



**South Central Workforce**

MIS Exit / Performance Transmittal

WIOA Adult, Dislocated Worker, Youth, and Other Programs

Date: \_\_\_\_\_

Verified By: \_\_\_\_\_

	Youth	Adult	DW
PFP			
OTHER - MISC			

ETO Case Number	Participant Name	Exit date	Completed in ETO			Case Notes Submitted for Review have been Sent via Google Drive	Documents or Comments	
			Programs, Completion TP		Credential			MSG
			Exit Form is Uploaded in ETO	Date Exit Form was Uploaded	Verified Credential Documentation is Uploaded, if applicable			Verified MSG Documentation is Uploaded for ALL Test and Results TP, if applicable

Notes: \_\_\_\_\_

SCW ONLY  
Date Stamp:

SCW Review Initials: \_\_\_\_\_