

WIA Program Status Summary
 Title I-D, Section 167- National Farmworker Jobs
 Program (NFJP)

U.S. Department of Labor
 Employment and Training Administration

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a. Grantee Name and Address	b. Grant Number	OMB Approval No: 1205-0425
	c. Period of Grant From: To:	d. Reporting Period Expires 12/31/04

I. Participation and Termination Summary	Previous Period	Current Period	Grant Cumulative
	(A)	(B)	(C)
A. Total Participants Served			
1. New Participants			
2. Participants Carried Over From Previous Grant			
B. Total Number of Participants Exiting Program			
II. Participant Outcomes			
A. Entered Unsubsidized Employment			
B. Completed Training Services			
III. Total Current Participants (End of Period)			
IV. Participant Enrollments In Program Services			
A. Core Services			
B. Intensive Services			
C. Training Services			
D. Related Assistance Services			

Remarks:

III. CERTIFICATION — I certify that to the best of my knowledge this report is correct and complete as set forth in the grant agreement.

Name and Title of Authorized Official	Phone Number ()	Signature	Date Submitted (Month, Day, Year)
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