

WIA Program Planning Summary  
 Title I-D, Section 167 - Migrant/Seasonal  
 Farmworker Youth Program

**U.S. Department of Labor**  
 Employment and Training Administration



**F**

a. Grantee Name and Address	b. Grant Number	OMB Approval No: 1205-0429 Expires: 11/30/06
	c. Period of Grant From: _____ To: _____	

I. Participation Summary	B. Cumulative Periods			
	1st	2nd	3rd	4th
A. Total Participants				
1. New Participants				
2. Participants Carried Over				
B. Total Number of Participants Exiting Program				
<b>II. Participant Outcomes</b>				
A. Entered Unsubsidized Employment				
B. Related Assistance Only				
C. Other Outcomes				
D. Total Current Participants (End-of-Period)				

Remarks

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 are required to obtain or retain benefits (20 CFR 667.300). The public reporting burden for this collection of information is estimated to average 15 hours 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 the burden, to the Office of National Programs, U.S. Department of Labor, 200 Constitution Avenue, N.W., Room N-4641, Washington, D.C. 20210 (Paperwork Reduction Project (1205-0429))

See Reverse Side for Instructions

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