.

2. **Entered unsubsidized employment**: Record 1 for Yes, 2 for No, or 9 for unknown indicating whether the terminee entered full- or part-time unsubsidized employment, i.e. not financed by funds provided under the Trade Act, including entry into the Armed Forces, entry into employment in a registered apprenticeship program, and self-employment.

3. **Employment information**: if Item 2, Entered unsubsidized employment, is 1 for Yes, record the following information:

   3a. **Hours worked per week**: Record the usual number of hours (00) of work scheduled per week in whole hour increments (no fractions of hours), including overtime; enter 99 for unknown.

   3b. **Hourly wage at termination**: Record the hourly wage at termination (000.00); enter 0 for unknown. Hourly wage includes any bonuses, tips, gratuities, commissions, and overtime pay earned.

   3c. **Received fringe benefits**: Record 1 for Yes, 2 for No, or 9 for unknown indicating whether or not the employment provides the individual with fringe benefits consisting of, at a minimum, health insurance benefits and coverage under Social Security or an equivalent pension plan. NOTE: In cases where a period of probation is required by the employer for a newly-hired individual, during which time fringe benefits are NOT provided, if such employment normally provides fringe benefits after the period of probation, record a 1 for Yes in this item.

   3d. **Occupational code and type**: Record the occupational code (000000000), either 9-digit DOT or 5-digit OES, most appropriate for the job. For individuals holding multiple jobs, record the code for the job with the
largest number of hours worked. Record the appropriate code for the type of system used: 1 for 9-digit DOT code, 2 for 5-digit OES code, or 9 for unknown.

3e. **State where job is located**: Record the two-digit FIPS State code (00) where the job is located. If the job is located outside of the U.S., record "99"; if State is unknown, record “00”.

3f. **Job covered by Unemployment Insurance**: Record 1 for Yes, 2 for No, or 9 for unknown indicating whether or not the job is covered by the Unemployment Insurance system.

3g. **Recalled by former employer**: Record 1 for Yes, 2 for No, or 9 for Unknown indicating whether the participant was recalled by the employer at which the qualifying separation occurred.
TRADE ADJUSTMENT ASSISTANCE
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NAFTA TRANSITIONAL ADJUSTMENT ASSISTANCE

Reporting Format

Section I: Identification/Characteristics of Applicant

1. State name: 
2. Social Security Number: (000000000)
3. Date of Birth: (MMDDYYYY)
4. Gender: 
   1  Male
   2  Female
5. Race/ethnicity: 
   1  American Indian or Alaska Native
   2  Asian
   3  Black or African American
   4  Hispanic or Latino
   5  Native Hawaiian or Other Pacific Islander
   6  White
6. Individual with a disability: 
   1  Yes, and a substantial barrier to employment
   2  Yes, but not a substantial barrier to employment
   3  No
7. Veteran status: 
   1  Yes
   2  No
8. Highest school grade completed: (00)
9. Limited English language proficiency: 
   1  Yes
   2  No
10. Qualifying separation date: (MMDDYYYY)
11. Wage at qualifying separation: (000.00)
12. Tenure with employer at qualifying separation: (000)
13. Date of application: (MMDDYYYY)
14. Petition number: (000000)
15. Program of participation: 
   1  TAA
   2  NAFTA-TAA
   3  Both
16. Date of participation: (MMDDYYYY)
17. Unemployment compensation status: 
   1  Claimant
   2  Exhaustee
   3  None
Section II: Activity and Service Record

This section provides a record of the program benefits received by the participant.

1. Training leading to reemployment:
   1a. Date entered: (MMDDYYYY)
   1b. Date completed or withdrew: (MMDDYYYY)
   1c. Training completed: 1 Completed 2 Withdrew
   1d. Travel while in training: 1 Yes 2 No
   1e. Subsistence while in training: 1 Yes 2 No
   1f. Training occupational code: (000000000)
       and type: 1 9-digit DOT code 2 5-digit OES code
       3 6-digit CIP code (training only) 6 None
   1g. Type of training: 1 Remedial
       2 Classroom occupational
       3 On-the-job (OJT)

2. Trade Readjustment Allowance (TRA): 1 Basic
   2 Additional
   3 Both basic and additional
   4 None

3. Waiver from training: 1 Yes 2 No

4. Job search allowance: 1 Yes 2 No

5. Relocation allowance: 1 Yes 2 No

6. Basic reemployment service (BRS): 1 Yes 2 No

7. Other Federal program coenrollment: 1. JTPA Title III
   2. Pell
   3. Title III and Pell
   4. Other, not Title III or Pell
Section III: Program Terminations and Other Outcomes

1. Date of termination: (MMDDYYYY)

2. Entered unsubsidized employment: 1 Yes
   2 No
   9 Unknown

3. Employment information:
   3a. Hours worked per week: (00)
   3b. Hourly wage at termination: (000.00)
   3c. Received fringe benefits: 1 Yes
       2 No
       9 Unknown
   3d. Occupational code: (000000000)
       and type: 1 9-digit DOT
                   2 5-digit OES
                   9 Unknown
   3e. State where job is located: (00)
   3f. Job covered by Unemployment Insurance: 1 Yes
       2 No
       9 Unknown
   3g. Recalled by former employer: 1 Yes
       2 No
       9 Unknown