

ATTACHMENT A

Massachusetts Fiscal Year 2015 Local Annual Plan

Local Annual Plan Document Checklist

Please use this checklist to ensure completeness; indicate each item that is being submitted.

	Completed Local Annual Plan Document Checklist (<i>Attachment A</i>)
	Completed Annual Plan Narrative Response Template (<i>Attachment AA</i>)
	Notification of Local System Changes (<i>Attachment C</i>)
	One-Stop Career Center Hours of Operation Form (<i>Attachment D</i>)
	MOU Activity Summary Form (<i>Attachment F</i>)
	MOU and Annual Plan Signatories Form (<i>Attachment G</i>)
	Financial Modification Authorization Forms (<i>Attachment H</i>)
	<i>Attachment I (Charts Below):</i>
	Labor Exchange Program Summary (Chart #1)
	WIA Title I Program Summary for Adults (Chart #2)
	WIA Title I Program Summary for Dislocated Workers (Chart #3)
	WIA Title I Program Summary for Youth (Chart #4)
	Integrated Budget and Narrative (<i>Attachment L</i>)