

WIA TELEPHONE VERIFICATION AND DOCUMENT INSPECTION FORM
Policy #542

IDENTIFYING INFORMATION		
Applicant's Name:	_____	_____
	Last	First MI
Date:	_____	

WIA ELIGIBILITY VERIFICATION BY TELEPHONE

Name and/or Number of Document: _____

Eligibility Item(s) to be Verified:	_____
Information Verified:	_____
Agency Providing Verification:	_____
Date and Time of Verification:	_____
Phone Number of Agency Providing Verification:	_____

WIA ELIGIBILITY VERIFICATION BY DOCUMENT INSPECTION

Name and/or Number of Document: _____

Eligibility Item to be Verified:	_____
Information Verified:	_____
Document Inspected:	_____
Original Source of Document:	_____
Reason For Document Inspection:	<input type="checkbox"/> Remote Site Eligibility, No Copier Available
	<input type="checkbox"/> Participant Refusal
	<input type="checkbox"/> Document Cannot Be Copied

I attest that the information recorded by me on this document was obtained through telephone contact or document inspection.	
_____	_____
Staff Signature	Date